



According to (G.S. 130A-309.09D(b)) completed forms must be returned by August 1, 2015 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: Harnett County Dunn Erwin C&D Landfill

Permit: 4302-CDLF-1998

Physical Address	Mailing Address
Street 1: <u>449 Daniels Road</u>	Street 1: <u>PO Box 2773</u>
Street 2: _____	Street 2: _____
City: <u>Dunn</u> County: <u>Harnett</u>	City: <u>Lillington</u>
State: <u>North Carolina</u> Zip: <u>28334</u>	State: <u>North Carolina</u> Zip: <u>27546</u>

Primary Facility Contact Person	Billing Contact Person
Name: <u>Amanda Bader</u>	Name: <u>Amanda Bader</u>
Phone: <u>(910) 814-6156</u> Fax: <u>(910) 814-8263</u>	Phone: <u>(910) 814-6156</u> Fax: <u>(910) 814-8263</u>
Email: <u>abader@harnett.org</u>	Email: <u>abader@harnett.org</u>

1. Tipping Fee: \$40.00 per Ton (Attach a schedule of tipping fees if appropriate.)

2. Does the tip fee above include the \$2.00 Solid Waste Tax? Yes No

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

4. What other activities occur at this facility? (check all that apply)

- Recycling/Reuse Collection Scrap Tire Collection White Goods Collection Household Hazardous Waste Collection
- If you checked Recycling/Reuse Collection, please indicate the materials accepted and amount collected: (check all that apply and provide tonnages)
- Carpet _____ tons Concrete/rubble/asphalt _____ tons Gypsum/drywall _____ tons Other Metal 461.6 tons
- Cardboard 7.76 tons Shingles 27.19 tons Electronics 15.9 tons Other Plastic _____ tons
- Wood _____ tons Other (specify) Co-Mingled 37.42

Airspace (Capacity): Questions in this section relate to all cells/units of the C&D 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: 06/13/2015

6. Airspace Used (cubic yards): 603,682

7. Total Tons Disposed in Airspace Used (tons): 281,804

10. Are there SWANA or other certified operator(s) at this facility? Yes No

If yes, indicate the following:

Name: <u>Randall W. Smith</u>	Certification type and expiration date: <u>MOLO 6/17</u>
Name: <u>John Hall</u>	Certification type and expiration date: <u>Op. Specialist 4/14/18</u>
Name: <u>David Syck</u>	Certification type and expiration date: <u>TS 12/15/18; LF 2/07/18</u>
Name: <u>Franklin Williams</u>	Certification type and expiration date: <u>TS 10/16/16</u>
Name: _____	Certification type and expiration date: _____

11. Comments, suggestions or notes:

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:
Dennis Shackelford
225 Green Street, Suite 714
Fayetteville, NC 28301
phone: 910.433.3349 email: Dennis.Shackelford@ncdenr.gov

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

Signature: Amanda L. Bader by Beth M. Blinson Date: 7-31-2015

Name: Amanda L. Bader by Beth M. Blinson Title: County Engineer / Director Solid Waste

Phone Number: (910) 814-6156 Email: abader@harnett.org

Facility Name: Harnett County Dunn Erwin C&D Landfill Permit: 4302-CDLF-1998

Address: 449 Daniels Road

City: Dunn State: North Carolina Zip: 28334

Person completing Assessment: Amanda Bader Date: 7/30/2015

Phone Number: (910) 814-6156 Fax: (910) 814-8263 Email: abader@harnett.org

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? 1
 What are the three closest distances from the *Edge of Waste*? 1253.37 Feet _____ Feet _____ Feet
 Please list the names of the water bodies: unnamed tributary to Stewart's Creek
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? unknown

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? phytoremediation

Comments