



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: WILSON COUNTY SOLID WASTE C&D LANDFILL Permit: 9809-CDLF

Facility Website (URL): WWW.WILSON-CO.COM

Physical Address	Mailing Address
Street 1: <u>2400 NC HWY 42 EAST</u>	Street 1: <u>PO BOX 1728</u>
Street 2: _____	Street 2: _____
City: <u>WILSON</u> County: <u>Wilson</u>	City: <u>WILSON</u>
State: <u>North Carolina</u> Zip: <u>27893</u>	State: <u>North Carolina</u> Zip: <u>27894</u>

Primary Facility Contact Person	Billing Contact Person
Name: <u>Andy Davis</u>	Name: <u>Andy Davis</u>
Phone: <u>(252) 399-2823</u> Fax: <u>(252) 399-0904</u>	Phone: <u>(252) 399-2823</u> Fax: <u>(252) 399-0904</u>
Email: <u>adavis@wilson-co.com</u>	Email: <u>adavis@wilson-co.com</u>

1. Tipping Fee: \$40.00 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 and provide tonnages)
 - Paper _____ tons Fluorescent lightbulbs _____ tons Used oil/oil filters 9 tons Steel Cans _____ tons
 - Cardboard 7 tons PETE (#1) Plastic _____ tons Aluminum Cans _____ tons Other Metal _____ tons
 - Wood _____ tons HDPE (#2) Plastic _____ tons Computer Equipment 41 tons Televisions 65 tons
 - Glass _____ tons Concrete/rubble/asphalt _____ tons Gypsum/drywall _____ tons Other Plastic _____ tons
 - Shingles 37 tons Other (specify) Pallets 139 tons, Latex Paint 2 tons

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: <u>3-19-2013</u>
	5. Airspace Used (cubic yards): <u>268,107</u>
	6. Total Tons Disposed in Airspace Used (tons): <u>193,401</u>

7. Did your facility stop receiving waste during this past Fiscal Year? Yes No
 If so, please report the date this occurred: _____

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

If yes, indicate the following:

Name: <u>Andy Davis</u>	Certification type and expiration date: <u>Landfill Technical Associate 5-6-2014</u>
Name: <u>Andy Davis</u>	Certification type and expiration date: <u>Manager of Recycling System 6-6-2016</u>
Name: <u>Melinda Wall</u>	Certification type and expiration date: <u>Operation Specialist 10-19-2016</u>
Name: <u>Kenny Mathews</u>	Certification type and expiration date: <u>Operation Specialist 10-19-2016</u>
Name: <u>Gary Strickland</u>	Certification type and expiration date: <u>Operation Specialist 4-5-2014</u>

10. Comments, suggestions or notes:

Paige Aycock Operation Specialist 10-19-2016
Tyler Wells Operation Specialist 6-3-2014
Beth Warren Operation Specialist 6-21-2016

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: ANDY DAVIS

Digitally signed by ANDY DAVIS
DN: cn=ANDY DAVIS, o=WILSON COUNTY, ou=SOLID WASTE, email=ADAVIS@WILSON-CO.COM,
c=US
Date: 2013.07.15 13:51:08 -0400

Date: 07-15-2013

Name: Andy Davis Title: Director

Phone Number: (252) 399-2823 Email: adavis@wilson-co.com

Facility Name: WILSON COUNTY SOLID WASTE C&D LANDFILL Permit: 9809-CDLF

Address: 2400 NC HWY 42 EAST

City: WILSON State: North Carolina Zip: 27893

Person completing Assessment: Andy Davis Date: 07-15-2013

Phone Number: (252) 399-2823 Fax: (252) 399-0904 Email: adavis@wilson-co.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? _____
What are the three closest distances from the *Edge of Waste*? 600 Feet 650 Feet 800 Feet
Please list the names of the water bodies: Buck Branch
- 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