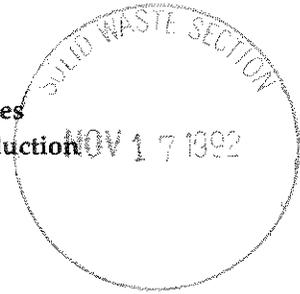


State of North Carolina

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



SANITARY LANDFILL ANNUAL REPORT

FOR THE PERIOD OF JULY 1, 1991 -JUNE 30, 1992

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 will be 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 will be of value to local governments and the state in assessing waste management programs and future solid waste planning.

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 must be sent to the county manager of each county served by this facility.

Facility Name Harrisburg Road Landfill Permit Number 60-01
 Address 7819 Harrisburg Road
 Location Charlotte, NC 28215
 Facility Owner Mecklenburg County
 Facility Operator Mecklenburg County
 Facility Contact Person Bobbie Shields, Director of Engineering
 Phone Number of Contact Person 704-336-2770 FAX 704-336-3846
 Date Facility Began Receiving Waste March, 1972
 Date Facility Expected to Close April, 1992
 County(s) Served by this Facility Mecklenburg
 Tipping Fee \$ 27.50 /Ton x (Please attach a schedule of tip fees if appropriate.)

1. Total waste landfilled at this facility during the period of July 1, 1991, thru June 30, 1992. Indicate tonnage received from each county served by this facility.

MONTH	COUNTY Meck.	COUNTY	COUNTY	TOTAL
July 91	16,480			16,480
August 91	18,332			18,332
September 91	15,145			15,145
October 91	17,639			17,639
November 91	15,704			15,704
December 91	13,869			13,869
January 92	13,936			13,936
February 92	13,766			13,766
March 92	17,300			17,300
April 92	2,198			2,198
May 92	3,220			3,220
June 92	3,014			3,013
TOTAL	150,603			150,603

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TONS PER

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) Dead animals, confiscated materials

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) Wood/Yard Waste
- 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: Cary Saul, Steve Kelner, Eddie Allen

Certification type and expiration date: Landfill 09/88 - open

Name: _____

Certification type and expiration date: _____

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

- Yes If yes, please describe: Zoning and design work in progress for two (2) sites
- 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. (Attach additional sheets if needed.)

Please send us a copy of the finished report.

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

Person completing this form: Bill Evans Phone: 704-336-6513

Signature: Bill Evans Date: 10/28/92