

According to (G.S. 130A-309.09D(b)) completed forms must be returned by August 1, 2013 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: East Carolina Reg Landfill Permit: 0803-MSWLF-1993

Facility Website (URL): _____

Physical Address	Mailing Address
Street 1: <u>1922 Republican Road</u>	Street 1: <u>1922 Republican Road</u>
Street 2: _____	Street 2: _____
City: <u>Aulander</u> County: <u>Bertie</u>	City: <u>Aulander</u>
State: <u>North Carolina</u> Zip: <u>27805</u>	State: <u>North Carolina</u> Zip: <u>27805</u>

Primary Facility Contact Person	Billing Contact Person
Name: <u>Matthew East</u>	Name: <u>Matthew East</u>
Phone: <u>(252) 348-3322</u> Fax: <u>(252) 348-3395</u>	Phone: <u>(252) 348-3322</u> Fax: <u>(252) 348-3395</u>
Email: <u>Matthew.East@republicservices.com</u>	Email: <u>Matthew.East@republicservices.com</u>

- Tipping Fee: \$ _____ per Ton (Attach a schedule of tipping fees if appropriate.)
- Does the tip fee above include the \$2.00 Solid Waste Tax? Yes No
- 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: <u>02/06/2013</u>
	5. Airspace Used (cubic yards): <u>10,653,709</u>
	6. Total Tons Disposed in Airspace Used (tons): <u>9,019,616</u>

- How is your leachate transported to the waste water treatment plant? Sewer Connection Pump Truck
- Did your facility stop receiving waste during this past Fiscal Year? Yes No
 If so, please report the date this occurred: _____

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

If yes, indicate the following:

Name: Matthew East Certification type and expiration date: Certified Landfill Manager: 09/2013
Name: Archie Bush Certification type and expiration date: Certified Landfill Ops. Specialist: 06/2015
Name: Marsha Goodwin Certification type and expiration date: Certified Landfill Ops. Specialist: 06/2015
Name: _____ Certification type and expiration date: _____
Name: _____ Certification type and expiration date: _____

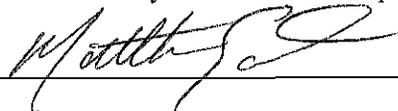
11. Comments, suggestions or notes:

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:

Ben Barnes
PO Box 8998
Rocky Mount, NC 27804-6998
phone: 252.459.4502 email: Ben.Barnes@ncdenr.gov

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

Signature:  Date: Jul 19, 2013

Name: Matthew East Title: Division Manager

Phone Number: (252) 348-3322 Email: Matthew.East@republicservices.com

Facility Name: East Carolina Reg Landfill Permit: 0803-MSWLF-1993

Address: 1922 Republican Road

City: Aulander State: North Carolina Zip: 27805

Person completing Assessment: Matthew East Date: _____

Phone Number: (252) 348-3322 Fax: (252) 348-3395 Email: Matthew.East@republicservices.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? 16
 What are the three closest distances from the *Edge of Waste*? 199 Feet 283 Feet 429 Feet
 Please list the names of the water bodies: Borrow 8,9 Wetlands P, K, J, L, M,Q, A, I H, F, G, X, Y, Z

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

**SCHEDULE OF TIPPING FEE
2012-2013**

COUNTIES	RATE
BEAUFORT	\$ 45.25
BERTIE	\$ -
CHOWAN	\$ 43.31
CURRITUCK	\$ 65.52
DARE	\$ 67.06
EDGECOMBE	\$ 28.53
HALIFAX	\$ 21.27
HERTFORD	\$ 49.57
LENOIR	\$ 36.94
MARTIN	\$ 46.44
PERQUIMANS	\$ 60.69
PITT	\$ 28.55
WASHINGTON	\$ 49.57
GATE RATE	\$ 65.84