| C&D | State of North Carolina<br>Department of Environment and Natural Resources<br>Division of Waste Management | **CONSTRUCTION & DEMOLITION WASTE LANDFILL**<br>Facility Annual Report<br>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: Haywood County Solid Waste Management Permit: 4407-CDLF- ID: P1102

Facility Website (URL): www.haywoodnc.net

| Physical Address | Mailing Address |
|---|---|
| Street 1: 3878 Fines Creek Rd | Street 1: 278 Recycle Rd |
| Street 2: | Street 2: |
| City: Waynesville County: Haywood | City: Clyde |
| State: North Carolina Zip: 28785 | State: North Carolina Zip: 28721 |

| Primary Facility Contact Person | Billing Contact Person |
|---|---|
| Name: Stephen King | Name: Stephen King |
| Phone: (828) 627-8042 Fax: (828) 627-8137 | Phone: (828) 627-8042 Fax: (828) 627-8137 |
| Email: sking@haywoodnc.net | Email: sking@haywoodnc.net |

1. Tipping Fee: $55.00 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 and amount collected: (check all that apply)

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| ☐ Paper | tons | ☐ Fluorescent lightbulbs | tons | ☐ Used oil/oil filters | tons | ☐ Steel Cans | tons |
| ☐ Cardboard | tons | ☐ PETE (#1) Plastic | tons | ☐ Aluminum Cans | tons | ☐ Other Metal | tons |
| ☐ Wood | tons | ☐ HDPE (#2) Plastic | tons | ☐ Computer Equipment | tons | ☐ Televisions | tons |
| ☐ Glass | tons | ☐ Concrete/rubble/asphalt | tons | ☐ Gypsum/drywall | tons | ☐ Other Plastic | tons |

☐ 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: closure certified 8/31/09<br>5. Airspace Used (cubic yards): 105,607.46<br>6. Total Tons Disposed in Airspace Used (tons): |

7. Did your facility stop receiving waste during this past Fiscal Year? ☐ Yes ☒ No

If so, please report the date this occurred: 6/30/2008

8. Total waste landfilled at this facility during the period of July 1, 2010, through June 30, 2011. Indicate **tonnage** received by COUNTY of waste origin. If waste was received from a transfer station, indicate the COUNTY LOCATION OF THE TRANSFER STATION. Do not include waste diverted for recycling, reuse, mulching, or composting. Please indicate COUNTY and STATE, if received from another state.

| Received From | Jul | Aug | Sept | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | June | Total |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | |

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

If yes, indicate the following:

Name: _____ Certification type and expiration date: _____

Name: _____ Certification type and expiration date: _____

Name: _____ Certification type and expiration date: _____

Name: _____ Certification type and expiration date: _____

Name: _____ Certification type and expiration date: _____

10. Comments, suggestions or notes:

**REMINDER:** 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.

Please return your completed report to:

Andrea Keller
2090 US Highway 70
Swannanoa, NC 28778
phone: 828.296.4700 email: Andrea.Keller@ncdenr.gov

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

Signature: _____ Date: Jul 29, 2011

Name: Stephen King Title: Director

Phone Number: (828) 627-8042 Email: sking@haywoodnc.net

NC DENR
Division of Waste Management - Solid Waste Section

# Risk Assessment Form

Facility Name: Haywood County Solid Waste Management Permit: 4407-CDLF-

Address: 3878 Fines Creek Rd

City: Waynesville State: North Carolina Zip: 28785

Person completing Assessment: Stephen King Date: Jul 29, 2011

Phone Number: (828) 627-8042 Fax: (828) 627-8137 Email: sking@haywoodnc.net

| 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? 19
   What are the three closest distances from the *Edge of Waste*? 627 Feet 720 Feet 800 Feet

2. Are there Potable Wells Within 1,500 feet of the Edge of Waste? ☒ Yes ☐ No

   If Yes, how many? 19
   What are the three closest distances from the *Edge of Waste*? 627 Feet 720 Feet 800 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? 1
   What are the three closest distances from the *Edge of Waste*? 100 Feet _____ Feet _____ Feet

   Please list the names of the water bodies: Unnamed Tributary

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**