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State of North Carolina

Department of Environment, Health, and Natural Resources
Division of Solid Waste Management

SOLID WASTE SECTION AUG 18 1993

SANITARY LANDFILL ANNUAL REPORT

FOR THE PERIOD OF JULY 1, 1992–JUNE 30, 1993

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 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 must 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 Western Carolina University Landfill Permit Number 50-1

Address Western Carolina University, Physical Plant

Location Cullowhee, NC 28723

Facility Owner Western Carolina University

Facility Operator Western Carolina University

Facility Contact Person Roger Turk

Phone Number of Contact Person 704-227-7224 FAX 704-227-7198

Date Facility Began Receiving Waste Unknown

Date Facility Expected to Close October, 1993

County(s) Served by this Facility ~~Jackson~~ (Private - WCU Only) (JACKSON Co)

Tipping Fee $ N/A /Ton _____ *(please attach a schedule of tip fees if appropriate)*

1. Total waste landfilled at this facility during the period of July 1, 1992, thru June 30, 1993. Indicate tonnage received from each county served by this facility.

MONTH	COUNTY	COUNTY	COUNTY	TOTAL TONS
	JACKSON			
July	~~Jackson~~ WCU			15.390
August	" "			29.015
September	" "			62.568
October	" "			46.615
November	" "			27.325
December	" "			29.325
January	" "			27.660
February	" "			40.290
March	" "			40.380
April	" "			45.300
May	" "			30.000
June	" "			8.535
TOTAL TONS	402.403			402.403

402.42 round dec. 2 places SW OK

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 (Small quanities generated during facility maintenance/repair tasks)
- ☐ Landfilling of demolition waste (limbs, bricks, stumps)
- ☒ Landfilling of asbestos (Small quantities generated during facility maintenance/repair tasks)
- ☐ 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 sheets 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 cooperation. (Attach additional sheets if needed.)

This completed report must be mailed to the Waste Management Specialist for your area.

Person completing this form: J. Andrew DeGrove (please print) Phone: 704-227-7224

Signature: J. Andrew DeGrove Date: 7-22-93