C&D	State of North Carolina Department of Environment and Natural Resources Division of Waste Management	**CONSTRUCTION & DEMOLITION WASTE LANDFILL** Facility Annual Report For the period of **July 1, 2014-June 30, 2015**

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: Rutherford County Solid Waste Department Permit: 8103-CDLF-2002

Physical Address	Mailing Address
Street 1: 656 Laurel Hill Drive	Street 1: PO Box 1957
Street 2:	Street 2:
City: Rutherfordton County: Rutherford	City: Rutherfordton
State: North Carolina Zip: 28139	State: North Carolina Zip: 28139

Primary Facility Contact Person	Billing Contact Person
Name: James Kilgo	Name: James Kilgo
Phone: (828) 287-6002 Fax: (828) 287-6312	Phone: (828) 287-6002 Fax: (828) 287-6312
Email: james.kilgo@rutherfordcountync.gov	Email: james.kilgo@rutherfordcountync.gov

1. Tipping Fee: $37.00 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	687.31 tons
☐ Cardboard	tons	☐ Shingles	tons	☒ Electronics	142.01 tons	☐ Other Plastic	tons
☐ Wood	tons	☒ Other (specify)	CO-MINGLED RECYCLING 1323.33 TON				

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: 5/22/2015 6. Airspace Used (cubic yards): 128,908 7. Total Tons Disposed in Airspace Used (tons): 77,345

8. Total waste landfilled at this facility during the period of July 1, 2014, through June 30, 2015. Indicate **tonnage** received by COUNTY of waste origin. If waste was received from a transfer station, indicate the COUNTY LOCATION OF THE TRANSFER STATION. Do not include waste diverted for recycling, reuse, mulching, or composting. 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
Rutherford	410.48	684.23	572.75	483.42	488.66	577.19	499.34	337.29	741.82	511.34	489.1	830.38	6,626

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

If yes, indicate the following:

Name: Johnny Sisk	Certification type and expiration date: Landfill Operations Specialist March 30, 2018
Name: Chadwick McCurry	Certification type and expiration date: Landfill Operations Specialist February 13, 2018
Name: Tony Bumgarner	Certification type and expiration date: Landfill Operations Specialist February 23, 2016
Name: Chris Toney	Certification type and expiration date: Landfill Operations Specialist March 19, 2016
Name: Edward Mote	Certification type and expiration date: Landfill Operations Specialist February 4, 2017

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:

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: _____ Date: 7/16/2015

Name: Sarah Laughter Title: Secretary/ Weigh Master

Phone Number: (828) 287-6125 Email: sarah.laughter@rutherfordcountync.gov

NC DENR
Division of Waste Management - Solid Waste Section

Risk Assessment Form

Facility Name: Rutherford County Solid Waste Department Permit: 8103-CDLF-2002

Address: 656 Laurel Hill Drive

City: Rutherfordton State: North Carolina Zip: 28139

Person completing Assessment: Sarah Laughter Date:

Phone Number: (828) 287-6125 Fax: (828) 287-6312 Email: sarah.laughter@rutherfordcountync.gov

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? 3
   What are the three closest distances from the *Edge of Waste*? 50 Feet 485 Feet 570 Feet

   Please list the names of the water bodies: Cleghorn Crk; Stonecutter Crk; Cleghorn Crk.

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? All

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