7LW

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 Co.

Name of Facility P+L LANDFILL Location ANTHONY RD

Date of Last Evaluation _____

I. Permit Conditions Followed \ Yes ____ No ____ N/A

A. Specific Condition(s) Violated

LCIDN41ComGN-L 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 3/9/10 Solid Waste Section

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

Solid Waste Section (Review 7/94)