



**CONSTRUCTION & DEMOLITION WASTE
LANDFILL**

Facility Annual Report

For the period of **July 1, 2010-June 30, 2011**

According to (G.S. 130A-309.09D(b)) completed forms must be returned by August 1, 2011 and a copy of this report must be sent to the County Manager of each county from which waste was received. If you have questions or require assistance in completing this report, contact your Regional Environmental Senior Specialist.

Facility Name: White Street Landfill Permit: 4103-CDLF-1998 ID: P0801

Facility Website (URL): www.greensboro-nc.gov

Street 1: <u>2503 White Street</u>	Street 1: <u>City of Greensboro Field Operations Department</u>
Street 2: _____	Street 2: <u>401 Patton Avenue</u>
City: <u>Greensboro</u> County: <u>Guilford</u>	City: <u>Greensboro</u>
State: <u>North Carolina</u> Zip: <u>27405</u>	State: <u>North Carolina</u> Zip: <u>27406</u>

Name: <u>Jason Jernigan</u>	Name: <u>Jason Jernigan</u>
Phone: <u>(336) 412-3959</u> Fax: <u>(336) 373-7656</u>	Phone: <u>(336) 412-3959</u> Fax: <u>(336) 373-7656</u>
Email: <u>jason.jernigan@greensboro-nc.gov</u>	Email: <u>jason.jernigan@greensboro-nc.gov</u>

1. Tipping Fee: \$31.00 per Ton (Attach a schedule of tipping fees if appropriate.)
2. Does the tip fee above include the \$2.00 Solid Waste Tax? Yes No
3. What other activities occur at this facility? (check all that apply)
- Recycling/Reuse Collection Scrap Tire Collection White Goods Collection Household Hazardous Waste Collection
- If you checked Recycling/Reuse Collection, please indicate the materials accepted: (check all that apply)
- Paper Wood Concrete/rubble/asphalt Gypsum/drywall
- Cardboard Glass Aluminum Cans Steel Cans
- PETE (#1) Plastic HDPE (#2) Plastic Computer Equipment Televisions
- Fluorescent lightbulbs Used oil/oil filters Other Metal Other Plastic
- Other (specify) _____

Airspace (Capacity): Questions in this section relate to all cells/units of the C&D facility operated under the current 4-digit permit number regardless of whether the cells/units are closed or are not contiguous at the time of this report. Tonnage questions must be based on scale records and cover the period between the opening date and the date of the last survey unless another time period is approved. Airspace measurements include weekly, intermediate and final cover.	4. Date Facility Last Surveyed: <u>July 1, 2011</u>
	5. Airspace Used (cubic yards): <u>1,271,797</u>
	6. Total Tons Disposed in Airspace Used (tons): <u>1,534,487.75</u>

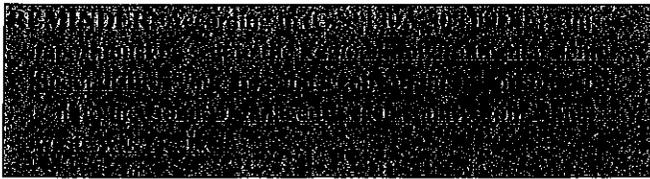
7. Did your facility stop receiving waste during this past Fiscal Year? Yes No
- If so, please report the date this occurred: _____

9. Are there SWANA or other certified operator(s) at this facility? Yes No

If yes, indicate the following:

Name: <u>Gail Hay, P.E.</u>	Certification type and expiration date: <u>Certified Landfill Operations Specialist 3-19-13</u>
Name: <u>Jason Jernigan</u>	Certification type and expiration date: <u>Certified Landfill Operations Specialist 12-04-12</u>
Name: <u>Holly Johnson</u>	Certification type and expiration date: <u>Certified Landfill Manager 02-11-13</u>
Name: <u>Lewis Walker</u>	Certification type and expiration date: <u>Certified Landfill Manager 6-26-12</u>
Name: <u>John Bald</u>	Certification type and expiration date: <u>Certified Landfill Operations Specialist 12-04-12</u>

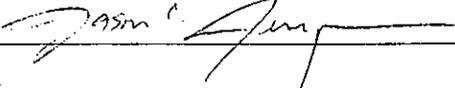
10. Comments, suggestions or notes:



Please return your completed report to:

Hugh Jernigan
585 Waughtown Street
Winston-Salem, NC 27107-2275
phone: 336.771.5093 email: Hugh.Jernigan@ncdenr.gov

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

Signature:  Date: 7-13-11

Name: Jason Jernigan Title: Landfill Operations Supervisor

Phone Number: (336) 412-3959 Email: jason.jernigan@greensboro-nc.gov