

State of North Carolina
Department of Environment and Natural Resources
Division of Waste Management
LAND CLEARING AND INERT DEBRIS LANDFILL
Facility Annual Report
For the period of JULY 1, 2007-JUNE 30, 2008

Facility Name: Carolina Tree Debris, Inc Permit: 92V ID: _____

Address: 1417 Old Watkins Road

City: Raleigh State: North Carolina Zip: 27616

Contact: Jane Blake

Phone Number: 261-0590 Fax: 261-9748 Email: mbutler31@nc.rr.com

If you have questions or require assistance in completing this report, contact your Regional Environmental Senior Specialist. According to (G. S. 130A-309.09D(b)) completed forms must be returned by August 1, 2008 and a copy of this report must be sent to the County Manager of each county from which waste was received.

1. Tipping Fee: \$ _____ /Ton (Attach a schedule of tipping fees if appropriate.)

2. Please report the longitude and latitude of your facility.

Longitude: TBD Latitude: TBD

Indicate method of collection: Other

3. Please provide the Emergency 911 Address of the facility:

Street 1: 1417 Old Watkins Road

Street 2: _____

City: Raleigh State: North Carolina Zip: 27616

4. What is the estimated number of truckloads of waste taken per day at this facility? 0-25 Truckloads

5. What are the hours/days of operation for this facility? 8 am - 5 pm M-F

6. What is the acreage of the footprint of the waste? 18 Acre(s)

*****According to (G.S. 130A-309.09D(b))**

This report must be sent to the Regional Environmental Senior Specialist for your area and a copy of this report must be sent to the County Manager of each county from which waste was received.

CERTIFICATION: I certify that the information provided is an accurate representation of the activity at this facility.

Signature: _____ Date: 08-14-2008

Name: Marvin Butler

Phone Number: 261-0950 Email: mbutler31@nc.rr.com

Facility Name: Carolina Tree Debris, Inc Permit: 92V
 Address: 1417 Old Watkins Road
 City: Raleigh State: North Carolina Zip: 27616
 Person completing Assessment: Marvin Butler Date: 08-14-2008
 Phone Number: 261-0950 Fax: 261-9748 Email: mbutler31@nc.rr.com

Instructions: Please indicate either *Yes or No* for each Receptor and Post Closure Maintenance question. Then please determine the distance or distances for each Receptor from the *Edge of Waste* (using range finders and/or GIS maps) and type that information into the form. Please attach additional information including GIS maps, lists of potable well locations, etc.

Receptors

1. Are there Residential Dwellings Within 1,500 feet of the Edge of Waste? Yes No
 If Yes, how many? 6
 What are the three closest distances from the *Edge of Waste*? 500 Feet 700 Feet 900 Feet
2. Are there Potable Wells Within 1,500 feet of the Edge of Waste? Yes No
 If Yes, how many? 6
 What are the three closest distances from the *Edge of Waste*? 500 Feet 700 Feet 900 Feet
3. Are there Community/Municipal Wells Within 1,500 feet of the Edge of Waste? Yes No
 If Yes, how many? _____
 What are the three closest distances from the *Edge of Waste*? _____ Feet _____ Feet _____ Feet
4. Are there Surface Water Bodies Within 1,500 feet of the Edge of Waste? Yes No
 If Yes, how many? 2
 What are the three closest distances from the *Edge of Waste*? 200 Feet 300 Feet _____ Feet
 Please list the names of the water bodies: _____
5. Is Public Water Available Within 1,500 feet of the Edge of Waste? Yes No
 If Yes, how many of the Residential Dwellings noted above are connected? _____

Corrective Measures

6. Is there an active methane extraction system (blower, flare, etc.)? Yes No
7. Is there a passive methane extraction system (trench, vents in cap, flare, etc.)? Yes No
8. Is there groundwater remediation taking place on site? Yes No
 If Yes, what is the specific remedial technology used? _____

Comments

I methane monitor on western side of site.

NC DENR
Division of Waste Management
Solid Waste Section

Fax Transmittal

To: JANE BLAKE
Phone: 266 0285
Fax: 261 9748
From: BRAD BAILEY
Phone: 508 8565
Fax: _____
Date: 11 AUG 2008

Pages Including Cover Page: 3

Please call if any pages of this transmittal are not received clearly.

- call if any questions deadline for this report
was August 1, 2008 - Need bank as soon as
possible and will need to see permit as
well

LCID

State of North Carolina
Department of Environment and Natural Resources
Division of Waste Management
LAND CLEARING AND INERT DEBRIS LANDFILL
Facility Annual Report
For the period of JULY 1, 2007-JUNE 30, 2008

Facility Name: _____ Permit: _____ ID: _____

Address: _____

City: _____ State: NC Zip: _____

Contact: _____

Phone Number: _____ Fax: _____ Email: _____

If you have questions or require assistance in completing this report, contact your Regional Environmental Senior Specialist. According to (G. S. 130A-309.09D(b)) completed forms must be returned by August 1, 2008 and a copy of this report must be sent to the County Manager of each county from which waste was received.

1. Tipping Fee: \$ _____ /Ton (Attach a schedule of tipping fees if appropriate.)

2. Please report the longitude and latitude of your facility.

Longitude: _____ Latitude: _____

Indicate method of collection: _____

3. Please provide the Emergency 911 Address of the facility:

Street 1: _____

Street 2: _____

City: _____ State: NC Zip: _____

4. What is the estimated number of truckloads of waste taken per day at this facility? _____ Truckloads

5. What are the hours/days of operation for this facility? _____

6. What is the acreage of the footprint of the waste? _____ Acre(s)

*****According to (G.S. 130A-309.09D(b))**

This report must be sent to the Regional Environmental Senior Specialist for your area and a copy of this report must be sent to the County Manager of each county from which waste was received.

CERTIFICATION: I certify that the information provided is an accurate representation of the activity at this facility.

Signature: _____ Date: _____

Name: _____

Phone Number: _____ Email: _____

Facility Name: _____ Permit: _____

Address: _____

City: _____ State: NC Zip: _____

Person completing Assessment: _____ Date: _____

Phone Number: _____ Fax: _____ Email: _____

Instructions: Please indicate either *Yes* or *No* for each Receptor and Post Closure Maintenance question. Then please determine the distance or distances for each Receptor from the *Edge of Waste* (using range finders and/or GIS maps) and type that information into the form. Please attach additional information including GIS maps, lists of potable well locations, etc.

Receptors

1. Are there Residential Dwellings Within 1,500 feet of the Edge of Waste? Yes No
 If Yes, how many? _____
 What are the three closest distances from the *Edge of Waste*? _____ Feet _____ Feet _____ Feet

2. Are there Potable Wells Within 1,500 feet of the Edge of Waste? Yes No
 If Yes, how many? _____
 What are the three closest distances from the *Edge of Waste*? _____ Feet _____ Feet _____ Feet

3. Are there Community/Municipal Wells Within 1,500 feet of the Edge of Waste? Yes No
 If Yes, how many? _____
 What are the three closest distances from the *Edge of Waste*? _____ Feet _____ Feet _____ Feet

4. Are there Surface Water Bodies Within 1,500 feet of the Edge of Waste? Yes No
 If Yes, how many? _____
 What are the three closest distances from the *Edge of Waste*? _____ Feet _____ Feet _____ Feet
 Please list the names of the water bodies: _____

5. Is Public Water Available Within 1,500 feet of the Edge of Waste? Yes No
 If Yes, how many of the Residential Dwellings noted above are connected? _____

Corrective Measures

6. Is there an active methane extraction system (blower, flare, etc.)? Yes No

7. Is there a passive methane extraction system (trench, vents in cap, flare, etc.)? Yes No

8. Is there groundwater remediation taking place on site? Yes No

If Yes, what is the specific remedial technology used? _____

Comments



**Environmental
Services**

TEL 919 856 6186
FAX 919 856 6233

Solid Waste Management
P.O. Box 550 • Raleigh, NC 27602

Date January 28, 2008

Name Coy Cooke
Business Carolina Tree Debris
Address 1417 Old Watkins Rd, Raleigh NC 27616
Phone (919) 261-0590 (919) 369-3941

RE: End of delegation of authority for Land Clearing And Inert Debris Landfill Permit
 No: 92S

Dear Mr. Cooke:

As of January 1st, 2008 Wake County Solid Waste Management no longer has delegated authority from NCDENR to inspect your landfill. As part of our periodic cost analysis for our programs, we decided that without proper funding from NCDENR we would no longer be able to provide this service on their behalf. From here on, NCDENR inspectors will perform all inspections and regulatory actions for your landfill.

If you have any questions, please contact me at (919) 856-5695.

Thank You

Roy Baldwin
Solid Waste Compliance Officer

CC: James S Reynolds, Director, Wake County Solid Waste
 Dan Lamontagne, Operations Manager, Wake County Solid Waste



FACILITY COMPLIANCE AUDIT REPORT
Environmental Services
Solid Waste Management Division

| |
|------------------------------|
| COUNTY: Wake |
| PERMIT NO: 92S |
| FILE TYPE: Compliance |

Date of Audit: 11-28-07

Date of Last Audit: 09-12-2006

FACILITY NAME AND ADDRESS:

Carolina Tree Debris
 1417 Old Watkins Rd
 Raleigh, NC 27616

FACILITY CONTACT NAME AND PHONE NUMBER:

Coy Cooke
 919-261-0590

AUDIT PARTICIPATIONS:

Roy Baldwin, Solid Waste Compliance Officer

STATUS OF PERMIT:

Permit Active as

PURPOSE OF AUDIT:

Comprehensive Annual Audit

| | | | | | | |
|---------------------------------|---------------|--|---------------|------------------------------|------|--|
| Signs of Processing | None Observed | Improper Waste | None Observed | Adequate Buffer | Yes | |
| Signs of Composting | None Observed | Site Secured | Yes | Proper Signage | Yes | |
| Adequate Cover Available | Yes | SED & Erosion Controls in Place | Yes | Access Road Condition | Good | |

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

No violations were present during the inspection.



FACILITY COMPLIANCE AUDIT REPORT
Environmental Services
Solid Waste Management Division

STATUS OF PAST NOTED VIOLATIONS:

None

OTHER COMMENTS/SUGGESTIONS:

Landfill is in great working condition with authorized debris only.
Buffer fence around property is in good shape.
Above adequate cover, machinery, and manpower available in case of emergency.
Drains were free and clear of debris.

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

Phone: 919-856-5695



**Environmental
Services**

TEL 919 856 6186
FAX 919 856 6233

Solid Waste Management
P.O. Box 550 • Raleigh, NC 27602

Date October 2, 2007

Name Coy Cooke
Business Carolina Tree Debris
Address 1417 Old Watkins Rd, Raleigh NC 27616
Phone (919) 261-0590 (919) 369-3941

RE: Land Clearing And Inert Debris Landfill Permit Renewal
 Permit No: 92S

Dear Mr. Cooke:

Wake County Solid Waste Ordinance Section X requires no person may operate a land-clearing and or inert debris landfill without first obtaining a permit from Wake County Solid Waste Division. The permit renewal fee for the operation of your land-clearing and inert debris landfill for fiscal year July 2006- July 2007 is due October 30th 2007. The permit renewal fee is \$1,000. Please mail your payment to:

Wake County Solid Waste Management
Attention Roy Baldwin
P.O. Box 550
Raleigh, NC 27602-0550

If you have any questions, please contact me at (919) 856-5695.

Thank You
Roy Baldwin

Solid Waste Compliance Officer

CC: James S Reynolds, Director, Wake County Solid Waste
 Dan Lamontagne, Operations Manager, Wake County Solid Waste

Feb 16, 2007

Expansion sought for private landfill

By SAM LAGRONE
STAFF WRITER

RALEIGH — A family-owned farm located just outside the city has applied to the city to expand its low-impact landfill.

Submitted late last year, the zoning request would allow Walter and Cassandra Cooke to expand their existing home business of mulching trees from surrounding subdivisions.

The 11.5-acre rezoning request will expand the 32-acre landfill that currently houses the waste from the mulching operation.

The site off of Old Watkins Road is nearing capacity, prompting the rezoning request.

The land is classified as residential at four homes per acre. If

the rezoning is approved, it would cast the land as an industrial area with strict conditions relating to the landfill.

The property is surrounded by large homes and is mostly low-density residential.

The landfill is classified as land-clearing inert debris, or LCID, and regulated by permit by Wake County.

Under North Carolina law, inert debris means "... solid waste which consists solely of material that is virtually inert and that is likely to retain its physical and chemical structure under expected conditions of disposal."

Under Wake County rules, Cooke must retain the top soil to replace after capacity is reached.

NORTHEAST CAC

What: Northeast Citizens Advisory Council meeting regarding expansion of private landfill

When: 7 p.m. March 2

Where: Millbrook Exchange Park at 1905 Spring Forest Road

As for initial reaction from the North East Citizens Advisory Council, there were few protests at the Feb. 9 meeting.

"It's not really a nasty use. No one's complained about it," said Bob Mulder, the CAC's chairman.

When Cooke presented his proposal to the CAC, he allayed ini-

tial concerns about the land's future.

Cooke told the group he raised horses on the land and was surrounded by family on most of the adjacent property — and that he planned to eventually retire there.

When the landfill is full, Cooke will replace the top soil for the 44 acres.

"I don't think it's going to have any problems. Most of the people around there are family members," Mulder said.

The CAC will vote on a recommendation to the City of Raleigh at its next meeting March 2.

Staff writer Sam LaGrone can be reached at 836-4951 or slagrone@newsobserver.com.



The News & Observer

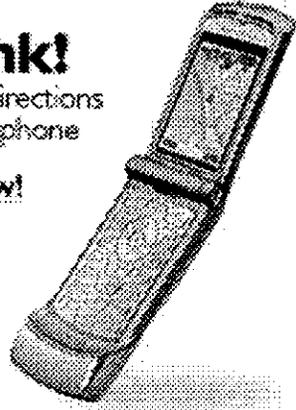


[1200-1423] Old Watkins Rd
Raleigh NC
27616 US

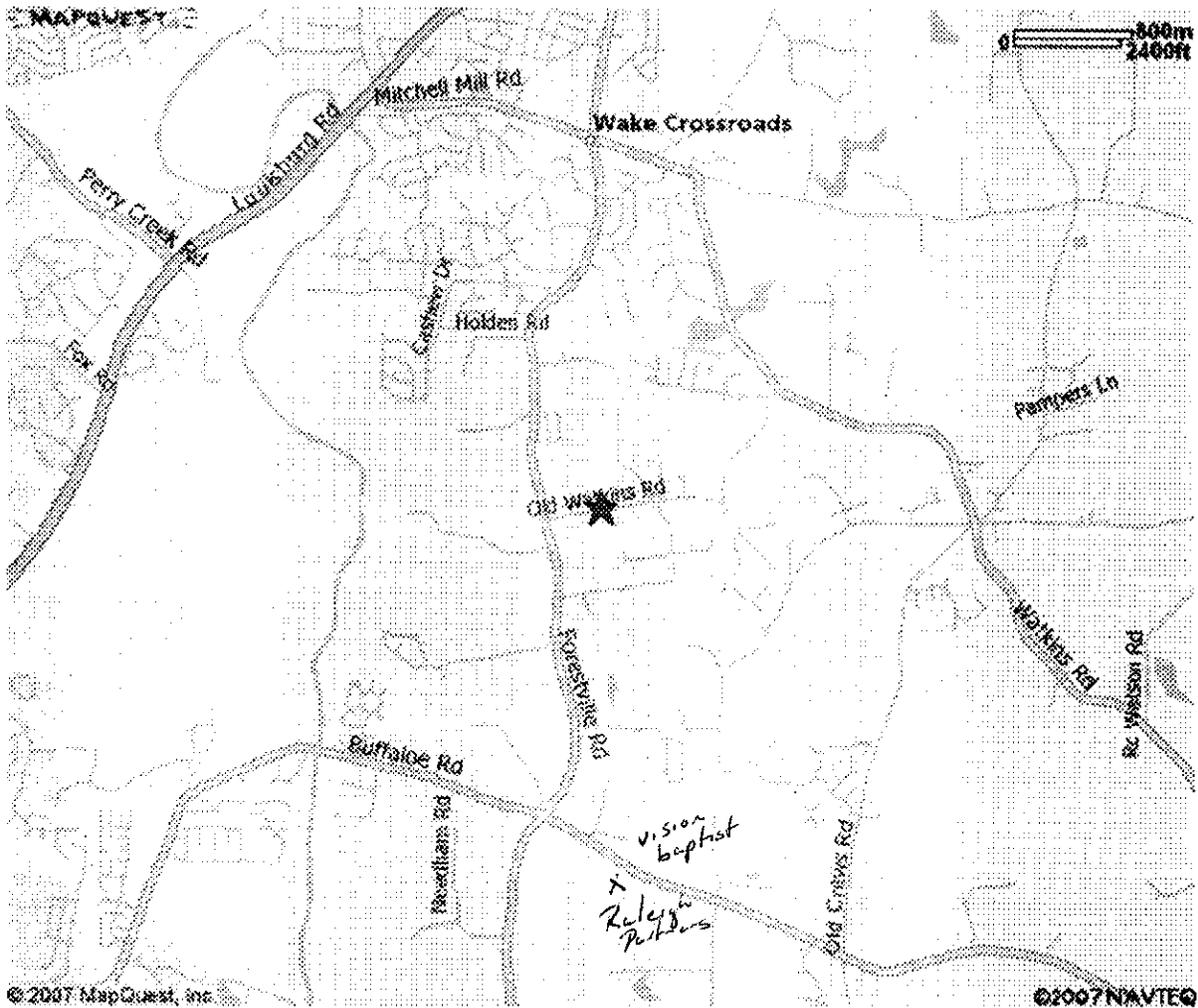
Notes:

[Empty dotted box for notes]

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MOBILE



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127 acres



FACILITY COMPLIANCE AUDIT REPORT
Environmental Services
Solid Waste Management Division

| |
|------------------------------|
| COUNTY: Wake |
| PERMIT NO: 92S |
| FILE TYPE: Compliance |

Date of Audit: 09-12-2006

Date of Last Audit: _____

FACILITY NAME AND ADDRESS:

Carolina Tree Debris
 1417 Old Watkins Rd
 Raleigh, NC 27616

FACILITY CONTACT NAME AND PHONE NUMBER:

Coy Cooke
 919-261-0590

AUDIT PARTICIPATIONS:

Roy Baldwin, Solid Waste Compliance Officer
 Coy Cooke, Owner

STATUS OF PERMIT:

Permit Active as of May 05, 2006 – May 05, 2011.

PURPOSE OF AUDIT:

Comprehensive Semi-Annual Audit

| | | | | | | |
|---------------------------------|---------------|--|---------------|------------------------------|------|--|
| Signs of Processing | None Observed | Improper Waste | None Observed | Adequate Buffer | Yes | |
| Signs of Composting | None Observed | Site Secured | Yes | Proper Signage | Yes | |
| Adequate Cover Available | Yes | SED & Erosion Controls in Place | Yes | Access Road Condition | Good | |

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

No violations were present during the inspection.



FACILITY COMPLIANCE AUDIT REPORT
Environmental Services
Solid Waste Management Division

STATUS OF PAST NOTED VIOLATIONS:

None

OTHER COMMENTS/SUGGESTIONS:

Landfill is in good working condition and well maintained.
Adequate equipment and soil cover readily available.

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

Phone:



**Environmental
Services**

TEL 919 856 6186
FAX 919 856 6233

Solid Waste Management
P.O. Box 550 • Raleigh, NC 27602

Date March 24, 2006

Name Coy Cooke
Business Carolina Tree Debris
Address 1417 Old Watkins Rd, Raleigh NC
Add2

RE: Land Clearing And Inert Debris Landfill Permit Renewal
 Permit No: 92S

Dear Mr. Cooke:

Wake County Solid Waste Ordinance Section X requires no person may operate a land-clearing and or inert debris landfill without first obtaining a permit from Wake County Solid Waste Division. The permit renewal fee for the operation of your land-clearing and inert debris landfill for fiscal year 2005-2006 is due May 15th 2006. The permit renewal fee is \$1,000. Please mail your payment to:

Wake County Solid Waste Management
P.O. Box 550
Raleigh, NC 27602-0550

If you have any questions, please contact me at (919) 856-5695.

Thank You
Roy Baldwin

Solid Waste Compliance Officer

CC: James S Reynolds, Director, Wake County Solid Waste
 Dan Lamontagne, Operations Manager, Wake County Solid Waste

00116200-~~05566~~
01011

1798



CAROLINA TREE DEBRIS INC.
1417 OLD WATKINS RD.
RALEIGH, NC 27616

DATE 7/10/02

86-48-551
531

PAY TO THE ORDER OF

Wake County Solid Waste Management

\$ 1,000.00

One thousand dollars & 00/100

DOLLARS Security Features
Detailed
Inside on Deck

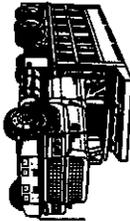
FF 2002-
2003 Landfill
FOR Renewal Permit - # 99-001

CCB

Central Carolina Bank
and Trust Company 551
Rolesville, North Carolina 27571

Jane C. Blake NP

⑈00001798⑈ ⑆053100465⑆ 55 1064287⑈



CAROLINA TREE DEBRIS INC.
 1417 OLD WATKINS RD.
 RALEIGH, NC 27616

001102-01011

1365

DATE

6/25/01

88-46551
531

PAY TO THE ORDER OF

Wade County Solid Waste Management \$ 1,050

DOLLARS



CCCB

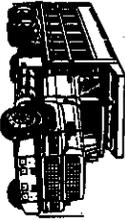
Central Carolina Bank
and Trust Company
551
Rokeville, North Carolina 27571

FOR

permit 2081-2082

M. E. Long

⑆000013E5⑆ ⑆0531004E5⑆ 55 1064287⑆



CAROLINA TREE DEBRIS INC.
1417 OLD WATKINS RD.
RALEIGH, NC 27616

00116200-01011

1096

DATE 6/21/02

68-48551
331

PAY TO THE ORDER OF

Wake County Solid Waste Management \$1,000.00

DOLLARS

One Thousand & no/100

CCB

Central Carolina Bank
and Trust Company
551
Raleigh, North Carolina 27571

FOR Farm. Rental

McCoy Cook

⑆00001096⑆ ⑆053100485⑆ 55 1064287⑆

WISWM
WAKE COUNTY
SOLID WASTE MANAGEMENT

Monday, June 12, 2000

CERTIFIED LETTER
RETURN RECEIPT REQUESTED

Carolina Tree Debris
Coy Cook
1417 Old Watkins Rd.
Raleigh, NC 27616-8539

RE: Land Clearing And Inert Debris Landfill Permit Renewal
Permit No. 99-001

Dear Coy Cook

Wake County Solid Waste Ordinance Section X requires no person may operate a land-clearing and or inert debris landfill without first obtaining a permit from Wake County Solid Waste Division . The permit renewal fee for the operation of your land-clearing and inert debris landfill for Fiscal year 2000-2001 is due July 1, 2000. The permit renewal fee is \$1,000. Please mail your payment to:

Wake County Solid Waste Management
P. O. Box 550
Raleigh, NC 27602-0550

If you have any questions, please contact me at (919) 856-6191.

Thank You
Ivan Dickey



Solid Waste Inspector

cc: Wayne Woodlief Director, Wake County Solid Waste
Johnny Beal Solid Waste Specialist, Wake County Solid Waste



COUNTY OF WAKE
RALEIGH, NORTH CAROLINA

COMMUNITY SERVICES
INSPECTIONS/DEVELOPMENT PLANS/PERMITS
TELEPHONE (919) 856-6335
FEBRUARY 28, 2000

Clara B. Cooke
1325 Old Watkins Road
Raleigh, NC 27616

RE: Cooke Landfill
PIN# 1746.02 59 8924

Dear Mrs. Cooke:

This letter is in reference to the gate house that has been placed on the above subject property without the proper permits.

You are in violation of Section 1-1-23(A) of the Wake County Zoning Ordinance. Violation of the Wake County Ordinance is a misdemeanor as provided by North Carolina Statutes 153-123(b) and North Carolina General Statute 14-4. This Ordinance may be enforced by injunction and order of abatement, and all other appropriate equitable remedies to insure compliance, as provided by General Statute 153A-123.

Section 1-1-8(E)(3) of the Wake County Zoning Ordinance directs this office to impose civil penalty in the amount of one hundred dollars (\$100.00) per day that the violation remains.

You have thirty (30) days from receipt of this notification (March 30, 2000) to obtain the required permits. Failure to do so will result in stringent enforcement of the Ordinance.

Please contact me at 856-6215 if you have any questions concerning this matter.

Sincerely,

Brenda Coats

Brenda Coats
Planner II

RECEIVED *Walter McCoy Cooke*

DATE 2/29/00

cc: Scott Warren, Assistant County Attorney
Randy Mundt, Land Development Supervisor
Wayne Woodlief, Director Solid Waste
Steve Simmons, Building Inspector
File

PS Form 3800, August 2006

City, State, ZIP+4
1417 Old Watkins Rd
Raleigh NC

Street, Apt. No., or PO Box No.
Cot Cooke Carolina Tree

Sent To

Postmark Here

| | |
|--|----|
| Postage | \$ |
| Certified Fee | |
| Return Receipt Fee (Endorsement Required) | |
| Restricted Delivery Fee (Endorsement Required) | |
| Total Postage & Fees | \$ |

7006 2150 0005 1726 5887

OFFICIAL USPS

For delivery information visit our website at www.usps.com

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cot Cooke
Carolina Tree Debris
1417 Old Watkins Rd
Raleigh NC 27616

2. Article Number
(Transfer from service label) 7006 2150 0005 1726 5887

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x Sammie Blackwell Agent Addressee

B. Received by (Printed Name)
Sammie Blackwell

C. Date of Delivery
JAN 30 2008

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Carolina Tree Debris
1417 Old Watkins Rd
Raleigh NC 27616

2. Article Number
(Transfer from service label) 7006 2150 0005 1726 5887

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x Cot Cooke Agent Addressee

B. Received by (Printed Name)
Cot Cooke

C. Date of Delivery

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3800, July 1999 See Reverse for Instructions

City, State, ZIP+4

Street, Apt. No., or PO Box No.

Name (Please Print Clearly) (To be completed by mailer)

Postmark Here

| | |
|--|----|
| Postage | \$ |
| Certified Fee | |
| Return Receipt Fee (Endorsement Required) | |
| Restricted Delivery Fee (Endorsement Required) | |
| Total Postage & Fees | \$ |

Article Sent To:
Cot Cooke
1417 Old Watkins Road
Carolina Tree Debris
Raleigh, NC 27616-8539

7099 3220 0007 1548 7505

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)