



FACILITY COMPLIANCE AUDIT REPORT
Division of Waste Management
Solid Waste Section

UNIT TYPE: (check all that apply to this audit with same Permit number)

| | | | | | | | | | | | | |
|--------------|-------------------------------------|-----------------------|--------------------------|---------------|--------------------------|---------------------|--------------------------|---------|--------------------------|------|--------------------------|--|
| Lined MSWLF | <input type="checkbox"/> | LCID | <input type="checkbox"/> | YW | <input type="checkbox"/> | Transfer | <input type="checkbox"/> | Compost | <input type="checkbox"/> | SLAS | <input type="checkbox"/> | COUNTY: Haywood PERMIT NO.: 44-04 FILE TYPE: COMPLIANCE |
| Closed MSWLF | <input checked="" type="checkbox"/> | HHW | <input type="checkbox"/> | White goods | <input type="checkbox"/> | Incin | <input type="checkbox"/> | T&P | <input type="checkbox"/> | FIRM | <input type="checkbox"/> | |
| CDLF | <input type="checkbox"/> | Tire T&P / Collection | <input type="checkbox"/> | Tire Monofill | <input type="checkbox"/> | Industrial Landfill | <input type="checkbox"/> | DEMO | <input type="checkbox"/> | SDTF | <input type="checkbox"/> | |

Date of Audit:1/24/07

Date of Last Audit: 8/09/07

FACILITY NAME AND ADDRESS:

Town of Canton Municipal Solid Waste Landfill
 State Road 1854
 Canton, N. C. 28716

GPS COORDINATES: (Decimal Degrees) N: 35.52493 W: 082.82085

FACILITY CONTACT NAME AND PHONE NUMBER:

Johnny Gibson, Town of Canton Public Works Department
 Telephone: 828-648-2363

FACILITY CONTACT ADDRESS (IF DIFFERENT):

Johnny Gibson
 Town of Canton Public Works Department
 P. O. Box 987
 Canton, N. C. 28716

AUDIT PARTICIPANTS:

Jim Patterson, NCDENR-Solid Waste Section
 Johnny Gibson, Town of Canton

STATUS OF PERMIT:

Closed

PURPOSE OF AUDIT:

Post Closure inspection of MSW landfill

NOTICE OF VIOLATION(S) (citation and explanation):

NONE

You are hereby advised that, pursuant to N.C.G.S. 130A-22, an administrative penalty of up to \$5,000 per day may be assessed for each violation of the Solid Waste Statute or Regulations. If the violation(s) noted here continue, you may be subject to enforcement actions including penalties, injunction from operation of a solid waste management facility or a solid waste collection service and any such further relief as may be necessary to achieve compliance with the North Carolina Solid Waste Management Act and Rules.

STATUS OF PAST NOTED VIOLATIONS (List all noted last audit):

N/A

FACILITY COMPLIANCE AUDIT REPORT
Division of Waste Management
Solid Waste Section

Page 2 of 2

AREAS OF CONCERN AND COMMENTS:

1. Need to remove small trees and shrubs from landfill dike.
2. Landfill has an adequate stand of grass and is properly graded with no areas for water to impound.
3. Raleigh Central office is addressing groundwater monitoring program.

Please contact me if you have any questions or concerns regarding this audit report.

Jamesw E. Patterson _____ (signature) Phone: 828-296-4700 _____
Regional Representative

Distribution: original signed copy to facility -- signed copy to compliance officer – e-mail or copy to super

| | | | | | | |
|--|--------------------------|---------------|--------------------------|---------|--------------------------|--|
| Delivered on : <input type="text" value="Click and type date"/> by | <input type="checkbox"/> | hand delivery | <input type="checkbox"/> | US Mail | <input type="checkbox"/> | tified No. <input type="text" value=""/> |
|--|--------------------------|---------------|--------------------------|---------|--------------------------|--|