

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: Old 27 Landfill Permit: 36A-LCID-2010

Physical Address	Mailing Address
Street 1: <u>123 Tate Street</u>	Street 1: <u>P.O Box 414</u>
Street 2: _____	Street 2: _____
City: <u>Mt.Holly</u> County: <u>Gaston</u>	City: <u>Mt.Holly</u>
State: <u>North Carolina</u> Zip: <u>28120</u>	State: <u>North Carolina</u> Zip: <u>28120</u>

Primary Facility Contact Person	Billing Contact Person
Name: <u>Dwayne McCorkle</u>	Name: <u>Dwayne McCorkle</u>
Phone: <u>(704) 718-6386</u> Fax: _____	Phone: <u>(704) 718-6386</u> Fax: _____
Email: <u>old27landfill@carolina.rr.com</u>	Email: <u>old27landfill@carolina.rr.com</u>

- 1. Tipping Fee: \$90.00 per Trailer Load
- Tipping Fee: \$ 65.00 per Tri-Axle Load
- Tipping Fee: \$55.00 per Tandem Load

2. Estimate the amount of waste taken in an average week at this facility? 120  tons  cubic yards

3. How many weeks did you operate this year? 50

4. What are the hours/days of operation for this facility? 8:00am - 5:00pm Monday - Friday (Saturday's upon request)

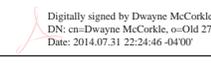
5. What is the acreage of the footprint of the waste on site as of June 30? 6 Acre(s)

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

**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:  
 Bill Wagner  
 2090 US Highway 70  
 Swannanoa, NC 28778  
 phone: 828.296.4705 email: Bill.Wagner@ncdenr.gov

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

Signature: Dwayne McCorkle  Date: Jul 31, 2014

Name: Dwayne McCorkle Title: Owner

Phone Number: (704) 718-6386 Email: old27landfill@carolina.rr.com

Facility Name: Old 27 Landfill Permit: 36A-LCID-2010

Address: 123 Tate Street

City: Mt.Holly State: North Carolina Zip: 28120

Person completing Assessment: Dwayne McCorkle Date: Jul 31, 2014

Phone Number: (704) 718-6386 Fax: \_\_\_\_\_ Email: old27landfill@carolina.rr.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  
If Yes, what is the specific remedial technology used? \_\_\_\_\_

**Comments**