

County: WILLIAMSON

Texas Commission on Environmental Quality

FY 2012 MSW Annual Report for Landfills

Instructions: This form (TCEQ-20011a) is for **Landfills** (Type I, IAE, IV, IVAE or IAE & IVAE) **only**. This report form and forms for Processing Facilities (TCEQ-20011b), Facilities Recovering Landfill Gas for Beneficial Use (TCEQ-20011c) and Monofills (TCEQ-20011d) as well as detailed **Instructions and Guidance** (TCEQ-20011-Inst) are available on the Texas Commission on Environmental Quality (TCEQ) website at www.tceq.texas.gov/permitting/waste_permits/waste_planning/wp_annual.html or can be obtained by contacting the TCEQ at (512)239-2626.

A report is required to be submitted for an MSW landfill with an issued permit, regardless of the facility's physical status (active, inactive, or post-closure care). This year, the report is due to the agency by **December 31, 2012**.

Fill in all fields in this report that relate to the facility and its operations. If you have any questions for completing this form contact us at (512)239-2626. Individuals are entitled to request and review their personal information that the agency gathers on its forms. They may also have any errors in their information corrected. To review such information, contact the agency at 512-239-3282.

Section 1 – General Information *(Required)*

Facility Information

Facility Permit Number	MSW 1405B		
Facility Name:	Williamson County Recycling & Disposal Facility		
Facility Type:	MSW TYPE I		
Regulated Entity Number (RN):	RN100225754		
Site Operator/Permittee:	Williamson County		

Contact Information

Contact Name:	Timothy J. Champagne, PE			
Title:	Environmental Protection Manager			
Company:	Waste Management Texas			
Address:	600 Landfill Road			
City, State, Zip:	Hutto	TX	78634	
Phone:	(512) 272-6261			
Fax:	(512) 272-8960			
E-mail Address:	tchampag@wm.com			

Section 2 – Facility Status *(Required)*

Mark the status of your facility during FY 2012 (9/1/11 to 8/31/12)

- ☒ Active – The facility operated this FY.
- ☐ Inactive New *– The facility is authorized, but never operated.
- ☐ Inactive *– The facility did not operate this FY.
- ☐ Closed – Authorization to operate was cancelled or revoked.
- ☐ Post-Closure Care.

*If facility status is Inactive or Inactive New, the projected date of operation is:

NA

Section 3 – Signature *(Required)*

The following affirmation must be completed for your annual report to be accepted.

- ☒ This facility is ACTIVE and “I affirm, as an authorized representative of the permit holder, that the information contained in this report is, to the best of my knowledge and understanding, complete and accurate.”
- ☐ This facility is INACTIVE and “I affirm, as an authorized representative of the permit holder, that this facility was inactive for the entire FY 2012 and that the information contained in this report is, to the best of my knowledge and understanding, complete and accurate.”

Printed Name : TIMOTHY J CHAMPAGNE, PE

Signature:



Title: EP MANAGER

Date: 12/05/2012

Note: If the facility has not accepted any waste during FY 2012, please complete pages 1 & 2 and return to the TCEQ.

Section 4 – Facility Fees and Areas Served

[1]	Does this facility use scales for incoming waste?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
[2]	Does this facility use vehicular volume?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
[3]	Provide the average rate, in dollar amount(s) for all applicable measuring systems:		
Ton:	\$34.50		
Gallon:	NA		
Pound:	NA		
Compacted Cubic Yards (CY):			
Uncompacted CY:			
[4]	List all the Texas counties or county codes* from which the facility accepted waste. If additional space is needed, include an attachment. <u>BELL, TRAVIS, BURNET, MILAM, WILLIAMSON</u> _____ _____		
[5]	List all states or state codes*, other than Texas, from which the facility accepted waste. <u>NONE</u> _____ _____ _____ Note: If waste was accepted from out of state or Mexico, list amounts treated in Section 6 and amounts disposed in Section 7.		

*County and state codes are available by calling 512/239-2626 or online at:
www.tceq.texas.gov/permitting/waste_permits/waste_planning/wp_annual.html.

Section 5 – Diversion

- [1]** List the amount, **in tons**, for the following materials **received** and then **diverted** (i.e., recycled, reused, recovered) by the landfill. If material was diverted from being disposed, but treated at the landfill, as authorized by the permit, please include applicable amounts below and in Section 6. However, do not include materials transferred via a registered Type V facility located within the landfill's permitted boundary.

Material Type	Tons
Yard Waste or Brush	5289.98 tons
Metal	459.20 tons
Glass	0 tons
Plastic	5.00 tons
Construction/Demolition Waste	0 tons
Paper/Cardboard	207.60 tons
Electronic Materials	423.50 tons
White Goods	0 tons
Tires	tons
Other Wastes	962.90 tons

- [2]** Identify other material types diverted:

Clean Soil

Section 6 – Solid Waste Treatment

- [1]** For each applicable method, list the amount, **in tons**, and by origin for wastes **received** and **treated** at the facility.

Treatment Method	In-State	Out-of-State	Mexico	TOTAL
Incineration				
Autoclave				
Composting				
Digestion				
Other	6342.98			6342.98
TOTAL TONS	6342.98			6342.98

- [2]** Identify "Other" solid waste treatment methods:

Brush and Clean Wood Grinding = 5289.98 Shingles Processed = 1052.69 Tires Processed = 0.31

Section 7 – Landfill Disposal

[1] Enter the amount, **in tons**, and by origin for each waste type disposed at the facility.

Waste Type	In-State	Out-of-State	Mexico	TOTAL
Municipal	143,329.24			143,329.24
Brush				
Construction/Demolition	62,593.62			62,593.62
Litter	0			0
Tires ¹	0.31			0.31
Contaminated Soils	701.68			701.68
Medical Waste				
Dead Animals/ Slaughterhouse	9.89			9.89
RACM ²	43.29			43.29
Non-RACM ²	3.00			3.00
Pesticide Containers	0			0
CESQG ³	0			0
Sludge	40,874.66			40,874.66
Grease Trap				
Grit Trap				
Used Oil Filters	0			0
Class 2 and 3 NHIW ⁴	549.74			549.74
Septage	0			0
Incinerator Ash	0			0
Other (SHINGLES)	1,052.69			1,052.69
TOTAL TONS	249,158.12			249,158.12

1. Tires - only split, quartered, or shredded tires may be disposed of in a landfill.
2. RACM (Regulated Asbestos Containing Material)
3. CESQG (Municipal Hazardous Waste from Conditionally Exempt Small Quantity Generator)
4. NHIW (Non Hazardous Industrial Waste)

[2] Identify "Other" waste types :

RESIDENTIAL COMPOSITE SHINGLES

Section 8 – Landfill Characteristics and Management

Provide all information applicable to the facility for this FY.

[1]	Total Permitted Area:	575 acres		
[2]	Non-fill Areas:	152.5 acres		
[3]	Fill Areas in Post-Closure:	0 acres		
[4]	Facility's Permanent Benchmark Elevation:	700 ft		
[5]	Permitted Max Elevation at Final Cover:	840 ft		
[6]	Permitted Max Elevation at Deepest Excavation: (A negative number indicates the elevation is below mean sea level)	654 ft		
[7]	Is an Alternative Liner used?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
[8]	Is this facility using Alternative Daily Cover? If "Yes", what type(s)? Select all that are currently being used.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	<input type="checkbox"/> Contaminated Soil			
	<input type="checkbox"/> Tarp			
	<input type="checkbox"/> Sludges			
	<input type="checkbox"/> Spray On			
	<input type="checkbox"/> Other			
[9]	Does this facility have a Gas Collection Control System (GCCS)? If "Yes" please answer Questions [10] and/or [11]?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
[10]	Amount of Gas Flared:	461,779,000 ft ³		
[11]	Amount of Gas Vented:	0 ft ³		
[12]	Indicate Method of Leachate Management: Newly permitted leachate evaporation	<input type="checkbox"/> N/A	<input checked="" type="checkbox"/> On-Site	<input checked="" type="checkbox"/> Off-Site
[13]	Estimated Amount of Leachate removed and disposed offsite:	518,000 gallons		
[14]	Does this facility conduct Groundwater Monitoring? If "Yes", please answer questions [15 and [16].	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	

[15] Number of Point of Compliance Wells:	14
[16] Number of Background Wells:	2
[17] Does this facility conduct Landfill Gas Monitoring? If "Yes", please answer questions [18].	<input checked="checked" type="checkbox"/> Yes <input type="checkbox"/> No
[18] Number of Landfill Gas Monitoring Wells/Probes:	20
[19] Amount of Class 1 NHIW disposed:	0.00 tons
[20] Class 1 NHIW Remaining Capacity	0.00 tons

Section 9A – Landfill Capacity Assessment

If an aerial survey was conducted on or between March 1, 2012, and August 31, 2012, please complete the following section of the report. If not, skip to "Section 9B – Landfill Remaining Capacity Estimation".

[1] Surveyed Capacity	yd ³	Survey Date (mm/dd/yyyy):	
[2] Assessed Capacity as of 8/31/12:			yd ³
[3] Estimated Compaction Rate:			lbs/yd ³
[4] FY2012 Remaining Capacity • Multiply the quantity in [2] by the quantity in [3] and divide by 2000 lbs/ton			tons
[5] Remaining Years at Current Performance (estimated)			years

The following information pertaining to the engineer that completed the capacity assessment is required.

[6] Engineer's Firm Name:			
[7] Engineer's Firm Registration Number:			
[8] Engineer's Name:			
[9] Engineer's License Number			
[10] Engineer's Telephone #:		[11] Engineer's E-mail:	

Section 9B – Landfill Remaining Capacity Estimation

If you did not assess capacity for your facility this FY or the landfill survey was conducted prior to March 2012, complete this section.

[1] Total Tons Disposed: (Total should include total tons from Section 7 and Class 1 NHIW)	249,158.12 tons		
[2] Estimated Compaction Rate:	1,316 lbs/yd ³		
[3] Estimated Volume of Cover Placed: Note - If [3] is not recorded separately for your facility, but is accounted for in Item [4], please assume "0" for [3].	0 yd ³		
[4] Total of Airspace used this FY: • Multiply [1] by 2,000 lbs/ton, then divide the total by [2] and add [3]	378,660 yd ³		
[5] Last FY's Remaining Capacity:	62,063,581 yd ³		
[6] Permit Airspace Changed through Amendment this FY:	<input type="checkbox"/> Decreased	<input type="checkbox"/> Increased	<input checked="" type="checkbox"/> No Change
[7] Indicate the Amount of Change, if applicable:	0 yd ³		
[8] This FY's Remaining Capacity: • If [6] is checked for "No Change", subtract [4] from [5] • If [6] is checked for "Increase", subtract [4] from [5], then add [7] • If, [6] is checked for "Decrease" subtract [4] from [5], then subtract [7]	61,684,921 yd ³		
[9] This FY's Remaining Capacity: • Multiply [2] by [8] , then divide by 2,000 lbs/ton	40,588,678 tons		
[10] Estimated Remaining Years of Capacity at Current Performance :	120 years		

Section 10 – Other Activities

Please indicate all other TCEQ authorized activities that occurred within the facility boundary or are associated with the facility, and provide the authorization (permit, registration, notification, etc.) numbers.

[1]	Solidification/Dewatering?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
[2]	Composting: If authorized, provide the Composting Facility Authorization No.: <u>1405B</u>	<input checked="" type="checkbox"/> Authorized	<input type="checkbox"/> Exempt
[3]	Recycling: If authorized, provide the Recycling Facility Authorization No.: _____	<input type="checkbox"/> Authorized	<input checked="" type="checkbox"/> Exempt
[4]	Citizens' Collection Station Authorization No.:	NA	
[5]	Low Volume Transfer Station Authorization No.:	NA	
[6]	Transfer Station Authorization No.:	NA	
[7]	Grease/Grit Processor Authorization No.:	NA	
[8]	Medical Waste Facility Authorization No.:	NA	
[9]	Landfill Gas Recovery Facility for Beneficial Use Authorization No.:	NA	
[10]	Is the authorized Landfill Gas Recovery Facility for Beneficial Use owned by the landfill?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
[11]	Tire Storage/Processing: If authorized, provide the Tire Storage/Processing Authorization No: <u>Part of current MSW Permit 1405B</u>	<input checked="" type="checkbox"/> Authorized	<input type="checkbox"/> Exempt
[12]	Air Authorization? If authorized, provide the Air Authorization No(s) : <u>91262</u>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
[13]	Storm Water Authorization No:	TXR05AK38	
[14]	Air Curtain Incinerator Authorization?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No