MSW	State of North Carolina Department of Environment and Natural Resources Division of Waste Management	**MUNICIPAL SOLID 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: Johnston County Landfill Permit: 5103-MSWLF-1997 ID: P0818

Facility Website (URL): www.johnstonnc.com

Physical Address	Mailing Address
Street 1: 680 County Home Road	Street 1: P.O. Box 2263
Street 2:	Street 2:
City: Smithfield County: Johnston	City: Smithfield
State: North Carolina Zip: 27577	State: North Carolina Zip: 27577

Primary Facility Contact Person	Billing Contact Person
Name: Rick Proctor	Name: Same
Phone: (919) 938-4750 Fax: (919) 989-7152	Phone: Fax:
Email: rick.proctor@johnstonnc.com	Email:

1. Tipping Fee: $35.00 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 lined 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 daily, intermediate and final cover.	4. Date Facility Last Surveyed: 6-11-10 5. Airspace Used (cubic yards): 1,087,199 6. Total Tons Disposed in Airspace Used (tons): 514,181

7. How is your leachate transported to the waste water treatment plant? ☒ Sewer Connection ☐ Pump Truck

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

If so, please report the date this occurred: 1-8-03

9. 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**
Johnston County	0	0	0	0	0	0	0	0	0	0	0	0	0

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

If yes, indicate the following:

Name: Rick Proctor	Certification type and expiration date: SWANA MOLO 8-20-11
Name: Billie Thornton	Certification type and expiration date: SWANA MOLO 8-31-13
Name: Allen Best	Certification type and expiration date: SWANA MOLO 6-15-13
Name: Kevin Shields	Certification type and expiration date: SWANA MOLO 3-22-13
Name:	Certification type and expiration date:

11. Comments, suggestions or notes:

This area is currently inactive.

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:

Mary Whaley
1646 Mail Service Center
Raleigh, NC 27699-1646
phone: 919.693.5023 email: Mary.Whaley@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: Rick Proctor Title: Solid Waste Manager

Phone Number: (919) 938-4750 Email: rick.proctor@johnstonnc.com

NC DENR
Division of Waste Management - Solid Waste Section

Risk Assessment Form

Facility Name: Johnston County Landfill Permit: 5103-MSWLF-1997

Address: 680 County Home Road

City: Smithfield State: North Carolina Zip: 27577

Person completing Assessment: Rick Proctor Date: Jul 29, 2011

Phone Number: (919) 938-4750 Fax: (919) 989-7152 Email: rick.proctor@johnstonnc.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? _____
   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? 2
   What are the three closest distances from the *Edge of Waste*? 1400 Feet 200 Feet _____ Feet

   Please list the names of the water bodies: Middle Creek & Unnamed Creek

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? 0

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? NA

Comments

None