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DEHNR-3832(10/91)
Solid Waste Section
(Review 10/92)

P0086 OK
1/8/92 BMR

State of North Carolina

Department of Environment, Health, and Natural Resources
Division of Solid Waste Management and Office of Waste Reduction
P.O.Box 27687 Raleigh, North Carolina 27611

SOLID WASTE SECTION
DEC 13 1991

SANITARY LANDFILL ANNUAL REPORT

FOR THE PERIOD OF JULY 1, 1990 -JUNE 30, 1991

Solid waste disposal facilities are a vital part of the North Carolina infrastructure to manage solid waste. This report gathers information about solid waste facilities in the state.

Separate surveys have been sent to all counties and cities to gather information about other components of solid waste management programs in North Carolina.

Thank you for your assistance in completing this report. The information gathered as a part of this process should be of value to local governments and the state in assessing waste management programs and needs in planning for the future.

If you have any questions or concerns regarding this report please contact the Solid Waste Section at 919-733-0692 or a waste management specialist. Completed forms should be returned to the waste management specialist for your area. Refer to the attached map for names and addresses. A copy of this report should be sent to the county manager of each county served by this facility.

Facility Name JOHNSTON COUNTY LANDFILL Permit Number 51-01
Address P.O. BOX 2263 SMITHFIELD, NC 27577
Location SR # 1503
Facility Owner JOHNSTON COUNTY
Facility Operator DEPT. OF PUBLIC UTILITIES
Facility Contact Person HAYWOOD M. PHTHISIC, III
Phone Number of Contact Person (919) 989-5075 FAX (919) 934-7174
Date Facility Began Receiving Waste JULY, 1973
Date Facility Expected to Close 1997
County(s) Served by this Facility JOHNSTON co.
Tipping Fee $18.00 /Ton _____ *(Please attach a schedule of tip fees if appropriate)*

1. Total waste landfilled at this facility during the period of July 1, 1990, thru June 30, 1991. Indicate tonnage received from each county served by this facility.

MONTH	COUNTY JOHNSTON	COUNTY	COUNTY	TOTAL
July	6004			*
August	6004			
September	6004			
October	6004			
November	5980			5980
December	6273			6273
January	6301			6301
February	5987			5987
March	5900			5900
April	6622			6622
May	6087			6087
June	4882			4882
TOTAL	~~48,032~~ 72048 ✓			~~48,032~~ 72,048

* SCALES OPERATIONAL 10/28/90

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2. Please indicate types of disposal activity occurring at this facility. (Check all that apply)

- ☒ Landfilling of residential waste
- ☒ Landfilling of commercial waste
- ☒ Landfilling of industrial waste
- ☒ Landfilling of yard waste
- ☐ Landfilling of construction and demolition waste
- ☐ Landfilling of demolition waste (limbs, bricks, stumps)
- ☒ Landfilling of asbestos
- ☐ Landfilling of shredded or split tires
- ☐ Landfilling of ash
- ☐ Landfilling of other waste (please specify)_____

3. Please indicate other types of activities occurring at this landfill. (Check all that apply)

- ☒ Scrap tire collection
- ☐ Yard waste composting
- ☒ Recyclable material collection
- ☒ Used oil collection
- ☐ Household hazardous waste collection
- ☒ White goods separation
- ☐ Lead acid battery collection
- ☐ Shredding or grinding (Other than tires) operation
  Material (specify)_____
- ☐ Other Activity (Please describe)_____

4. Are there SWANA/GRCDA or other certified operator(s) at this facility?

- ☐ Yes
- ☒ No

If yes, please indicate the following: (attach additional sheet if necessary)

Name:_____

Certification type and expiration date:_____

Name:_____

Certification type and expiration date:_____

5. Have you begun the siting process for your county's next landfill?

- ☒ Yes If yes, please describe:_____
- ☐ No

Other Comments

We would appreciate your comments about this report or other matters regarding solid waste management in North Carolina. Thank you for your time.

This report should be sent to the waste management specialist for your area.

Person completing this form: HAYWOOD M. PHTHISIC, III Phone: (919) 989-5075