

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: City of Albemarle Landfill Permit: 8401-MSWLF-1999

Facility Website (URL): \_\_\_\_\_

Physical Address	Mailing Address
Street 1: <u>40592B Stony Gap Road</u>	Street 1: <u>P O Box 190</u>
Street 2: _____	Street 2: <u>144 North Second St</u>
City: <u>Albemarle</u> County: <u>Stanly</u>	City: <u>Albemarle</u>
State: <u>North Carolina</u> Zip: <u>28001</u>	State: <u>North Carolina</u> Zip: <u>28002-0190</u>

Primary Facility Contact Person	Billing Contact Person
Name: <u>Darren Preslar</u>	Name: <u>Nina Underwood</u>
Phone: <u>(704) 984-9680</u> Fax: <u>(704) 986-6127</u>	Phone: <u>(704) 984-9667</u> Fax: <u>(704) 986-6127</u>
Email: <u>dpreslar@ci.albemarle.nc.us</u>	Email: <u>nunderwood@ci.albemarle.nc.us</u>

1. Tipping Fee: \$37.00 \_\_\_\_\_ 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) Latex Paint

<p><b>Airspace (Capacity):</b> 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>7-29-2013</u>
	5. Airspace Used (cubic yards): <u>1,136,270</u>
	6. Total Tons Disposed in Airspace Used (tons): <u>646,678</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>Darren Preslar</u>	Certification type and expiration date: <u>Certified Landfill Manager 6-15-2016</u>
Name: <u>Nina Underwood</u>	Certification type and expiration date: <u>Certified Landfill Manager 1-13-2014</u>
Name: <u>Jan Borgmann</u>	Certification type and expiration date: <u>Certified Landfill Operations Specialist 2-8-2014</u>
Name: <u>Wesley Kaylor</u>	Certification type and expiration date: <u>Certified Landfill Technical Associate 6-8-2015</u>
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:

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: Nina Underwood

Digitally signed by Nina Underwood  
DN: cn=Nina Underwood  
Date: 2013.07.31 08:14:04 -0400

Date: 7-31-2013

Name: Nina Underwood Title: Interim Public Works Director

Phone Number: (704) 984-9667 Email: nunderwood@ci.albemarle.nc.us

Facility Name: City of Albemarle Landfill Permit: 8401-MSWLF-1999

Address: 40592B Stony Gap Road

City: Albemarle State: North Carolina Zip: 28001

Person completing Assessment: Nina Underwood Date: Jul 31, 2013

Phone Number: (704) 984-9667 Fax: (704) 986-6127 Email: nunderwood@ci.albemarle.nc.us

**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? 1 \_\_\_\_\_  
What are the three closest distances from the *Edge of Waste*? 100 Feet 105 Feet 110 Feet  
Please list the names of the water bodies: Jacob's Creek (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**