IND	State of North Carolina Department of Environment and Natural Resources Division of Waste Management	**INDUSTRIAL WASTE LANDFILL** Facility Annual Report For the period of **July 1, 2013-June 30, 2014**

According to (G.S. 130A-309.09D(b)) completed forms must be returned by August 1, 2014 and a copy of this report must be sent to the County Manager of each county from which waste was received. If you have questions or require assistance in completing this report, contact your Regional Environmental Senior Specialist.

Facility Name: HALIFAX COUNTY LANDFILL Permit: 4204-INDUS 1994

Physical Address		Mailing Address	
Street 1: 921 LILES RD.		Street 1: HALIFAX CO. SOLID WASTE	
Street 2:		Street 2: P.O. BOX 70	
City: LITTLETON	County: HALIFAX	City: HALIFAX	
State: North Carolina	Zip: 27850	State: North Carolina	Zip: 27839

Primary Facility Contact Person		Billing Contact Person	
Name: LARRY D. GARRISS		Name:	
Phone: 252-584-7514	Fax:	Phone:	Fax:
Email: SOLIDWASTE@EMBARQMAIL.COM		Email:	

1. Tipping Fee: $ 1.56 per Ton (Attach a schedule of tipping fees if appropriate.)

2. Did your facility stop receiving waste during this past Fiscal Year? ☐ Yes ☐ No
   If so, please report the date this occurred: _____

3. Indicate types of disposal activity occurring at this facility (Check all that apply).
   - ☑ Landfilling of industrial waste (specify waste): _____
   - ☑ Landfilling of construction and demolition waste
   - ☑ Landfilling of asbestos
   - ☑ Landfilling of ash
   - ☑ Landfilling of sludge
   - ☐ Landfilling of other waste (specify): _____

4. What other activities occur at this facility? (check all that apply) ELECTRONICS COLLECTION - 11.43 TONS
   ☐ Recycling/Reuse Collection ☑ Scrap Tire Collection ☑ White Goods Collection ☐ Household Hazardous Waste Collection

   If you checked Recycling/Reuse Collection, please indicate the materials accepted: (check all that apply)

☐ Paper	☐ Wood	☐ Concrete/rubble/asphalt	☐ Gypsum/drywall
☐ Cardboard	☐ Glass	☐ Aluminum Cans	☐ Steel Cans
☐ PETE (#1) Plastic	☐ HDPE (#2) Plastic	☐ Computer Equipment	☐ Televisions
☐ Fluorescent lightbulbs	☐ Used oil/oil filters	☐ Other Metal	☐ Other Plastic

☐ Other (specify) _____

Airspace (Capacity): Questions in this section relate to all cells/units of the facility operated under the current 4-digit permit number regardless of whether the cells/units are closed or are not contiguous at the time of this report. Tonnage questions must be based on scale records and cover the period between the opening date and the date of the last survey unless another time period is approved. Airspace measurements include weekly, intermediate and final cover.	5. Date Facility Last Surveyed: 6/17/14 6. Airspace Used (cubic yards): 872,915 7. Total Tons Disposed in Airspace Used (tons): 681,308

8. Total waste landfilled at this facility during the period of July 1, 2013, through June 30, 2014. Indicate **tonnage** received by COUNTY of waste origin. DO NOT include waste diverted for recycling, reuse, mulching, or composting. Please list ALL counties from which you received waste. Please indicate COUNTY and STATE, if received from another state.

Received from	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	Total
	13188.13												
		12829.14											
			11954.35										
				9646.72									
					9186.76								
						12459.72							
							11931.76						
								13033.70					
									11397.92				
										1798.99			
											641.43		
												9238.83	
									TOTAL -			117,307.45	

ALL COAL ASH + SLUDGE RECEIVED EXCLUSIVELY FROM ROANOKE VALLEY ENERGY FACILITY - WELDON N.C.

Grand Total

REMINDER: According to (G.S. 130A-309.09D(b)), this report must be sent to the Regional Environmental Senior Specialist for your area and a copy of this report must be sent to the County Manager of each county from which waste was received.

Please return your completed report to:

CERTIFICATION: I certify that the information provided is an accurate representation of the activity at this facility.

Signature: Larry D. Garriss Date: 7/25/14

Name: LARRY D. GARRISS Title: OPER. MGR. - SOLID WASTE DIV.

Phone Number: 252-586-7514 Email: SOLIDWASTE@EMBARQMAIL.COM

NC DENR
Division of Waste Management - Solid Waste Section

Risk Assessment Form

Facility Name: HALIFAX COUNTY LANDFILL – ASH MONOFILL Permit: 4204

Address: 921 LILES RD.

City: LITTLETON State: North Carolina Zip: 27850

Person completing Assessment: LARRY D. GARRISS Date: 7/25/14

Phone Number: 252-586-7516 Fax: 252-586-2685 Email: SOLIDWASTE@EMBARQMAIL.COM

Instructions:	Please indicate either *Yes or No* for each Receptor and Post Closure Maintenance question. Then please determine the distance or distances for each Receptor from the *Edge of Waste* (using range finders and/or GIS maps) and type that information into the form. Please attach additional information including GIS maps, lists of potable well locations, etc.

Receptors

1. Are there Residential Dwellings Within 1,500 feet of the Edge of Waste? ☐ Yes ☑ No

   If Yes, how many? _____
   What are the three closest distances from the *Edge of Waste*? _____ Feet _____ Feet _____ Feet

2. Are there Potable Wells Within 1,500 feet of the Edge of Waste? ☐ Yes ☑ No

   If Yes, how many? _____
   What are the three closest distances from the *Edge of Waste*? _____ Feet _____ Feet _____ Feet

3. Are there Community/Municipal Wells Within 1,500 feet of the Edge of Waste? ☐ Yes ☑ No

   If Yes, how many? _____
   What are the three closest distances from the *Edge of Waste*? _____ Feet _____ Feet _____ Feet

4. Are there Surface Water Bodies Within 1,500 feet of the Edge of Waste? ☐ Yes ☑ No

   If Yes, how many? _____
   What are the three closest distances from the *Edge of Waste*? _____ Feet _____ Feet _____ Feet

   Please list the names of the water bodies: _____

5. Is Public Water Available Within 1,500 feet of the Edge of Waste? ☑ Yes ☐ No

   If Yes, how many of the Residential Dwellings noted above are connected? _____

Corrective Measures

6. Is there an active methane extraction system (blower, flare, etc.)? ☐ Yes ☐ No
7. Is there a passive methane extraction system (trench, vents in cap, flare, etc.)? ☐ Yes ☐ No
8. Is there groundwater remediation taking place on site? ☐ Yes ☐ No

DNA

If Yes, what is the specific remedial technology used? _____

Comments