NC DEPARTMENT OF ENVIRONMENT, HEALTH AND NATURAL RESOURCES

Division of Solid Waste Management

Solid Waste Section

SOLID WASTE MANAGEMENT FACILITY EVALUATION REPORT

Type of Facility LCID Permit # NOTIFICATION County GUILFORD

Name of Facility JERRY TUCKER Location MARSHALL SMITH Rd

Date of Last Evaluation _____

I. Permit Conditions Followed ____Yes ____No ____N/A

A. Specific Condition(s) Violated _____

LCID N41 Com Jerry Tucker Landfill

II. Operational Requirements Followed ____Yes ____No

15A N.C. Admin. Code 13B Section _____

A. Specific Violation(s) by number and letter.

III. Other Violations of Rule or Law _____

IV. Evaluator's Comments _____

V. Continuation Page Required? ____Yes ____No Receiving Signature _____

Evaluation Date Mar 8 00 Solid Waste Section [signature]

DEHNR 3793 (Part I White: Facility Part II Canary: Central Office Part III Pink: Regional Office)

Solid Waste Section (Review 7/94)