

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: BFI-Charlotte Mtr Speedway Landfill V Permit: 1304-MSWLF-1992

Facility Website (URL): www.republicservices.com

Physical Address	Mailing Address
Street 1: <u>5105 Morehead Road</u>	Street 1: <u>same</u>
Street 2: _____	Street 2: _____
City: <u>Concord</u> County: <u>Cabarrus</u>	City: _____
State: <u>North Carolina</u> Zip: <u>28027</u>	State: <u>North Carolina</u> Zip: _____

Primary Facility Contact Person	Billing Contact Person
Name: <u>Bart Keller</u>	Name: <u>Mike Gurley</u>
Phone: <u>(704) 262-6002</u> Fax: <u>(704) 782-2177</u>	Phone: <u>(704) 262-6019</u> Fax: <u>(704) 782-2177</u>
Email: <u>tkeller@republicservices.com</u>	Email: <u>mgurley@republicservices.com</u>

1. Tipping Fee: \$52.40 _____ 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) _____

<p>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.</p>	4. Date Facility Last Surveyed: <u>01/27/2013</u>
	5. Airspace Used (cubic yards): <u>28,974,120</u>
	6. Total Tons Disposed in Airspace Used (tons): <u>28,552,701</u>

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: _____

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

If yes, indicate the following:

Name: <u>Bart Keller</u>	Certification type and expiration date: <u>Certified Landfill Manager 6/7/16</u>
Name: <u>George Spry Sr</u>	Certification type and expiration date: <u>Certified Landfill Manager 7/28/15</u>
Name: <u>Anthony Reiss</u>	Certification type and expiration date: <u>Certified Landfill Manager 3/9/16</u>
Name: <u>Mike Gurley</u>	Certification type and expiration date: <u>Certified Landfill Manager 2/11/16</u>
Name: <u>Ralph Earnhardt</u>	Certification type and expiration date: <u>Certified Landfill Operator 12/6/15</u>

11. Comments, suggestions or notes:

Also Certified Landfill Operators:
 Marvin Dry Certified Landfill Operator 4/26/16
 James Talley Certified Landfill Operator 11/18/16
 Dale Shepherd Certified Landfill Operator 4/15/14
 Charles Sparks Certified Landfill Operator 4/19/14
 Michael Earnhardt Certified Landfill Operator 4/19/14
 Kevin Dennis Certified Landfill Operator 5/16/15
 George Spry Jr Certified Landfill Operator 5/16/15
 James Drye Certified Landfill Operator 10/19/15
 James Jacobs Certified Landfill Operator 10/19/15
 Terry Thomas Certified Landfill Operator 12/6/15

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:

Teresa Bradford
 610 East Center Avenue
 Mooresville, NC 28115
 phone: 704.235.2160 email: Teresa.Bradford@ncdenr.gov

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

Signature: Keller, Bartow  Date: Jul 31, 2013

Name: Thomas B Keller Title: General Manager

Phone Number: (704) 262-6002 Email: tkeller@republicservices.com

Facility Name: BFI-Charlotte Mtr Speedway Landfill V Permit: 1304-MSWLF-1992

Address: 5105 Morehead Road

City: Concord State: North Carolina Zip: 28027

Person completing Assessment: Mike Gurley Date: Jul 31, 2013

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? 139
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? _____
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*? 50 Feet 50 Feet 50 Feet
Please list the names of the water bodies: Rocky River and Mallard 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? All

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