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 ADKINS LCID Location BROOKSBANK RD.

Date of Last Evaluation _____

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

A. Specific Condition(s) Violated

LCIDN41ComAdkinsLandfill

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 LANDFILL LOOKS GOOD! EXCELLANT JOB.

V. Continuation Page Required? ____ Yes ____ No Receiving Signature

Evaluation Date 3/9/00 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)