OS	State of North Carolina Department of Environment and Natural Resources Division of Waste Management	**OUT OF STATE FACILITY** Facility Annual Report For the period of **July 1, 2014-June 30, 2015**

We ask that completed forms be returned to: NC Solid Waste Section, 1646 Mail Service Center, Raleigh, NC 27699 or by email. If you have questions or require assistance in completing this report, contact Ethan Brown (ethan.brown@ncdenr.gov or 919.707.8249).

Facility Name: LAKEWAY LANDFILL (BRANCH 103) Permit: SNL 32-0280

Facility Website (URL): WWW.WASTEINDUSTRIES.COM

Physical Address		Mailing Address	
Street 1:	5156 ENKA HWY	Street 1:	" "
Street 2:		Street 2:	
City:	MORRISTOWN	City:	
County:	HAMBLEN		
State:	TN	State:	
Zip:	37813	Zip:	

Primary Facility Contact Person		Secondary Facility Contact Person	
Name:	GEORGE METCALF	Name:	
Phone:	(423) 581-1053	Phone:	
Fax:	(423) 581-0030	Fax:	
Email:	GEORGE.METCALF@WASTEINDUSTRIES.COM	Email:	

1. What type of facility is this?

- [x] Municipal Solid Waste Landfill
- [ ] Construction & Demolition Landfill
- [ ] Industrial Landfill
- [ ] Other (specify) _____
- [ ] Transfer Station
- [ ] Treatment and Processor
- [ ] Materials Recovery

2. If this facility is a Transfer Station, Treatment and Processor, or Materials Recovery Facility, please indicate the facility(s) that received your non-recycled waste material:

NAME, PERMIT #, and LOCATION (city, state) of FACILITY	Facility Type	Tons
	TOTAL	

3. Total waste received at this facility during the period of July 1, 2014, through June 30, 2015 from NORTH CAROLINA COUNTIES. Indicate **tonnage** received by COUNTY of waste origin. If waste was received from a transfer station, indicate the COUNTY LOCATION OF THE TRANSFER STATION.

Received from	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	Total
MADISON	798.26	657.64	833.29	780.63	623.94	672.07	654.65	536.95	884.00	807.25	825.72	830.04	8,904.44

Grand Total 8,904.44

Return completed forms to:
Ethan Brown
NC Solid Waste Section
1646 Mail Service Center
Raleigh, NC 27699-1646

Or by e-mail:
ethan.brown@ncdenr.gov

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

Signature: [signature] Date: 9/10/15

Name: TYLER CHAMBERS Title: LEAD OPERATOR

Phone Number: (336) 480-8489 Email: TYLER.CHAMBERS@WASTEINDUSTRIES.COM