



Waste Management
ENVIRONMENTAL QUALITY

SOLID WASTE MANAGEMENT FACILITY FIRE OCCURRENCE NOTIFICATION NCDEQ Division of Waste Management Solid Waste Section

Notify the Section verbally within 24 hours and submit written notification within 15 days of the occurrence.
(If additional space is needed, use back of this form.)

NAME OF FACILITY: Haywood County Treatment and Processing Facility PERMIT # 44-08-T&P

DATE AND TIME OF FIRE: 8/19/2016 @ about 1:30

HOW WAS THE FIRE REPORTED AND BY WHOM:
Local Fire department was notified to stand by in-case they were needed.

LIST ACTIONS TAKEN:
When Fire was discovered we shut the power off and put the fire out. Local Fire department was called just to stand by in-case they were needed.

WHAT WAS THE CAUSE OF THE FIRE:
Motor locked up on Baler and caught on fire.

DESCRIBE AREA, TYPE, AND AMOUNT OF WASTE INVOLVED:
No waste involved.

WHAT COULD HAVE BEEN DONE TO PREVENT THIS FIRE:
nothing

DESCRIBE PLAN OF ACTIONS TO PREVENT FUTURE INCIDENTS:
I am not aware of any.

NAME: Stephen King TITLE: Director of Operations DATE: 8/24/2016

THIS SECTION TO BE COMPLETED BY SOLID WASTE SECTION REGIONAL STAFF
DATE RECEIVED 8/24/2016
List any factors not listed that might have contributed to the fire or that might prevent occurrence of future fires:

FOLLOW-UP REQUIRED:
 NO PHONE CALL SUBMITTAL MEETING RETURN VISIT BY: _____ (DATE)

ACTIONS TAKEN OR REQUIRED: