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N0061

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 ONSLOW

Name of Facility HUMPHREY & SONS Location HALLTOWN RD

Date of Last Evaluation 6 MAR 96

I. Permit Conditions Followed ____Yes ____No ✓ N/A

A. Specific Condition(s) Violated

LCID N67 Com Humphrey & Sons N0061

Facility/Co ID# Canony Date 2/25/09 Doc ID# DIN

II. Operational Requirements Followed ____Yes ✓ No

15A N.C. Admin. Code 13B Section .0566 (16)(3)

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

(16) requires that a sign be posted. No sign has been posted as requested

(3) requires that the solid waste be restricted to the smallest area feasible. Solid waste has not been restricted as requested on my last inspection.

III. Other Violations of Rule or Law

IV. Evaluator's Comments Gate was up and secured, thankyou. Push solid waste to a taller cell & compact & cover. Also please provide me with a key for your gate. Post a sign as you have don at the other sites

V. Continuation Page Required? ____Yes ✓ No Receiving Signature

Evaluation Date 24 MAY 96 Solid Waste Section Joe Galbo

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

Solid Waste Section (Review 7/94)

Purpose: G.S. 130A-294 requires that an evaluation program be established for the operation of solid waste management facilities on a statewide basis. The Solid Waste Management Act and Solid Waste Management Rules codified at 15A NCAC 13B list requirements which must be followed by solid waste facilities.

Instructions: Solid Waste Section personnel shall complete the evaluation form each time they conduct official evaluations. The form shall be signed by the person(s) receiving the report.

Distribution: **Part I White: facility copy**
Part II Canary: Raleigh central office file copy
Part III Pink: Regional office file copy

Disposition: This form may be retained in accordance with the Record Retention and Disposition Schedule of the Solid Waste Section, Solid Waste Management Division of the Department of Environment, Health and Natural Resources.

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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 ONSLOW

Name of Facility HUMPHREY & SON Location HALLTOWN RD

Date of Last Evaluation 31 OCT 96

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

A. Specific Condition(s) Violated

II. Operational Requirements Followed ____ Yes ✓ No

15A N.C. Admin. Code 138 Section .0506

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

(8) requires that the site be adequately secured. There was no gate at the facility and no attendant on duty.
(16) requires that a sign be posted showing a contact person and emergency phone number. No sign was posted.
(3) requires that solid waste be restricted to the smallest area

III. Other Violations of Rule or Law feasible and compacted as densely as practical. The waste was spread out over the site and not compacted.

IV. Evaluator's Comments A sign and a gate will be installed at the facility within 30 days or a Notice of Violation will be issued. These violations have been identified on each inspection report

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

Evaluation Date 6 MAR 96 Solid Waste Section Joe Galla

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

Solid Waste Section (Review 7/94)

FACILITY EVALUATION REPORT
CONTINUATION PAGE

ONSITE 0061
LCD NOTIFICATION

Permit # HUMPHREY - HALLTOWN RD

Evaluation Date 6 MAR 96

I. Permit Condition(s) Violated:

A. Specific Condition(s) Violated

II. Operational Requirements Followed

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

III. Other Violations of Rules or Law

IV. Evaluator's Comments dating back to 18 NOV 1994 and you have not complied. You will also have to cover & compact at least at the facility in 30 days. Care should be taken not to dispose of any waste in water. If you have any questions please call me at 918-295-3900

DEHMR 3795 (Part I White: Facility Part II Canary: Central Office Part III Pink: Regional Office)
Solid Waste Section (Review 7/94)

ID NO059

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 ONSLOW

Name of Facility Durwood Humphrey & Sons Location Halltown Rd

NO075

Date of Last Evaluation 9 Aug 95

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

A. Specific Condition(s) Violated

II. Operational Requirements Followed ____ Yes ✓ No

15A N.C. Admin. Code 13B Section .0566

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

(8) requires that the site be adequately secured. Although Mr. Humphrey was at the site at the time of the inspection there was no gate or cable to secure the facility after he left.

(16) requires that a sign be posted listing a contact name and emergency phone #. No sign was posted.

III. Other Violations of Rule or Law

IV. Evaluator's Comments Discussed the gate and sign with Durwood Humphrey this morning and Mike Humphrey at the time of this inspection

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

Evaluation Date 31 OCT 95 Solid Waste Section Joe Galbo

DEHNR 3/93 (Part I White: Facility Part II Canary: Central Office Part III Pink: Regional Office)

Solid Waste Section (Review 7/94)

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NC DEPARTMENT OF ENVIRONMENT, HEALTH AND NATURAL RESOURCES

Division of Solid Waste Management

Solid Waste Section

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SOLID WASTE MANAGEMENT FACILITY EVALUATION REPORT

Type of Facility LCID Permit # NOTIFICATION County ONSLOW

Name of Facility DURWOOD HUMPHREY + SONS Location HARLOWN

Date of Last Evaluation 15 FEB 95

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

A. Specific Condition(s) Violated

II. Operational Requirements Followed ____ Yes ✓ No

15A N.C. Admin. Code 13B Section .0566

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

(8) requires that the site be adequately secured. No gate was present at the facility.

(16) requires that a sign be posted at the facility entrance listing a contact name and emergency phone number. No sign was present at the facility.

III. Other Violations of Rule or Law (Comment) Both violations were noted on previous inspection report dated 15 FEB 95 and have not been corrected yet. I also found waste in water which will have to be removed from the pit. You will need to compact and cover the waste at the facility this month. If you have any questions please call me at 910-395-3900

IV. Evaluator's Comments

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

Evaluation Date 9 AUG 95 Solid Waste Section Joe Galli

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

Solid Waste Section (Review 7/94)

FACILITY EVALUATION REPORT
CONTINUATION PAGE

ONSLOW NC061
DURWOOD HUMPHREY + SONS

Permit # NOTIFICATION

Evaluation Date 9 AUG 95

I. Permit Condition(s) Violated:

A. Specific Condition(s) Violated

II. Operational Requirements Followed

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

III. Other Violations of Rules or Law

IV. Evaluator's Comments If you have not re-recorded the Notification Application at the register of Deeds office with the correct book and page numbers, you need to do it immediately. If you have done it already please send me copies so I can update my files

DEHNR 3793 (Part I White: Facility Part II Canary: Central Office Part III Pink: Regional Office)
Solid Waste Section (Review 7/94)

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N0061

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 NOTIFICATION Permit # ____ County ONSLOW

Name of Facility DURWOOD HUMPHREY + SONS LCID Location HALLTOWN RD.

NOTIFICATION FOR: (1) JOHN E. MORTON
(2) BS + MARY GIBSON
(3) CLIFTON + MARY LOVITT
(4) LESTER + ISABELLE MORTON
(5) FRED + MARGARET COLLINS

Date of Last Evaluation 18 NOV 94

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

A. Specific Condition(s) Violated ____

II. Operational Requirements Followed ____ Yes ✓ No

15A N.C. Admin. Code 13B Section .0566

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

(8) requires that the site be adequately secured by means of gates, chains berms, fences etc. It was noticed that you have no means of securing the facility

(16) requires that a sign be posted at the facility entrance showing a contact name and phone number for emergencies. It was noticed you have no sign. (9) requires that access roads be of all weather construction and properly maintained. It was noticed that your access road is barely passable and not maintained.

III. Other Violations of Rule or Law

IV. Evaluator's Comments You need to put up a gate or cable at the entrance, post a sign with the required information and fix the road as required. Also, recordation of the Notification sites was

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

Evaluation Date 15 FEB 95 Solid Waste Section J. A. Galls

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

Solid Waste Section (Review 7/94)

FACILITY EVALUATION REPORT
CONTINUATION PAGE

Permit # N/A

IV EVALUATOR'S COMMENTS

Evaluation Date 15 FEB 95

~~I. Permit Condition(s) Violated:~~

~~A. Specific Condition(s) Violated~~ improperly recorded at the Registers of Deeds Office and needs to be corrected A.S.A.P. On each of the notification forms line three(3) of page one calls for the deed book and page numbers on which the landfill is located. The recorded deed book and page numbers are incorrect and need to be corrected and re-recorded at the register of Deeds.

~~II. Operational Requirements Followed~~

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

For further information please call me at (910) 395-3900.

~~III. Other Violations of Rules or Law~~

IV. Evaluator's Comments

C&I NOTIFICATION
N0061 TFD ✓

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 NOTIFICATION Permit # ——— County ONSLOW

Name of Facility DURWOOD HUMPHREY & SONS LCID Location HALLTOWN RD

NOTIFICATION FOR: 1) JOHN E MORTON
2) BS + MARY GIBSON
3) CLIFTON + NELLIE LOVITT
4) LESTER + ISABELL MORTON
5) FRED + MARGARET COLLINS

Date of Last Evaluation ———

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

A. Specific Condition(s) Violated ———

II. Operational Requirements Followed ____ Yes ✓ No

15A N.C. Admin. Code 13B Section .0506

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

(3) requires that waste be restricted to the smallest area feasible and compacted as densely as practical: ——— Waste not compacted
(4) requires that soil cover be applied monthly or when the active area reaches one acre in size, whichever occurs first: — No soil cover has been applied

III. Other Violations of Rule or Law ———

IV. Evaluator's Comments Site needs to be compacted, covered with soil a sign posted at the entrance and the road rocked for foul weather

V. Continuation Page Required? ✓ Yes ____ No Receiving Signature No one at site

Evaluation Date 18 NOV 94 Solid Waste Section J J Gallo

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

Solid Waste Section (Review 7/94)

FACILITY EVALUATION REPORT
CONTINUATION PAGE

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Permit # _____

Evaluation Date _____

I. Permit Condition(s) Violated:

A. Specific Condition(s) Violated _____

II. Operational Requirements Followed .0506

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

(8) requires that facility be adequately secured by gate, fence berms etc.: No gate, chain fence at present to secure facility.

(9) requires that access road be of all weather construction: - Road into facility rutted in bad weather

(16) requires that a sign be posted at entrance of facility, listing contact name, phone number: No sign present.

III. Other Violations of Rules or Law _____

IV. Evaluator's Comments _____