

305 South Main St.  
Monroe, NC 28112  
Ph. 704.283.9765  
Fax: 704.283.9755

**Carlson  
Environmental  
Consultants, PC**

**LETTER OF TRANSMITTAL**

DATE 9/28/12	JOB NO. 101.07.07
ATTENTION: Sheree Grant	
PHONE # 407-553-4939	
RE: Vista Landfill	
Submittal(s): See details below	

TO: Sheree Grant  
WM Inc. of Florida Market Area Engineer  
242 West Keene Road  
Apopka, FL 32703

**ORIGINAL**

WE ARE SENDING YOU ☒ Attached via Binders the following items:  
☐ Shop Drawings ☐ Prints ☐ Plans ☐ Samples ☐ Specifications  
☐ Copy of Letter ☐ Change order ☐ Response ☒ LFG Permit Modifications

COPIES	DATE	NO.	DESCRIPTION
4		Originals	Send to FDEP, Attn: Thomas Lubozynski, P.E.
1		Copy	Send to Orange County
1		Copy	Sent to City of Apopka, Attn: Jay Davoll
1		Copy	Keep as WM's Copy

**RECEIVED**  
OCT 04 2012  
DEP Central District

THESE ARE TRANSMITTED as checked below:

☐ For approval ☐ Approved as submitted ☐ Resubmit \_\_\_\_\_ copies for approval  
☐ For your use ☐ Approved as noted ☐ Submit \_\_\_\_\_ copies for distribution  
☐ As requested ☐ Not Approved ☐ Return \_\_\_\_\_ corrected prints  
☐ For review and comment ☒ For redistribution  
☐ FOR BIDS DUE ☐ PRINTS RETURNED AFTER LOAN TO US

REMARKS:

None.

**RECEIVED**  
OCT 04 2012  
DEP Central District

COPY TO: None.

SIGNED:

DATE: 9/28/12

*If enclosures are not as noted, kindly notify us at once.*



**WASTE MANAGEMENT INC. OF FLORIDA**

Vista Landfill, LLC  
242 W. Keene Road  
Apopka, FL 32703

October 4, 2012

ORIGINAL

RECEIVED  
OCT 04 2012  
DEP Central District

Mr. Thomas Lubozynski, P.E.  
Waste Program Administrator  
Florida Department of Environmental Protection  
Central District  
3319 Maguire Blvd., Suite 232  
Orlando, FL 32803

Subject: Intermediate Class III Operation Permit Modification Application  
Gas Management System  
Vista Landfill, Class III  
WACS Facility 87081  
Permit No. SO48-0165969-018

Dear Mr. Lubozynski,

Vista Landfill, LLC is pleased to submit this intermediate operation permit modification to modify the Vista Landfill, Class III (Vista Landfill) Operation Permit (Permit No. SO 48-0165969-018) to include additional information related to the landfill gas management system. The Florida Department of Environmental Protection (FDEP) has requested that the Operation Permit be revised to include information related to the existing gas management system and the planned expansion of the gas management system.

Also included with this submittal is a check in the amount of \$2,000 to cover the permit modification application fee.

If you have any questions or concerns, please feel free to contact us.

Respectfully Submitted,

Paul Bermillo  
Environmental Protection Manager

cc: Craig Pelton – WMIF  
Sheree Grant – WMIF  
Seth A. Nunes, P.E. – CEC

**INTERMEDIATE CLASS III OPERATION PERMIT  
MODIFICATION APPLICATION  
GAS MANAGEMENT SYSTEM**

**VISTA LANDFILL, CLASS III FACILITY  
242 WEST KEENE ROAD  
APOPKA, FLORIDA 32703**



Prepared for:

**WASTE MANAGEMENT INC. OF FLORIDA**

Prepared by:

**CEC**

**CARLSON ENVIRONMENTAL CONSULTANTS, PC  
305 South Main Street  
Monroe, North Carolina 28112  
(704) 283-9765**

**September 2012**

RECEIVED  
OCT 04 2012  
DEP General District

Reset Form

Print Form



# Florida Department of Environmental Protection

Bob Martinez Center  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

DEP Form #: 62-701.900(1), F.A.C.

Form Title: Application to Construct, Operate, Modify, or  
Close a Solid Waste Management Facility

Effective Date: January 6, 2010

Incorporated in Rule: 62-701.330(3), F.A.C.

## STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

### APPLICATION TO CONSTRUCT, OPERATE, MODIFY, OR CLOSE A SOLID WASTE MANAGEMENT FACILITY

### APPLICATION INSTRUCTIONS AND FORMS

RECEIVED  
OCT 04 2009  
BIB. GARRARD-DISTRICT

Northwest District  
160 Governmental Center  
Pensacola, FL 32502-5794  
850-595-8360

Northeast District  
7825 Baymeadows Way, Ste. B200  
Jacksonville, FL 32256-7590  
904-807-3300

Central District  
3319 Maguire Blvd., Ste. 232  
Orlando, FL 32803-3767  
407-894-7555

Southwest District  
13051 N. Telecom Pkwy  
Temple Terrace, FL 33637  
813-632-7600

South District  
2295 Victoria Ave., Ste. 364  
Fort Myers, FL 33901-3881  
239-332-6975

Southeast District  
400 North Congress Ave.  
West Palm Beach, FL 33401  
561-681-6600

## INSTRUCTIONS TO APPLY FOR A SOLID WASTE MANAGEMENT FACILITY PERMIT

### I. General

Solid Waste Management Facilities shall be permitted pursuant to Section 403.707, Florida Statutes,(FS) and in accordance with Florida Administrative Code (FAC) Chapter 62-701. A minimum of four copies of the application shall be submitted to the Department's District Office having jurisdiction over the facility. The appropriate fee in accordance with Rule 62-701.315, FAC, shall be submitted with the application by check made payable to the Department of Environmental Protection (DEP).

Complete appropriate sections for the type of facility for which application is made. Entries shall be typed or printed in ink. All blanks shall be filled in or marked "not applicable" or "no substantial change". Information provided in support of the application shall be marked "submitted" and the location of this information in the application package indicated. The application shall include all information, drawings, and reports necessary to evaluate the facility. Information required to complete the application is listed on the attached pages of this form.

### II. Application Parts Required for Construction and Operation Permits

- A. Landfills and Ash Monofills - Submit Parts A through S
- B. Asbestos Monofills - Submit Parts A,B,C,D,E,F,I,K,M, O through S
- C. Industrial Solid Waste Disposal Facilities - Submit Parts A through S

**NOTE:** Portions of some Parts may not be applicable.

**NOTE:** For facilities that have been satisfactorily constructed in accordance with their construction permit, the information required for A, B and C type facilities does not have to be resubmitted for an operation permit if the information has not substantially changed during the construction period. The appropriate portion of the form should be marked "no substantial change".

### III. Application Parts Required for Closure Permits

- A. Landfills and Ash Monofills - Submit Parts A,B,L, N through S
- B. Asbestos Monofills - Submit Parts A,B,M, O through S
- C. Industrial Solid Waste Disposal Facilities - Submit Parts A,B, L through S

**NOTE:** Portions of some Parts may not be applicable.

### IV. Permit Renewals

The above information shall be submitted at time of permit renewal in support of the new permit. However, facility information that was submitted to the Department to support the expiring permit, and which is still valid, does not need to be re-submitted for permit renewal. Portions of the application not re-submitted shall be marked "no substantial change" on the application form.

**V. Application Codes**

S	-	Submitted
LOCATION	-	Physical location of information in application
N/A	-	Not Applicable
N/C	-	No Substantial Change

**VI. LISTING OF APPLICATION PARTS**

PART A:	GENERAL INFORMATION
PART B:	DISPOSAL FACILITY GENERAL INFORMATION
PART C:	PROHIBITIONS
PART D:	SOLID WASTE MANAGEMENT FACILITY PERMIT REQUIREMENTS, GENERAL
PART E:	LANDFILL PERMIT REQUIREMENTS
PART F:	GENERAL CRITERIA FOR LANDFILLS
PART G:	LANDFILL CONSTRUCTION REQUIREMENTS
PART H:	HYDROGEOLOGICAL INVESTIGATION REQUIREMENTS
PART I:	GEOTECHNICAL INVESTIGATION REQUIREMENTS
PART J:	VERTICAL EXPANSION OF LANDFILLS
PART K:	LANDFILL OPERATION REQUIREMENTS
PART L:	WATER QUALITY AND LEACHATE MONITORING REQUIREMENTS
PART M:	SPECIAL WASTE HANDLING REQUIREMENTS
PART N:	GAS MANAGEMENT SYSTEM REQUIREMENTS
PART O:	LANDFILL CLOSURE REQUIREMENTS
PART P:	OTHER CLOSURE PROCEDURES
PART Q:	LONG-TERM CARE
PART R:	FINANCIAL ASSURANCE
PART S:	CERTIFICATION BY APPLICANT AND ENGINEER OR PUBLIC OFFICER

**STATE OF FLORIDA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
APPLICATION FOR A PERMIT TO CONSTRUCT, OPERATE, MODIFY OR CLOSE  
A SOLID WASTE MANAGEMENT FACILITY**

Please Type or Print

**PART A. GENERAL INFORMATION**

1. Type of disposal facility (check all that apply):

- |  |  |
|--|--|
| <input type="checkbox"/> Class I Landfill              | <input type="checkbox"/> Ash Monofill      |
| <input checked="" type="checkbox"/> Class III Landfill | <input type="checkbox"/> Asbestos Monofill |
| <input type="checkbox"/> Industrial Solid Waste        |  |
| <input type="checkbox"/> Other Describe:               |  |

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**NOTE:** Waste Processing Facilities should apply on Form 62-701.900(4), FAC;  
Land Clearing Disposal Facilities should notify on Form 62-701.900(3), FAC;  
Compost Facilities should apply on Form 62-701.900(10), FAC; and  
C&D Disposal Facilities should apply on Form 62-701.900(6), FAC

2. Type of application:

- ☐ Construction  
☒ Operation  
☐ Construction/Operation  
☐ Closure  
☐ Long-term Care Only

3. Classification of application:

- |                                  |   |
|----------------------------------|---|
| <input type="checkbox"/> New     | <input type="checkbox"/> Substantial Modification             |
| <input type="checkbox"/> Renewal | <input checked="" type="checkbox"/> Intermediate Modification |
|                                  | <input type="checkbox"/> Minor Modification                   |

4. Facility name: Vista Landfill, Class III

5. DEP ID number: 87081 County: Orange

6. Facility location (main entrance):  
242 West Keene Road  
Apopka, Florida 32703

7. Location coordinates:

Section: 28 Township: 21 Range: 28E

Latitude: 28° 38' 24.5" Longitude: 81° 30' 41.7"

Datum: NAD 83/90 Coordinate Method: State Plan

Collected by: T. Jeffrey Young, PSM, CP Company/Affiliation: Pickett Surv. & Photogram



8. Applicant name (operating authority): Vista Landfill, LLC
- Mailing address: 242 West Keene Road Apoka Florida 32703  
Street or P.O. Box City State Zip
- Contact person: Timothy Hawkins Telephone: (352) 368-1890
- Title: Vice President, Waste Management Inc. of Florida
- thawkins@wm.com  
E-Mail address (if available)
9. Authorized agent/Consultant: Carlson Environmental Consultants, PC
- Mailing address: 305 South Main Street Monroe, NC 28112  
Street or P.O. Box City State Zip
- Contact person: Seth A. Nunes, PE Telephone: (863) 634-7185
- Title: Project Manager
- snunes@cecenv.com  
E-Mail address (if available)
10. Landowner (if different than applicant): \_\_\_\_\_
- Mailing address: \_\_\_\_\_  
Street or P.O. Box City State Zip
- Contact person: \_\_\_\_\_ Telephone: ( ) \_\_\_\_\_
- \_\_\_\_\_ E-Mail address (if available)
11. Cities, towns and areas to be served:  
Northwest Orange County and Metro Orlando, Florida  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
12. Population to be served:  
Current: 100,000 Five-Year Projection: 110,500
13. Date site will be ready to be inspected for completion: N/A
14. Expected life of the facility: 40.6 years
15. Estimated costs:  
Total Construction: \$ \_\_\_\_\_ Closing Costs: \$ \_\_\_\_\_
16. Anticipated construction starting and completion dates:  
From: NA To: NA
17. Expected volume or weight of waste to be received:  
\_\_\_\_\_ yds<sup>3</sup>/day \_\_\_\_\_ 2,500 tons/day \_\_\_\_\_ gallons/day

**PART B. DISPOSAL FACILITY GENERAL INFORMATION**

1. Provide brief description of disposal facility design and operations planned under this application:  
This application is for an intermediate modification to the existing operations permit to address the existing and proposed landfill gas (LFG) controls. These proactive LFG control measures have been implemented to reduce migration and maintain compliance. No other changes to the operations permit are proposed at this time.

Vista Landfill, Class III facility is currently a 102-acre landfill with leachate collection and storage systems. Permitted operations include Class III solid waste, disposal, materials recovery facility, small waste tire processing, yard trash recycling, pre-consumer vegetative waste composting, and an active borrow pit contained within the permitted landfill footprint.

2. Facility site supervisor: Deborah Perez  
Title: District Manager Telephone: (\_\_\_\_) \_\_\_\_\_  
dperez@wm.com  
E-Mail address (if available)

3. Disposal area: Total 102 acres; Used 17.5 acres; Available 84.5 acres.

4. Weighing scales used: ☒ Yes ☐ No C&D/Class III - \$24.10/ton  
\$60 minimum per load  
5. Security to prevent unauthorized use: ☒ Yes ☐ No Yard Waste - \$34/ton  
\$60 minimum per load  
6. Charge for waste received: \_\_\_\_\_ \$/yds<sup>3</sup> \_\_\_\_\_ \$/ton Asbestos - \$200/ton  
1 ton minimum per load  
7. Surrounding land use, zoning: Shredded tires - \$100/ton  
\$100 minimum per load  
☒ Residential ☐ Industrial  
☒ Agricultural ☐ None  
☐ Commercial ☒ Other Describe:  
Other: Institutional, Parks and Recreational

8. Types of waste received:  
☐ Household ☒ C & D debris  
☒ Commercial Class III ☒ Shredded/cut tires  
☐ Incinerator/WTE ash ☒ Yard trash  
☐ Treated biomedical ☐ Septic tank  
☐ Water treatment sludge ☐ Industrial

- ☐ Air treatment sludge                      ☐ Industrial sludge  
☒ Agricultural                                      ☐ Domestic sludge  
☒ Asbestos    ☒ Other Describe:  
Other: Pre-consumer vegetative waste

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9. Salvaging permitted: ☐ Yes ☒ No

10. Attendant: ☒ Yes ☐ No

Trained operator: ☒ Yes ☐ No

11. Trained spotters: ☒ Yes ☐ No

Number of spotters used: \_\_\_\_\_

12. Site located in: ☐ Floodplain

☐ Wetlands

☒ Other:

Other: Uplands

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13. Days of operation: Monday - Saturday

14. Hours of operation: 7:00 am to 6:00 pm Monday-Friday; 7:00 am to 12:00 pm Saturday

15. Days Working Face covered: Weekly

16. Elevation of water table: 55 to 90 ft. Datum Used: NGVD 1929

17. Number of monitoring wells: 18

18. Number of surface monitoring points: N/A

19. Gas controls used: ☒ Yes ☐ No

Type controls: ☒ Active ☒ Passive

Gas flaring: ☒ Yes ☐ No

Gas recovery: ☐ Yes ☒ No

20. Landfill unit liner type:

☐ Natural soils

☐ Double geomembrane

☐ Single clay liner

☐ Geomembrane & composite

☒ Single geomembrane

☐ Double composite

☐ Single composite

☐ None

☐ Slurry wall

☐ Other Describe:

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21. Leachate collection method:

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Collection pipes | <input type="checkbox"/> Sand layer         |
| <input checked="" type="checkbox"/> Geonets          | <input type="checkbox"/> Gravel layer       |
| <input type="checkbox"/> Well points                 | <input type="checkbox"/> Interceptor trench |
| <input type="checkbox"/> Perimeter ditch             | <input type="checkbox"/> None               |
| <input type="checkbox"/> Other Describe:             |   |

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22. Leachate storage method:

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Tanks | <input type="checkbox"/> Surface impoundments |
| <input type="checkbox"/> Other Describe:  |   |
| Tanks: Auxiliary                          |   |

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23. Leachate treatment method:

- |                                    |   |
|------------------------------------|---|
| <input type="checkbox"/> Oxidation | <input type="checkbox"/> Chemical treatment |
| <input type="checkbox"/> Secondary | <input type="checkbox"/> Settling           |
| <input type="checkbox"/> Advanced  | <input checked="" type="checkbox"/> None    |
| <input type="checkbox"/> Other     |   |

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24. Leachate disposal method:

- |  |  |
|--|--|
| <input type="checkbox"/> Recirculated        | <input checked="" type="checkbox"/> Pumped to WWTP           |
| <input type="checkbox"/> Transported to WWTP | <input type="checkbox"/> Discharged to surface water/wetland |
| <input type="checkbox"/> Injection well      | <input type="checkbox"/> Percolation ponds                   |
| <input type="checkbox"/> Evaporation         | <input type="checkbox"/> Spray Irrigation                    |
| <input type="checkbox"/> Other               |  |

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25. For leachate discharged to surface waters:

Name and Class of receiving water:

N/A

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26. Storm Water:

Collected: ☒ Yes ☐ No

Type of treatment:

Retention

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Name and Class of receiving water:

N/A

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27. Environmental Resources Permit (ERP) number or status:

ERP 48-0817635-002 EM and 48-0187635-003 EM

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**PART C. PROHIBITIONS (62-701.300, FAC)**

<u>S</u>	<u>LOCATION</u>	<u>N/A</u>	<u>N/C</u>	
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1. Provide documentation that each of the siting criteria will be satisfied for the facility; (62-701.300(2), FAC)
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	2. If the facility qualifies for any of the exemptions contained in Rules 62-701.300(12) through (18), FAC, then document this qualification(s).
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	3. Provide documentation that the facility will be in compliance with the burning restrictions; (62-701.300(3), FAC)
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	4. Provide documentation that the facility will be in compliance with the hazardous waste restrictions; (62-701.300(4), FAC)
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	5. Provide documentation that the facility will be in compliance with the PCB disposal restrictions; (62-701.300(5), FAC)
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	6. Provide documentation that the facility will be in compliance with the biomedical waste restrictions; (62-701.300(6), FAC)
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	7. Provide documentation that the facility will be in compliance with the Class I surface water restrictions; (62-701.300(7), FAC)
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	8. Provide documentation that the facility will be in compliance with the special waste for landfills restrictions; (62-701.300(8), FAC)
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	9. Provide documentation that the facility will be in compliance with the liquid restrictions; (62-701.300(10), FAC)
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	10. Provide documentation that the facility will be in compliance with the used oil and oily waste restrictions; (62-701.300(11), FAC)

**PART D. SOLID WASTE MANAGEMENT FACILITY PERMIT REQUIREMENTS, GENERAL (62-701.320, FAC)**

<u>S</u>	<u>LOCATION</u>	<u>N/A</u>	<u>N/C</u>	
<input checked="" type="checkbox"/>	Attached _____	<input type="checkbox"/>	<input type="checkbox"/>	1. Four copies, at minimum, of the completed application form, all supporting data and reports; (62-701.320(5)(a), FAC)

**S**                      **LOCATION**                      **N/A**                      **N/C**

**PART D CONTINUED**

- |                                     |                |                          |                                     |  |
|-------------------------------------|----------------|--------------------------|-------------------------------------|--|
| <input checked="" type="checkbox"/> | Attached _____ | <input type="checkbox"/> | <input type="checkbox"/>            | 2. Engineering and/or professional certification (signature, date and seal) provided on the applications and all engineering plans, reports and supporting information for the application; (62-701.320(6),FAC)  |
| <input checked="" type="checkbox"/> | Attached _____ | <input type="checkbox"/> | <input type="checkbox"/>            | 3. A letter of transmittal to the Department; (62-701.320(7)(a),FAC)   |
| <input checked="" type="checkbox"/> | Attached _____ | <input type="checkbox"/> | <input type="checkbox"/>            | 4. A completed application form dated and signed by the applicant; (62-701.320(7)(b),FAC)  |
| <input checked="" type="checkbox"/> | Attached _____ | <input type="checkbox"/> | <input type="checkbox"/>            | 5. Permit fee specified in Rule 62-701.315, FAC in check or money order, payable to the Department; (62-701.320(7)(c),FAC)   |
| <input checked="" type="checkbox"/> | Attached _____ | <input type="checkbox"/> | <input type="checkbox"/>            | 6. An engineering report addressing the requirements of this rule and with the following format: a cover sheet, text printed on 8 1/2 inch by 11 inch consecutively numbered pages, a table of contents or index, the body of the report and all appendices including an operation plan, contingency plan, illustrative charts and graphs, records or logs of tests and investigations, engineering calculations; (62-701.320(7)(d),FAC) |
| <input type="checkbox"/>            | _____          | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 7. Operation Plan and Closure Plan; (62-701.320(7)(e)1,FAC)  |
| <input type="checkbox"/>            | _____          | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 8. Contingency Plan; (62-701.320(7)(e)2,FAC)   |
| <input type="checkbox"/>            | _____          | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 9. Plans or drawings for the solid waste management facilities in appropriate format (including sheet size restrictions, cover sheet, legends, north arrow, horizontal and vertical scales, elevations referenced to NGVD 1929) showing; (62-701.320(7)(f),FAC)  |
| <input type="checkbox"/>            | _____          | <input type="checkbox"/> | <input checked="" type="checkbox"/> | a. A regional map or plan with the project location in relation to major roadways and population centers;  |
| <input type="checkbox"/>            | _____          | <input type="checkbox"/> | <input checked="" type="checkbox"/> | b. A vicinity map or aerial photograph no more than 1 year old showing the facility site and relevant surface features located within 1000 feet of the facility;   |
| <input type="checkbox"/>            | _____          | <input type="checkbox"/> | <input checked="" type="checkbox"/> | c. A site plan showing all property boundaries certified by a Florida Licensed Professional Surveyor and Mapper; and   |
| <input type="checkbox"/>            | _____          | <input type="checkbox"/> | <input checked="" type="checkbox"/> | d. Other necessary details to support the engineering report, including referencing elevations to a consistent, nationally recognized datum and identifying the method used for collecting latitude and longitude data.  |

**S**      **LOCATION**      **N/A**      **N/C**

**PART D CONTINUED**

- |                          |       |                                     |                                     |   |
|--------------------------|-------|-------------------------------------|-------------------------------------|---|
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | 10. Documentation that the applicant either owns the property or has legal authority from the property owner to use the site; (62-701.320(7)(g),FAC)  |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | 11. For facilities owned or operated by a county, provide a description of how, if any, the facilities covered in this application will contribute to the county's achievement of the waste reduction and recycling goals contained in Section 403.706,FS; (62-701.320(7)(h),FAC)               |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | 12. Provide a history and description of any enforcement actions taken by the Department against the applicant for violations of applicable statutes, rules, orders or permit conditions relating to the operation of any solid waste management facility in this state; (62-701.320(7)(i),FAC) |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | 13. Proof of publication in a newspaper of general circulation of notice of application for a permit to construct or substantially modify a solid waste management facility; (62-702.320(8),FAC)  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | 14. Provide a description of how the requirements for airport safety will be achieved including proof of required notices if applicable. If exempt, explain how the exemption applies; (62-701.320(13),FAC)   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | 15. Explain how the operator and spotter training requirements and special criteria will be satisfied for the facility; (62-701.320(15), FAC)   |

**PART E.      LANDFILL PERMIT REQUIREMENTS (62-701.330, FAC)**

**S**      **LOCATION**      **N/A**      **N/C**

- |                          |       |                          |                                     |  |
|--------------------------|-------|--------------------------|-------------------------------------|--|
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 1. Regional map or aerial photograph no more than 5 years old showing all airports that are located within five miles of the proposed landfill; (62-701.330(3)(a),FAC) |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 2. Plot plan with a scale not greater than 200 feet to the inch showing; (62-701.330(3)(b),FAC)  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | a. Dimensions;   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | b. Locations of proposed and existing water quality monitoring wells;  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | c. Locations of soil borings;  |



**S**                      **LOCATION**                      **N/A**                      **N/C**

**PART E CONTINUED**

☐ \_\_\_\_\_ ☐ ☒

d. Proposed plan of trenching or disposal areas;

☐ \_\_\_\_\_ ☐ ☒

e. Cross sections showing original elevations and proposed final contours which shall be included either on the plot plan or on separate sheets;

☐ \_\_\_\_\_ ☐ ☒

f. Any previously filled waste disposal areas;

☐ \_\_\_\_\_ ☐ ☒

g. Fencing or other measures to restrict access.

☐ \_\_\_\_\_ ☐ ☒

3. Topographic maps with a scale not greater than 200 feet to the inch with 5-foot contour intervals showing; (62-701.330(3)(c),FAC):

☐ \_\_\_\_\_ ☐ ☒

a. Proposed fill areas;

☐ \_\_\_\_\_ ☐ ☒

b. Borrow areas;

☐ \_\_\_\_\_ ☐ ☒

c. Access roads;

☐ \_\_\_\_\_ ☐ ☒

d. Grades required for proper drainage;

☐ \_\_\_\_\_ ☐ ☒

e. Cross sections of lifts;

☐ \_\_\_\_\_ ☐ ☒

f. Special drainage devices if necessary;

☐ \_\_\_\_\_ ☐ ☒

g. Fencing;

☐ \_\_\_\_\_ ☐ ☒

h. Equipment facilities.

☐ \_\_\_\_\_ ☐ ☒

4. A report on the landfill describing the following; (62-701.330(3)(d),FAC)

☐ \_\_\_\_\_ ☐ ☒

a. The current and projected population and area to be served by the proposed site;

☐ \_\_\_\_\_ ☐ ☒

b. The anticipated type, annual quantity, and source of solid waste, expressed in tons;

☐ \_\_\_\_\_ ☐ ☒

c. Planned active life of the facility, the final design height of the facility and the maximum height of the facility during its operation;

**S**      **LOCATION**      **N/A**      **N/C**

**PART E CONTINUED**

- |                          |       |                          |                                     |   |
|--------------------------|-------|--------------------------|-------------------------------------|---|
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | d. The source and type of cover material used for the landfill.   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 5. Provide evidence that an approved laboratory shall conduct water quality monitoring for the facility in accordance with Chapter 62-160,FAC; (62-701.330(3)(g),FAC) |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 6. Provide a statement of how the applicant will demonstrate financial responsibility for the closing and long-term care of the landfill; (62-701.330(3)(h),FAC)      |

**PART F.      GENERAL CRITERIA FOR LANDFILLS (62-701.340,FAC)**

**S**      **LOCATION**      **N/A**      **N/C**

- |                          |       |                          |                                     |  |
|--------------------------|-------|--------------------------|-------------------------------------|--|
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 1. Describe (and show on a Federal Insurance Administration flood map, if available) how the landfill or solid waste disposal unit shall not be located in the 100-year floodplain where it will restrict the flow of the 100-year flood, reduce the temporary water storage capacity of the floodplain unless compensating storage is provided, or result in a washout of solid waste; (62-701.340(3)(b),FAC) |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 2. Describe how the minimum horizontal separation between waste deposits in the landfill and the landfill property boundary shall be 100 feet, measured from the toe of the proposed final cover slope; (62-701.340(3)(c),FAC)   |

**PART G.      LANDFILL CONSTRUCTION REQUIREMENTS (62-701.400,FAC)**

**S**      **LOCATION**      **N/A**      **N/C**

- |                          |       |                          |                                     |   |
|--------------------------|-------|--------------------------|-------------------------------------|---|
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 1. Describe how the landfill shall be designed so that solid waste disposal units will be constructed and closed at planned intervals throughout the design period of the landfill and shall be designed to achieve a minimum factor of safety of 1.5 using peak strength values to prevent failures of side slopes and deep-seated failures; (62-701.400(2),FAC) |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 2. Landfill liner requirements; (62-701.400(3),FAC)   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | a. General construction requirements; (62-701.400(3)(a),FAC):   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (1) Provide test information and documentation to ensure the liner will be constructed of materials that have appropriate physical, chemical, and mechanical properties to prevent failure;   |

**S**      **LOCATION**      **N/A**      **N/C**

**PART G CONTINUED**

- |                          |       |                                     |                                     |   |
|--------------------------|-------|-------------------------------------|-------------------------------------|---|
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | (2) Document foundation is adequate to prevent liner failure;   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | (3) Constructed so bottom liner will not be adversely impacted by fluctuations of the ground water;   |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | (4) Designed to resist hydrostatic uplift if bottom liner located below seasonal high ground water table;   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | (5) Installed to cover all surrounding earth which could come into contact with the waste or leachate.  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | b. Composite liners; (62-701.400(3)(b),FAC)   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | (1) Upper geomembrane thickness and properties;   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | (2) Design leachate head for primary LCRS including leachate recirculation if appropriate;  |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | (3) Design thickness in accordance with Table A and number of lifts planned for lower soil component.   |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | c. Double liners; (62-701.400(3)(c),FAC)  |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | (1) Upper and lower geomembrane thicknesses and properties;   |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | (2) Design leachate head for primary LCRS to limit the head to one foot above the liner;  |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | (3) Lower geomembrane sub-base design;  |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | (4) Leak detection and secondary leachate collection system minimum design criteria ( $k \geq 10$ cm/sec, head on lower liner $\leq 1$ inch, head not to exceed thickness of drainage layer); |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | d. Standards for geosynthetic components; (62-701.400(3)(d),FAC)  |

**S**                      **LOCATION**                      **N/A**                      **N/C**

**PART G CONTINUED**

- |                          |       |                                     |                                     |   |
|--------------------------|-------|-------------------------------------|-------------------------------------|---|
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | (1)      Factory and field seam test methods to ensure all geomembrane seams achieve the minimum specifications;  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | (2)      Geomembranes to be used shall pass a continuous spark test by the manufacturer;  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | (3)      Design of 24-inch-thick protective layer above upper geomembrane liner;  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | (4)      Describe operational plans to protect the liner and leachate collection system when placing the first layer of waste above 24-inch-thick protective layer. |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | (5)      HDPE geomembranes, if used, meet the specifications in GRI GM13 and LLDPE geomembranes, if used, meet the specifications in GRI GM17;                      |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | (6)      PVC geomembranes, if used, meet the specifications in PGI 1104;  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | (7)      Interface shear strength testing results of the actual components which will be used in the liner system;  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | (8)      Transmissivity testing results of geonets if they are used in the liner system;  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | (9)      Hydraulic conductivity testing results of geosynthetic clay liners if they are used in the liner system;   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | e. Geosynthetic specification requirements; (62-701.400(3)(e), FAC)   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | (1)      Definition and qualifications of the designer, manufacturer, installer, QA consultant and laboratory, and QA program;                                      |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | (2)      Material specifications for geomembranes, geocomposites, geotextiles, geogrids, and geonets;   |

**S**      **LOCATION**      **N/A**      **N/C**

**PART G CONTINUED**

☐ \_\_\_\_\_ ☐ ☒

(3) Manufacturing and fabrication specifications including geomembrane raw material and roll QA, fabrication personnel qualifications, seaming equipment and procedures, overlaps, trial seams, destructive and nondestructive seam testing, seam testing location, frequency, procedure, sample size and geomembrane repairs;

☐ \_\_\_\_\_ ☐ ☒

(4) Geomembrane installation specifications including earthwork, conformance testing, geomembrane placement, installation personnel qualifications, field seaming and testing, overlapping and repairs, materials in contact with geomembrane and procedures for lining system acceptance;

☐ \_\_\_\_\_ ☐ ☒

(5) Geotextile and geogrid specifications including handling and placement, conformance testing, seams and overlaps, repair, and placement of soil materials and any overlying materials;

☐ \_\_\_\_\_ ☐ ☒

(6) Geonet and geocomposite specifications including handling and placement, conformance testing, stacking and joining, repair, and placement of soil materials and any overlying materials;

☐ \_\_\_\_\_ ☐ ☒

(7) Geosynthetic clay liner specifications including handling and placement, conformance testing, seams and overlaps, repair, and placement of soil material and any overlying materials;

☐ \_\_\_\_\_ ☐ ☒

f. Standards for soil liner components (62-710.400(3)(f),FAC):

☐ \_\_\_\_\_ ☐ ☒

(1) Description of construction procedures including overexcavation and backfilling to preclude structural inconsistencies and procedures for placing and compacting soil component in layers;

☐ \_\_\_\_\_ ☒ ☐

(2) Demonstration of compatibility of the soil component with actual or simulated leachate in accordance with EPA Test Method 9100 or an equivalent test method;

☐ \_\_\_\_\_ ☒ ☐

(3) Procedures for testing in-situ soils to demonstrate they meet the specifications for soil liners;

**S**      **LOCATION**      **N/A**      **N/C**

**PART G CONTINUED**

- |                          |       |                                     |                                     |   |
|--------------------------|-------|-------------------------------------|-------------------------------------|---|
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | (4) Specifications for soil component of liner including at a minimum:  |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | (a) Allowable particle size distribution, Atterberg limits, shrinkage limit;  |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | (b) Placement moisture and dry density criteria;  |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | (c) Maximum laboratory-determined saturated hydraulic conductivity using simulated leachate;  |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | (d) Minimum thickness of soil liner;  |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | (e) Lift thickness;   |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | (f) Surface preparation (scarification);  |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | (g) Type and percentage of clay mineral within the soil component;  |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | (5) Procedures for constructing and using a field test section to document the desired saturated hydraulic conductivity and thickness can be achieved in the field. |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | g. If a Class III landfill is to be constructed with a bottom liner system, provide a description of how the minimum requirements for the liner will be achieved.   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | 3. Leachate collection and removal system (LCRS); (62-701.400(4),FAC)   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | a. The primary and secondary LCRS requirements; (62-701.400(4)(a),FAC)  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | (1) Constructed of materials chemically resistant to the waste and leachate;  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | (2) Have sufficient mechanical properties to prevent collapse under pressure;   |

**S**      **LOCATION**      **N/A**      **N/C**

**PART G CONTINUED**

☐ \_\_\_\_\_ ☐ ☒

(3) Have granular material or synthetic geotextile to prevent clogging;

☐ \_\_\_\_\_ ☐ ☒

(4) Have method for testing and cleaning clogged pipes or contingent designs for rerouting leachate around failed areas;

☐ \_\_\_\_\_ ☐ ☒

b. Other LCRS requirements; (62-701.400(4)(b) and (c),FAC)

☐ \_\_\_\_\_ ☒ ☐

(1) Bottom 12 inches having hydraulic conductivity  $\geq 1 \times 10^{-3}$  cm/sec;

☐ \_\_\_\_\_ ☐ ☒

(2) Total thickness of 24 inches of material chemically resistant to the waste and leachate;

☐ \_\_\_\_\_ ☐ ☒

(3) Bottom slope design to accommodate for predicted settlement and still meet minimum slope requirements;

☐ \_\_\_\_\_ ☐ ☒

(4) Demonstration that synthetic drainage material, if used, is equivalent or better than granular material in chemical compatibility, flow under load and protection of geomembrane liner.

☐ \_\_\_\_\_ ☒ ☐

4. Leachate recirculation; (62-701.400(5),FAC)

☐ \_\_\_\_\_ ☒ ☐

a. Describe general procedures for recirculating leachate;

☐ \_\_\_\_\_ ☒ ☐

b. Describe procedures for controlling leachate runoff and minimizing mixing of leachate runoff with storm water;

☐ \_\_\_\_\_ ☒ ☐

c. Describe procedures for preventing perched water conditions and gas buildup;

☐ \_\_\_\_\_ ☒ ☐

d. Describe alternate methods for leachate management when it cannot be recirculated due to weather or runoff conditions, surface seeps, wind-blown spray, or elevated levels of leachate head on the liner;

☐ \_\_\_\_\_ ☒ ☐

e. Describe methods of gas management in accordance with Rule 62-701.530, FAC;

**S**      **LOCATION**      **N/A**      **N/C**

**PART G CONTINUED**

☐ \_\_\_\_\_ ☒ ☐

f. If leachate irrigation is proposed, describe treatment methods and standards for leachate treatment prior to irrigation over final cover and provide documentation that irrigation does not contribute significantly to leachate generation.

☐ \_\_\_\_\_ ☒ ☐

5. Leachate storage tanks and leachate surface impoundments; (62-701.400(6), FAC)

☐ \_\_\_\_\_ ☒ ☐

a. Surface impoundment requirements; (62-701.400(6)(b), FAC)

☐ \_\_\_\_\_ ☒ ☐

(1) Documentation that the design of the bottom liner will not be adversely impacted by fluctuations of the ground water;

☐ \_\_\_\_\_ ☒ ☐

(2) Designed in segments to allow for inspection and repair as needed without interruption of service;

☐ \_\_\_\_\_ ☒ ☐

(3) General design requirements;

☐ \_\_\_\_\_ ☒ ☐

(a) Double liner system consisting of an upper and lower 60-mil minimum thickness geomembrane;

☐ \_\_\_\_\_ ☒ ☐

(b) Leak detection and collection system with hydraulic conductivity  $\geq 1$  cm/sec;

☐ \_\_\_\_\_ ☒ ☐

(c) Lower geomembrane placed on subbase  $\geq 6$  inches thick with  $k \leq 1 \times 10^{-5}$  cm/sec or on an approved geosynthetic clay liner with  $k \leq 1 \times 10^{-7}$  cm/sec;

☐ \_\_\_\_\_ ☒ ☐

(d) Design calculation to predict potential leakage through the upper liner;

☐ \_\_\_\_\_ ☒ ☐

(e) Daily inspection requirements and notification and corrective action requirements if leakage rates exceed that predicted by design calculations;

☐ \_\_\_\_\_ ☒ ☐

(4) Description of procedures to prevent uplift, if applicable;

☐ \_\_\_\_\_ ☒ ☐

(5) Design calculations to demonstrate minimum two feet of freeboard will be maintained;

☐ \_\_\_\_\_ ☒ ☐

(6) Procedures for controlling vectors and off-site odors.



**S**      **LOCATION**      **N/A**      **N/C**

**PART G CONTINUED**

☐ \_\_\_\_\_ ☒ ☐

b. Above-ground leachate storage tanks; (62-701.400(6)(c),FAC)

☐ \_\_\_\_\_ ☒ ☐

(1) Describe tank materials of construction and ensure foundation is sufficient to support tank;

☐ \_\_\_\_\_ ☒ ☐

(2) Describe procedures for cathodic protection if needed for the tank;

☐ \_\_\_\_\_ ☒ ☐

(3) Describe exterior painting and interior lining of the tank to protect it from the weather and the leachate stored;

☐ \_\_\_\_\_ ☒ ☐

(4) Describe secondary containment design to ensure adequate capacity will be provided and compatibility of materials of construction;

☐ \_\_\_\_\_ ☒ ☐

(5) Describe design to remove and dispose of stormwater from the secondary containment system;

☐ \_\_\_\_\_ ☒ ☐

(6) Describe an overfill prevention system such as level sensors, gauges, alarms and shutoff controls to prevent overfilling;

☐ \_\_\_\_\_ ☒ ☐

(7) Inspections, corrective action and reporting requirements;

☐ \_\_\_\_\_ ☒ ☐

(a) Overfill prevention system weekly;

☐ \_\_\_\_\_ ☒ ☐

(b) Exposed tank exteriors weekly;

☐ \_\_\_\_\_ ☒ ☐

(c) Tank interiors when tank is drained or at least every three years;

☐ \_\_\_\_\_ ☒ ☐

(d) Procedures for immediate corrective action if failures detected;

☐ \_\_\_\_\_ ☒ ☐

(e) Inspection reports available for department review.

☐ \_\_\_\_\_ ☒ ☐

c. Underground leachate storage tanks; (62-701.400(6)(d),FAC)

**S**      **LOCATION**      **N/A**      **N/C**

**PART G CONTINUED**

☐ \_\_\_\_\_ ☒ ☐

(1) Describe materials of construction;

☐ \_\_\_\_\_ ☒ ☐

(2) A double-walled tank design system to be used with the following requirements;

☐ \_\_\_\_\_ ☒ ☐

(a) Interstitial space monitoring at least weekly;

☐ \_\_\_\_\_ ☒ ☐

(b) Corrosion protection provided for primary tank interior and external surface of outer shell;

☐ \_\_\_\_\_ ☒ ☐

(c) Interior tank coatings compatible with stored leachate;

☐ \_\_\_\_\_ ☒ ☐

(d) Cathodic protection inspected weekly and repaired as needed;

☐ \_\_\_\_\_ ☒ ☐

(3) Describe an overfill prevention system such as level sensors, gauges, alarms and shutoff controls to prevent overfilling and provide for weekly inspections;

☐ \_\_\_\_\_ ☒ ☐

(4) Inspection reports available for department review.

☐ \_\_\_\_\_ ☒ ☐

d.Schedule provided for routine maintenance of LCRS; (62-701.400(6)(e),FAC)

☐ \_\_\_\_\_ ☐ ☒

6.Liner systems construction quality assurance (CQA); (62-701.400(7),FAC)

☐ \_\_\_\_\_ ☐ ☒

a. Provide CQA Plan including:

☐ \_\_\_\_\_ ☐ ☒

(1) Specifications and construction requirements for liner system;

☐ \_\_\_\_\_ ☐ ☒

(2) Detailed description of quality control testing procedures and frequencies;

☐ \_\_\_\_\_ ☐ ☒

(3) Identification of supervising professional engineer;

☐ \_\_\_\_\_ ☐ ☒

(4) Identify responsibility and authority of all appropriate organizations and key personnel involved in the construction project;

**S****LOCATION****N/A****N/C****PART G CONTINUED**

- |                                     |                           |                                     |                                     |  |
|-------------------------------------|---------------------------|-------------------------------------|-------------------------------------|--|
| <input type="checkbox"/>            | _____                     | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | (5) State qualifications of CQA professional engineer and support personnel;   |
| <input type="checkbox"/>            | _____                     | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | (6) Description of CQA reporting forms and documents;  |
| <input type="checkbox"/>            | _____                     | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | b. An independent laboratory experienced in the testing of geosynthetics to perform required testing;  |
| <input type="checkbox"/>            | _____                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | 7. Soil Liner CQA (62-701.400(8)FAC)   |
| <input type="checkbox"/>            | _____                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | a. Documentation that an adequate borrow source has been located with test results or description of the field exploration and laboratory testing program to define a suitable borrow source;                                      |
| <input type="checkbox"/>            | _____                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | b. Description of field test section construction and test methods to be implemented prior to liner installation;  |
| <input type="checkbox"/>            | _____                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | c. Description of field test methods including rejection criteria and corrective measures to insure proper liner installation.   |
| <input type="checkbox"/>            | _____                     | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | 8. Surface water management systems; (62-701.400(9),FAC)   |
| <input type="checkbox"/>            | _____                     | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | a. Provide a copy of a Department permit for stormwater control or documentation that no such permit is required;  |
| <input type="checkbox"/>            | _____                     | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | b. Design of surface water management system to isolate surface water from waste filled areas and to control stormwater run-off;   |
| <input type="checkbox"/>            | _____                     | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | c. Details of stormwater control design including retention ponds, detention ponds, and drainage ways;   |
| <input type="checkbox"/>            | _____                     | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | 9. Gas control systems; (62-701.400(10),FAC)   |
| <input checked="" type="checkbox"/> | <u>Engineering Report</u> | <input type="checkbox"/>            | <input type="checkbox"/>            | a. Provide documentation that if the landfill is receiving degradable wastes, it will have a gas control system complying with the requirements of Rule 62-701.530, FAC;   |
| <input type="checkbox"/>            | _____                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | 10. For landfills designed in ground water, provide documentation that the landfill will provide a degree of protection equivalent to landfills designed with bottom liners not in contact with ground water; (62-701.400(11),FAC) |

**PART H. HYDROGEOLOGICAL INVESTIGATION REQUIREMENTS (62-701.410(1), FAC)**

<u>S</u>	<u>LOCATION</u>	<u>N/A</u>	<u>N/C</u>	
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1. Submit a hydrogeological investigation and site report including at least the following information:
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	a. Regional and site specific geology and hydrogeology;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	b. Direction and rate of ground water and surface water flow including seasonal variations;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	c. Background quality of ground water and surface water;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	d. Any on-site hydraulic connections between aquifers;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	e. Site stratigraphy and aquifer characteristics for confining layers, semi-confining layers, and all aquifers below the landfill site that may be affected by the landfill;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	f. Description of topography, soil types and surface water drainage systems;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	g. Inventory of all public and private water wells within a one-mile radius of the landfill including, where available, well top of casing and bottom elevations, name of owner, age and usage of each well, stratigraphic unit screened, well construction technique and static water level;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	h. Identify and locate any existing contaminated areas on the site;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	i. Include a map showing the locations of all potable wells within 500 feet of the waste storage and disposal areas;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	2. Report signed, sealed and dated by PE and/or PG.

**PART I. GEOTECHNICAL INVESTIGATION REQUIREMENTS (62-701.410(2),FAC)**

<u>S</u>	<u>LOCATION</u>	<u>N/A</u>	<u>N/C</u>	
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1. Submit a geotechnical site investigation report defining the engineering properties of the site including at least the following:
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	a. Description of subsurface conditions including soil stratigraphy and ground water table conditions;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	b. Investigate for the presence of muck, previously filled areas, soft ground, lineaments and sink holes;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	c. Estimates of average and maximum high water table across the site;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	d. Foundation analysis including:
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(1) Foundation bearing capacity analysis;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(2) Total and differential subgrade settlement analysis;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(3) Slope stability analysis;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	e. Description of methods used in the investigation and includes soil boring logs, laboratory results, analytical calculations, cross sections, interpretations and conclusions;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	f. An evaluation of fault areas, seismic impact zones, and unstable areas as described in 40 CFR 258.13, 40 CFR 258.14 and 40 CFR 258.15.
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	2. Report signed, sealed and dated by PE and/or PG.

**PART J. VERTICAL EXPANSION OF LANDFILLS (62-701.430,FAC)**

<u>S</u>	<u>LOCATION</u>	<u>N/A</u>	<u>N/C</u>	
<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	1. Describe how the vertical expansion shall not cause or contribute to leachate leakage from the existing landfill, shall not cause objectionable odors, or adversely affect the closure design of the existing landfill;
<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2. Describe how the vertical expansion over unlined landfills will meet the requirements of Rule 62-701.400, FAC with the exceptions of Rule 62-701.430(1)(c),FAC;
<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	3. Provide foundation and settlement analysis for the vertical expansion;
<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	4. Provide total settlement calculations demonstrating that the final elevations of the lining system, that gravity drainage, and that no other component of the design will be adversely affected;
<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	5. Minimum stability safety factor of 1.5 for the lining system component interface stability and deep stability;
<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	6. Provide documentation to show the surface water management system will not be adversely affected by the vertical expansion;
<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	7. Provide gas control designs to prevent accumulation of gas under the new liner for the vertical expansion.

**PART K. LANDFILL OPERATION REQUIREMENTS (62-701.500,FAC)**

<u>S</u>	<u>LOCATION</u>	<u>N/A</u>	<u>N/C</u>	
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1. Provide documentation that landfill will have at least one trained operator during operation and at least one trained spotter at each working face; (62-701.500(1),FAC)
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	2. Provide a landfill operation plan including procedures for: (62-701.500(2), FAC)
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	a. Designating responsible operating and maintenance personnel;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	b. Emergency preparedness and response, as required in subsection 62-701.320(16), FAC;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	c. Controlling types of waste received at the landfill;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	d. Weighing incoming waste;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	e. Vehicle traffic control and unloading;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	f. Method and sequence of filling waste;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	g. Waste compaction and application of cover;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	h. Operations of gas, leachate, and stormwater controls;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	i. Water quality monitoring.
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	j. Maintaining and cleaning the leachate collection system;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	3. Provide a description of the landfill operation record to be used at the landfill; details as to location of where various operational records will be kept (i.e. FDEP permit, engineering drawings, water quality records, etc.) (62-701.500(3),FAC)
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	4. Describe the waste records that will be compiled monthly and provided to the Department annually; (62-701.500(4),FAC)
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	5. Describe methods of access control; (62-701.500(5),FAC)

**S**      **LOCATION**      **N/A**      **N/C**

**PART K CONTINUED**

- |                          |       |                          |                                     |  |
|--------------------------|-------|--------------------------|-------------------------------------|--|
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 6. Describe load checking program to be implemented at the landfill to discourage disposal of unauthorized wastes at the landfill; (62-701.500(6),FAC) |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 7. Describe procedures for spreading and compacting waste at the landfill that include: (62-701.500(7),FAC)  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | a. Waste layer thickness and compaction frequencies;   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | b. Special considerations for first layer of waste placed above liner and leachate collection system;  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | c. Slopes of cell working face and side grades above land surface, planned lift depths during operation;   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | d. Maximum width of working face;  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | e. Description of type of initial cover to be used at the facility that controls:  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (1) Vector breeding/animal attraction  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (2) Fires  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (3) Odors  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (4) Blowing litter   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (5) Moisture infiltration  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | f. Procedures for applying initial cover including minimum cover frequencies;  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | g. Procedures for applying intermediate cover;   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | h. Time frames for applying final cover;   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | i. Procedures for controlling scavenging and salvaging.  |



**S**      **LOCATION**      **N/A**      **N/C**

**PART K CONTINUED**

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|-------------------------------------|--------------------|--------------------------|-------------------------------------|---|
| <input type="checkbox"/>            | _____              | <input type="checkbox"/> | <input checked="" type="checkbox"/> | j. Description of litter policing methods;  |
| <input type="checkbox"/>            | _____              | <input type="checkbox"/> | <input checked="" type="checkbox"/> | k. Erosion control procedures.  |
| <input type="checkbox"/>            | _____              | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 8. Describe operational procedures for leachate management including;<br>(62-701.500(8),FAC)  |
| <input type="checkbox"/>            | _____              | <input type="checkbox"/> | <input checked="" type="checkbox"/> | a. Leachate level monitoring, sampling, analysis and data results submitted to the Department;  |
| <input type="checkbox"/>            | _____              | <input type="checkbox"/> | <input checked="" type="checkbox"/> | b. Operation and maintenance of leachate collection and removal system, and treatment as required;  |
| <input type="checkbox"/>            | _____              | <input type="checkbox"/> | <input checked="" type="checkbox"/> | c. Procedures for managing leachate if it becomes regulated as a hazardous waste;   |
| <input type="checkbox"/>            | _____              | <input type="checkbox"/> | <input checked="" type="checkbox"/> | d. Identification of treatment or disposal facilities that may be used for off-site discharge and treatment of leachate;  |
| <input type="checkbox"/>            | _____              | <input type="checkbox"/> | <input checked="" type="checkbox"/> | e. Contingency plan for managing leachate during emergencies or equipment problems;   |
| <input type="checkbox"/>            | _____              | <input type="checkbox"/> | <input checked="" type="checkbox"/> | f. Procedures for recording quantities of leachate generated in gal/day and including this in the operating record;   |
| <input type="checkbox"/>            | _____              | <input type="checkbox"/> | <input checked="" type="checkbox"/> | g. Procedures for comparing precipitation experienced at the landfill with leachate generation rates and including this information in the operating record;                |
| <input type="checkbox"/>            | _____              | <input type="checkbox"/> | <input checked="" type="checkbox"/> | h. Procedures for water pressure cleaning or video inspecting leachate collection systems.  |
| <input checked="" type="checkbox"/> | Engineering Report | <input type="checkbox"/> | <input type="checkbox"/>            | 9. Describe how the landfill receiving degradable wastes shall implement a gas management system meeting the requirements of Rule 62-701.530, FAC;<br>(62-701.500(9),FAC)   |
| <input type="checkbox"/>            | _____              | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 10. Describe procedures for operating and maintaining the landfill stormwater management system to comply with the requirements of Rule 62-701.400(9); (62-701.500(10),FAC) |

**S**      **LOCATION**      **N/A**      **N/C**

**PART K CONTINUED**

- |                          |       |                          |                                     |   |
|--------------------------|-------|--------------------------|-------------------------------------|---|
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 11. Equipment and operation feature requirements; (62-701.500(11),FAC)  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | a. Sufficient equipment for excavating, spreading, compacting and covering waste;   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | b. Reserve equipment or arrangements to obtain additional equipment within 24 hours of breakdown;   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | c. Communications equipment;  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | d. Dust control methods;  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | e. Fire protection capabilities and procedures for notifying local fire department authorities in emergencies;  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | f. Litter control devices;  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | g. Signs indicating operating authority, traffic flow, hours of operation, disposal restrictions.   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 12. Provide a description of all-weather access road, inside perimeter road and other roads necessary for access which shall be provided at the landfill;<br>(62-701.500(12),FAC) |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 13. Additional record keeping and reporting requirements; (62-701.500(13),FAC)  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | a. Records used for developing permit applications and supplemental information maintained for the design period of the landfill;   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | b. Monitoring information, calibration and maintenance records, copies of reports required by permit maintained for at least 10 years;  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | c. Maintain annual estimates of the remaining life of constructed landfills and of other permitted areas not yet constructed and submit this estimate annually to the Department; |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | d. Procedures for archiving and retrieving records which are more than five year old.   |

**PART L. WATER QUALITY AND LEACHATE MONITORING REQUIREMENTS (62-701.510, FAC)**

<u>S</u>	<u>LOCATION</u>	<u>N/A</u>	<u>N/C</u>	
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1. Water quality and leachate monitoring plan shall be submitted describing the proposed ground water, surface water and leachate monitoring systems and shall meet at least the following requirements;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	a. Based on the information obtained in the hydrogeological investigation and signed, dated and sealed by the PG or PE who prepared it; (62-701.510(2)(a),FAC)
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	b. All sampling and analysis performed in accordance with Chapter 62-160, FAC; (62-701.510(2)(b),FAC)
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	c. Ground water monitoring requirements; (62-701.510(3),FAC)
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(1) Detection wells located downgradient from and within 50 feet of disposal units;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(2) Downgradient compliance wells as required;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(3) Background wells screened in all aquifers below the landfill that may be affected by the landfill;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(4) Location information for each monitoring well;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(5) Well spacing no greater than 500 feet apart for downgradient wells and no greater than 1500 feet apart for upgradient wells unless site specific conditions justify alternate well spacings;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(6) Well screen locations properly selected;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(7) Monitoring wells constructed to provide representative ground water samples;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(8) Procedures for properly abandoning monitoring wells;
<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(9) Detailed description of detection sensors if proposed.
<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	d. Surface water monitoring requirements; (62-701.510(4),FAC)

**S**      **LOCATION**      **N/A**      **N/C**

**PART L CONTINUED**

- |                          |       |                                     |                                     |   |
|--------------------------|-------|-------------------------------------|-------------------------------------|---|
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | (1) Location of and justification for all proposed surface water monitoring points;   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | (2) Each monitoring location to be marked and its position determined by a registered Florida land surveyor;  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | e. Leachate sampling locations proposed; (62-701.510(5),FAC)  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | f. Initial and routine sampling frequency and requirements; (62-701.510(6),FAC)   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | (1) Initial background ground water and surface water sampling and analysis requirements;   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | (2) Routine leachate sampling and analysis requirements;  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | (3) Routine monitoring well sampling and analysis requirements;   |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | (4) Routine surface water sampling and analysis requirements.   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | g. Describe procedures for implementing evaluation monitoring, prevention measures and corrective action as required; (62-701.510(7),FAC)   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | h. Water quality monitoring report requirements;(62-701.510(9),FAC)   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | (1) Semi-annual report requirements (see paragraphs 62 701.510(6)(c),(d)and (e) for sampling frequencies);  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | (2) Documentation that the water quality data shall be provided to the Department in an electronic format consistent with requirements for importing into Department databases, unless an alternate form of submittal is specified in the permit. |
| <input type="checkbox"/> | _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | (3) Two and one-half year report requirements, or every five years if in long-term care, signed, dated and sealed by PG or PE.  |

**PART M. SPECIAL WASTE HANDLING REQUIREMENTS (62-701.520, FAC)**

<u>S</u>	<u>LOCATION</u>	<u>N/A</u>	<u>N/C</u>	
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1. Describe procedures for managing motor vehicles; (62-701.520(1),FAC)
<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2. Describe procedures for landfilling shredded waste; (62-701.520(2),FAC)
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	3. Describe procedures for asbestos waste disposal; (62-701.520(3),FAC)
<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	4. Describe procedures for disposal or management of contaminated soil; (62-701.520(4), FAC)
<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	5. Describe procedures for disposal of biological wastes; (62-701.520(5), FAC)

**PART N. GAS MANAGEMENT SYSTEM REQUIREMENTS (62-701.530,FAC)**

<u>S</u>	<u>LOCATION</u>	<u>N/A</u>	<u>N/C</u>	
<input checked="" type="checkbox"/>	<u>Engineering Report</u>	<input type="checkbox"/>	<input type="checkbox"/>	1. Provide the design for a gas management system that will (62-701.530(1), FAC):
<input checked="" type="checkbox"/>	<u>Engineering Report</u>	<input type="checkbox"/>	<input type="checkbox"/>	a. Be designed to prevent concentrations of combustible gases from exceeding 25% the LEL in structures and 100% the LEL at the property boundary;
<input checked="" type="checkbox"/>	<u>Engineering Report</u>	<input type="checkbox"/>	<input type="checkbox"/>	b. Be designed for site-specific conditions;
<input checked="" type="checkbox"/>	<u>Engineering Report</u>	<input type="checkbox"/>	<input type="checkbox"/>	c. Be designed to reduce gas pressure in the interior of the landfill;
<input checked="" type="checkbox"/>	<u>Engineering Report</u>	<input type="checkbox"/>	<input type="checkbox"/>	d. Be designed to not interfere with the liner, leachate control system or final cover.
<input checked="" type="checkbox"/>	<u>Engineering Report</u>	<input type="checkbox"/>	<input type="checkbox"/>	2. Provide documentation that will describe locations, construction details and procedures for monitoring gas at ambient monitoring points and with soil monitoring probes; (62-701.530(2), FAC):
<input checked="" type="checkbox"/>	<u>Engineering Report</u>	<input type="checkbox"/>	<input type="checkbox"/>	3. Provide documentation describing how the gas remediation plan and odor remediation plan will be implemented; (62-701.530(3), FAC):
<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	4. Landfill gas recovery facilities; (62-701.530(5), FAC):

<u>S</u>	<u>LOCATION</u>	<u>N/A</u>	<u>N/C</u>	
<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	a. Information required in Rules 62-701.320(7) and 62-701.330(3), FAC supplied;
<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	b. Information required in Rule 62-701.600(4), FAC supplied where relevant and practical;
<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	c. Estimate of current and expected gas generation rates and description of condensate disposal methods provided;
<input checked="" type="checkbox"/>	Engineering Report	<input type="checkbox"/>	<input type="checkbox"/>	d. Description of procedures for condensate sampling, analyzing and data reporting provided;
<input checked="" type="checkbox"/>	Engineering Report	<input type="checkbox"/>	<input type="checkbox"/>	e. Closure plan provided describing methods to control gas after recovery facility ceases operation and any other requirements contained in Rule 62-701.400(10), FAC;
<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	f. Performance bond provided to cover closure costs if not already included in other landfill closure costs.

**PART O. LANDFILL FINAL CLOSURE REQUIREMENTS (62-701.600,FAC)**

<u>S</u>	<u>LOCATION</u>	<u>N/A</u>	<u>N/C</u>	
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1. Closure permit requirements; (62-701.600(2),FAC)
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	a. Application submitted to Department at least 90 days prior to final receipt of wastes;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	b. Closure plan shall include the following:
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(1) Closure design plan;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(2) Closure operation plan;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(3) Plan for long-term care;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(4) A demonstration that proof of financial responsibility for long-term care will be provided.

**S****LOCATION****N/A****N/C****PART O CONTINUED**

- |                          |       |                          |                                     |  |
|--------------------------|-------|--------------------------|-------------------------------------|--|
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 2. Closure design plan including the following requirements: (62-701.600(3),FAC)   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | a. Plan sheet showing phases of site closing;  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | b. Drawings showing existing topography and proposed final grades;   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | c. Provisions to close units when they reach approved design dimensions;   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | d. Final elevations before settlement;   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | e. Side slope design including benches, terraces, down slope drainage ways, energy dissipaters and discussion of expected precipitation effects; |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | f. Final cover installation plans including:   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (1) CQA plan for installing and testing final cover;   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (2) Schedule for installing final cover after final receipt of waste;  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (3) Description of drought-resistant species to be used in the vegetative cover;   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (4) Top gradient design to maximize runoff and minimize erosion;   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (5) Provisions for cover material to be used for final cover maintenance.  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | g. Final cover design requirements:  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (1) Protective soil layer design;  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (2) Barrier soil layer design;   |

S	LOCATION	N/A	N/C	PART O CONTINUED
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(3) Erosion control vegetation;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(4) Geomembrane barrier layer design;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(5) Geosynthetic clay liner design if used;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(6) Stability analysis of the cover system and the disposed waste.
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	h. Proposed method of stormwater control;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	i. Proposed method of access control;
<input checked="" type="checkbox"/>	Engineering Report	<input type="checkbox"/>	<input type="checkbox"/>	j. Description of the proposed or existing gas management system which complies with Rule 62-701.530, FAC.
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	3. Closure operation plan shall include:(62-701.600(4),FAC)
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	a. Detailed description of actions which will be taken to close the landfill;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	b. Time schedule for completion of closing and long-term care;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	c. Describe proposed method for demonstrating financial assurance for long-term care;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	d. Operation of the water quality monitoring plan required in Rule 62-701.510, FAC.
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	e. Development and implementation of gas management system required in Rule 62-701.530, FAC.
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	4. Certification of closure construction completion including: (62-701.600(6),FAC)
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	a. Survey monuments; (62-701.600(6)(a),FAC)
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	b. Final survey report; (62-701.600(6)(b),FAC)



**S****LOCATION****N/A****N/C****PART O CONTINUED**

- |                          |       |                          |                                     |   |
|--------------------------|-------|--------------------------|-------------------------------------|---|
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 5. Declaration to the public; (62-701.600(7),FAC)   |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 6. Official date of closing; (62-701.600(8),FAC)  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 7. Justification for and detailed description of procedures to be followed for temporary closure of the landfill, if desired; (62-701.600(9),FAC) |

**PART P. OTHER CLOSURE PROCEDURES (62-701.610,FAC)****S****LOCATION****N/A****N/C**

- |                          |       |                          |                                     |  |
|--------------------------|-------|--------------------------|-------------------------------------|--|
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 1. Describe how the requirements for use of closed solid waste disposal areas will be achieved;(62-701.610(1),FAC) |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 2. Describe how the requirements for relocation of wastes will be achieved; (62-701.610(2), FAC)                   |

**PART Q. LONG-TERM CARE (62-701.620,FAC)****S****LOCATION****N/A****N/C**

- |                                     |                    |                          |                                     |  |
|-------------------------------------|--------------------|--------------------------|-------------------------------------|--|
| <input checked="" type="checkbox"/> | Engineering Report | <input type="checkbox"/> | <input type="checkbox"/>            | 1. Maintaining the gas collection and monitoring system; (62-701.620(5), FAC)                    |
| <input type="checkbox"/>            | _____              | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 2. Stabilization report requirements; (62-701.620(6),FAC)  |
| <input type="checkbox"/>            | _____              | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 3. Right of access;(62-701.620(7),FAC)   |
| <input type="checkbox"/>            | _____              | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 4. Requirements for replacement of monitoring devices; (62-701.620(8),FAC)                       |
| <input type="checkbox"/>            | _____              | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 5. Completion of long-term care signed and sealed by professional engineer (62-701.620(9), FAC). |

**PART R. FINANCIAL ASSURANCE (62-701.630,FAC)**

**S            LOCATION            N/A            N/C**

- |                          |       |                          |                                     |  |
|--------------------------|-------|--------------------------|-------------------------------------|--|
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 1. Provide cost estimates for closing, long-term care, and corrective action costs estimated by a PE for a third party performing the work, on a per unit basis, with the source of estimates indicated; (62-701.630(3)&(7), FAC). |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 2. Describe procedures for providing annual cost adjustments to the Department based on inflation and changes in the closing, long-term care, and corrective action plans; (62-701.630(4)&(8), FAC).                               |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 3. Describe funding mechanisms for providing proof of financial assurance and include appropriate financial assurance forms; (62-701.630(5),(6),&(9), FAC).  |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 4. Provide documentation and the appropriate forms for delaying submitting proof of financial assurance for solid waste disposal units that qualify; (62-701.630(2)(c), FAC).  |

**1. Applicant:**

The undersigned applicant or authorized representative of Vista Landfill, LLC

\_\_\_\_\_ is aware that statements made in this form and attached

information are an application for a Class III Landfill Operation Permit from the Florida Department of Environmental Protection and certifies that the information in this application is true, correct and complete to the best of his/her knowledge and belief. Further, the undersigned agrees to comply with the provisions of Chapter 403, Florida Statutes, and all rules and regulations of the Department. It is understood that the Permit is not transferable, and the Department will be notified prior to the sale or legal transfer of the permitted facility.

**Signature of Applicant or Agent**

Timothy Hawkins, Vice President  
Name and Title (please type)

**thawkins@wm.com**

E-Mail address (if available)

**242 West Keene Road**

**Mailing Address**

**Apopka, FL 32703**

City, State, Zip Code

(407 ) 553-4939

Telephone Number

Date:

**Attach letter of authorization if agent is not a governmental official, owner, or corporate officer.**

2. **Professional Engineer registered in Florida (or Public Officer if authorized under Sections 403.707 and 403.7075, Florida Statutes):**

This is to certify that the engineering features of this solid waste management facility have been designed/examined by me and found to conform to engineering principles applicable to such facilities. In my professional judgment, this facility, when properly maintained and operated, will comply with all applicable statutes of the State of Florida and rules of the Department. It is agreed that the undersigned will provide the applicant with a set of instructions of proper maintenance and operation of the facility.

Signature \_\_\_\_\_

See A. Nunes, PE, Project Manager

North and STATE OF

**69457**

**Florida Registration Number**  
(please affix seal)

**305 South Main Street**

**Mailing Address**

**Monroe, North Carolina 28112**

City, State, Zip Code

snunes@cecenv.com

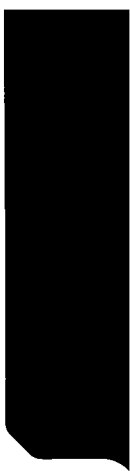
E-Mail address (if available)

(863 ) 634-7185

Telephone Number

Date:

**PERMIT MODIFICATION  
APPLICATION**



**INTERMEDIATE CLASS III OPERATION PERMIT  
MODIFICATION APPLICATION  
GAS MANAGEMENT SYSTEM**

**VISTA LANDFILL, CLASS III FACILITY  
242 WEST KEENE ROAD  
APOPKA, FLORIDA 32703**



Prepared for:

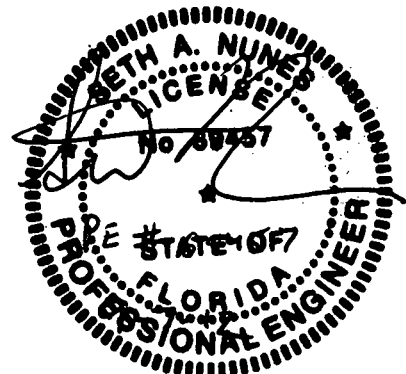
**WASTE MANAGEMENT INC. OF FLORIDA**

Prepared by:

**CEC**

**CARLSON ENVIRONMENTAL CONSULTANTS, PC  
305 South Main Street  
Monroe, North Carolina 28112  
(704) 283-9765**

**September 2012**



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# **1 ENGINEERING REPORT**

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## **1.1 Introduction**

The purpose of this intermediate permit modification for Vista Landfill, Class III Facility (Vista) is to provide information regarding Waste Management Inc. of Florida's (WMIF) proactive approach to gas management. This document supplements the information provided in the Operations Permit Application dated February 17, 2011.

Vista currently operates under an active Title V operating permit (No. 0951334-002-AV). This air operating permit addresses the landfill gas (LFG) that is collected at the contiguous landfills of Keene Road Recycling and Disposal Facility (Keene) and the Vista Landfill. The collected LFG from Vista is piped to the open flare located at the Keene Road Recycling and Disposal Facility.

## **1.2 Existing Conditions**

Vista is located in Apopka, Orange County, Florida and is operated by WMIF. This intermediate permit modification outlines the proactive methodology employed to design and implement control measures to reduce migration. Existing control measures include active landfill gas extraction and flaring.

### **1.2.1 Landfill Gas Monitoring Probes**

At final buildout, 25 permanent landfill gas monitoring probes will be installed at Vista along the site property line and in the vicinity of the on-site structures. The gas probes and structures are monitored on a quarterly basis in accordance with 62-701.530(2), FAC.

### **1.2.2 Landfill Gas Collection Points**

The facility has installed additional control measures to reduce the migration and maintain compliance with Rule 62-701.530, FAC. The additional control measures included the installation of an active gas collection system at the facility in 2010. This active gas collection system includes a blower-assisted flare that is capable of collecting 2,800 standard cubic feet per minute (scfm) of gas from both Keene and Vista Landfills.

The current active gas collection system at Vista connects four (4) vertical extraction wells and five (5) horizontal collectors with below grade high density polyethylene (HDPE) header and lateral piping. Refer to Appendix A for copies of the wells logs. The existing site plan located in Appendix B shows the location of the installed gas management system features.

Condensate that is generated in the LFG extraction process is pumped back into Vista's leachate control system where it is comingled with the site's leachate. Leachate is collected at the site's

160,000 gallon capacity storage tank and conveyed to a municipal sanitary sewer line located on West Keene Road for off-site treatment and disposal at the City of Apopka Waste Water Treatment Plant (WWTP). At this time, condensate sampling and analysis is not performed. Leachate is analyzed annually in accordance with the site's Solid Waste Operating Permit (No. SO48-0165969-018).

### **1.3 Design Conditions**

Vista's proposed methods for future gas migration mitigation include installation of additional LFG collection devices as filling continues. Included in Appendix B are figures depicting the proposed Gas Management System Layout at buildout conditions and typical Gas Management System Details (wells, wellheads, piping, etc.). These features are installed proactively by Waste Management Inc. of Florida and are not required by Rule 62-701.530, FAC as the landfill accepts Class III waste and is not required to have a passive or active gas management system. However, a combination of passive and active gas management system components may be used as control measures to reduce migration and maintain compliance in accordance with the regulations. All LFG features will be installed based on the determination of site personnel.

Final well placement may vary from this anticipated buildout design due to the placement of wells and/or collectors during interim conditions. During interim conditions the locations may be changed due to filling activities or other considerations of an active landfill. Furthermore, wells/collectors may have to be replaced, re-drilled, or relocated over the life of the facility due to the conditions of the waste the wells are contained in, ongoing operations, etc. If this happens, the location of the well/collector may vary from the original designed location.

#### **1.3.1 Construction Notification and Certification**

Prior to commencement of scheduled (non-emergency) gas management system construction, WMIF will notify the Administrator in a timely manner. The written notification will include a description of the proposed construction, the anticipated start date, and the approximate duration of construction activity. Upon completion of construction, WMIF will submit a certification of completion to the Administrator summarizing the construction.

WMIF understands that a minor modification shall be submitted to the Administrator should the gas management system layout deviate substantially from that included in this intermediate permit modification.

#### **1.3.2 Excavated Waste Handling**

Class III refuse from trenching and drilling spoils will be loaded and moved to the active working face as soon as possible after excavation for disposal.

In the event that the Class III refuse is excavated and cannot be immediately taken to the working face the refuse may be stored adjacent to the excavation/borehole until it can be taken



to the working face before the end of the same working day. Refuse will remain within close proximity to the location from which it was removed.

Care will be taken to limit stormwater contact with the exposed Class III refuse. If the refuse can not be taken immediately to the working face, the Class III refuse shall be tarped or otherwise covered, and bermed (if located on a sideslope), to prevent stormwater contamination.

### **1.3.3 Interim Design Conditions**

In general, interim operating conditions occur when the landfill is actively accepting waste, and before it is closed or reaches final grades. During these interim conditions, the active gas collection system may be installed on an as needed basis.

One of the key factors in constructing and operating the gas management system during interim conditions, is how to design gas management features so it is compatible with the waste filling operations of an active landfill. Active filling operations may change due to economic conditions, natural disaster or other factors, which can impact when and how gas management features are installed. In general, gas management features will be installed to meet the requirements of the day-to-day activities of an active landfill. Due to the complexity of predicting fill operation, the exact timing of installation of these features may vary.

A flexible design was developed that incorporates the operational difficulties that can occur when installing an active gas collection system while the facility is actively accepting refuse. Collection device locations will be determined during operation of the landfill to maintain needed flexibility to account for daily operations which include shifting of refuse fill patterns, weather, waste type, waste volumes, natural disasters, and significant area events.

Interim conditions can hinder the effectiveness of the active gas collection system because it may be inadvertently damaged by heavy equipment collisions during filling operations, not necessarily coincide with filling operations, or water-in because of bellies resulting from heavy traffic or differential settlement.

Since the operations of the landfill, which include the filling patterns and amounts of waste accepted at Vista may change over time, there is no single design that can be presented at this time to address the location of each gas collection device and the corresponding piping network. Instead, during the interim period, the migration of LFG and conformance with Rule 62-701.530, FAC will be maintained and be used as the tool to determine when the system will be expanded and when upgrades to the system will be added.

Collection device locations and density will be determined at the time of installation to support normal operations of the landfill in regard to roadways, equipment, and fill sequencing. Actual collection device placement may vary from the locations shown on the drawings in Appendix B to accommodate actual site conditions at the time of installation.

The header and lateral pipeline systems have been sized to accommodate the peak flows depending on the planned life of the pipeline. If the landfill plans to operate the header and lateral pipelines only during interim conditions, and will be dismantled/replaced prior to final build out of the system, then it will be sized for the anticipated gas flows equating to the period of time it is planned to be operational. The portions of the pipe network that the landfill plans to use as part of the final design will be appropriately sized to handle the anticipated gas flows in the portion of the landfill at final buildout.

#### **1.3.4 Compatibility with Refuse Filling Operations**

During the process of Class III refuse filling operations, periodically, a vertical extraction well may be “raised” so the new Class III refuse is not placed over the top of an existing well in a manner that covers the well with Class III refuse, thereby preventing access. The vertical extraction wells are raised in anticipation of a new lift of Class III refuse, or in advance of the Class III refuse being added to the area in order to maintain worker safety in the active area during these well raising construction activities. However, in performing the well raising in a safe area may require the well to be raised more than 30 days before the Class III refuse can be placed around the well.

#### **1.3.5 Landfill Cover Properties**

The purpose of the interim cover system is to provide a barrier to landfill gas emissions, as well as, water and air infiltration. During the normal course of operations, daily, intermediate and final cover will be installed over the waste. The interim cover system will vary depending on when the landfill plans to place additional waste in the area. If the waste landfill sequencing plan defers filling to final grade in certain area(s) it may decide to seed or install some kind of a temporary cap over this portion of the landfill.

Final gas management system design conditions for the closed landfill will apply in areas of the active landfill, where waste has reached final grade and a certified closed cap is in place. Final design conditions also apply to the closed landfill or closed portions of an active landfill that have achieved final waste grades.

Typical details of LFG features that may be installed are depicted in Appendix B. The proposed final buildout conditions of the gas management system are also shown in Appendix B.

#### **1.3.6 Landfill Gas Extraction**

Interim landfill gas extraction may be provided by a combination of vertical extraction wells, horizontal collectors, and tie-ins to the leachate collection system. While WMIF intends to install vertical extraction wells to the maximum extent practical, particularly on sideslopes or in areas at or near final grade, horizontal collectors may be employed at interim conditions when installation of vertical wells is not appropriate due to site geometry or sequence of filling. In areas where horizontal collectors are installed, additional vertical wells may be required at final buildout depending on the performance of the collectors.

#### **1.3.6.1 Vertical Extraction Wells**

The design of vertical extraction wells at the site will vary depending on the landfill area in which the wells will be installed. In landfill areas with geomembrane liners, vertical wells will typically terminate at least 10 feet above the bottom of refuse. Vertical wells typically have an effective radius of influence that ranges from approximately 2.0 to 2.25 times the well depth. Consequently, the well spacing at Vista varies generally from 100 to 200 feet, depending on the estimated radii of influence of the wells.

Vertical wells will be constructed of either HDPE or PVC pipe installed in 30-inch or 36-inch diameter boreholes, unless an engineering judgment is made that an alternate sized borehole is more appropriate. Typically, approximately the lower two-thirds of the well pipe will be perforated or slotted. However, perforations/slots will not be closer than 15 feet from the landfill surface unless the wells are being installed in an active area and additional refuse will be filled around the wells within a reasonable period of time. Perforations typically will be either 5/8-inch diameter holes staggered 180 degrees apart, or 3/8-inch wide by 8-inch long slots spaced 12-inches apart on center. However, alternative slot or perforation designs which provide comparable performance may be considered.

#### **1.3.6.2 Horizontal Collectors**

Horizontal collectors typically have a horizontal zone of influence of approximately 75 feet, which results in a lateral spacing of approximately 150 feet between collectors. Horizontal collector lengths will vary depending on site conditions at the time of system expansion, but generally will be less than 1,000 feet long.

Horizontal collectors will be constructed to include the following features:

- Collector pipe will normally be 6- or 8-inch diameter solid HDPE pipe with a smooth interior wall with sufficient strength to resist crushing force due to the overburden of the landfill.
- The perforated/slotted collector pipe will be installed in a trench filled with appropriate aggregate material. The permeable backfill material will be sized so as to not pose significant risk of clogging the pipe perforations. Tire chips may also be used as backfill material.
- Perforated pipe will cease and the remaining length of collector will be solid-wall pipe. This will reduce the potential for air infiltration into the collectors.
- Perforations in the pipe will be sufficiently large to not cause excessive head loss detrimental to LFG collection.

#### **1.3.6.3 LCRS Tie-ins for LFG Collection**

To provide supplemental LFG collection during interim conditions, WMIF may install tie-ins to existing and future leachate collection riser pipes. These collectors are intended to provide supplemental collection for landfill gas migration purposes.

#### **1.3.6.4 Wellheads**

Each extraction well and horizontal collector will include a wellhead constructed of appropriate materials. Wellheads will include a valve for flow control and monitoring ports for measuring gas quality, temperature, and flow rate.

### **1.4 Landfill Gas Collection Point Decommissioning**

Based on the performance of each individual collection point, it may be necessary to decommission them at some point. To decommission a collection point, the wellhead will be removed and the vertical well casing and/or horizontal collector casing will be capped with a fused or slip-on cap.

Over the life of the site, individual collection points may be replaced, the new collections points will be renamed or given another alternative name.

### **1.5 Closure**

At the time of closure, the permitted final cover system will be either a geosynthetic clay liner (GCL) or 40-mil low density polyethylene (LLDPE) synthetic cap. The barrier layer will be installed over a minimum 6-inch soil layer, overlain by 18-inches of protective cover soil overlain, and 6-inches of compost or topsoil capable of sustaining vegetation. Any modifications made to the gas management system (active or passive) during interim conditions will be incorporated in the site's closure plans.

### **1.6 Long-Term Care and Financial Assurance**

As currently approved by FDEP Permit No. SO 48-0165969-018, Condition G, Vista is operating under a phased financial assurance. Since Cells 1, 2, and 3 of Phase 1 are currently constructed, the attached closure costs have been updated to reflect the closure area of these Phase 1 cells, which is approximately 26.2 acres. Refer to Appendix C for the revised Financial Assurance, which includes FDEP Form No. 62-701.900(28), the back-up calculations and third party quotes.

## **1.7 Recordkeeping**

Prior to commencement of scheduled (non-emergency) gas management system construction, WMIF will notify the Administrator in a timely manner. The written notification will include a description of the proposed construction, the anticipated start date, and the approximate duration of construction activity. Upon completion of construction, WMIF will submit a certification of completion to the Administrator summarizing the construction. Once construction has been completed, record drawings of the completed gas management system construction will be updated and a copy of the updated site plan will be kept on-site.

APPENDIX A

**APPENDIX A**  
**VENT DRILL LOGS**

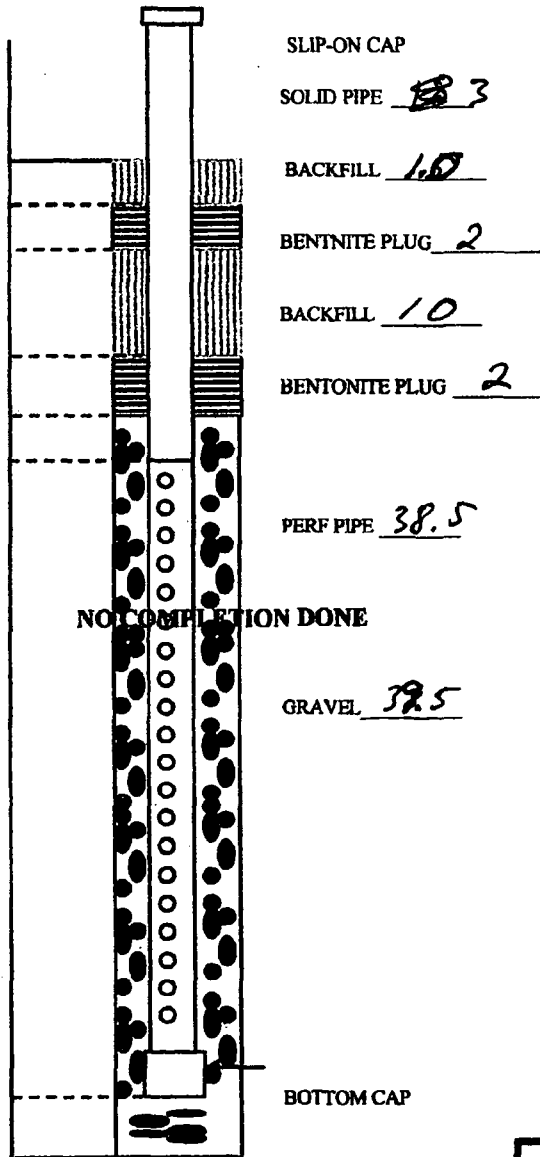
# QUALITY DRILLING SERVICE

## DRILLING & COMPLETION LOG

Project Name: Vista LF

Well Number: EW-1A

Date: 10-4-10



DRILL	<u>54'</u>	WEATHER	<u>Fair</u>
COMP.		START	<u>7:50 am</u>
ABAN.		STOP	<u>9:35 am</u>
SOLID		PIPE DIA.	
PERF.		& TYPE	

DEPTH	COMPOSITION & TEMPERATURE °	DEGREE OF DECOMPOSITION	AMOUNT OF MOISTURE
<u>0-2</u>	<u>Cover</u>	<u>Damp / None</u>	<u>Dry / Mostly</u>
<u>2-20</u>	<u>C&amp;D</u>	<u>↓ Mostly</u>	
<u>21-30</u>		<u>Dry</u>	
<u>31-40</u>			
<u>41-50</u>			
<u>51-60</u>			
<u>61-70</u>			
<u>71-80</u>			
<u>81-90</u>			
<u>91-100</u>			
<u>101-110</u>			
<u>111-120</u>			
<u>121-130</u>			
<u>131-140</u>			

TD 54'

### COMMENTS

C&D O/M

Set up on Well # EW-1A + drilled 54' + set pipe.

Moved to Well # EW-2A.

CLIENT REPRESENTATIVE

DATE

NAME & TITLE

Darryl Hensley 10/4/2010

QUALITY DRILLING SERVICE

DATE

QUALITY DRILLING SERVICE



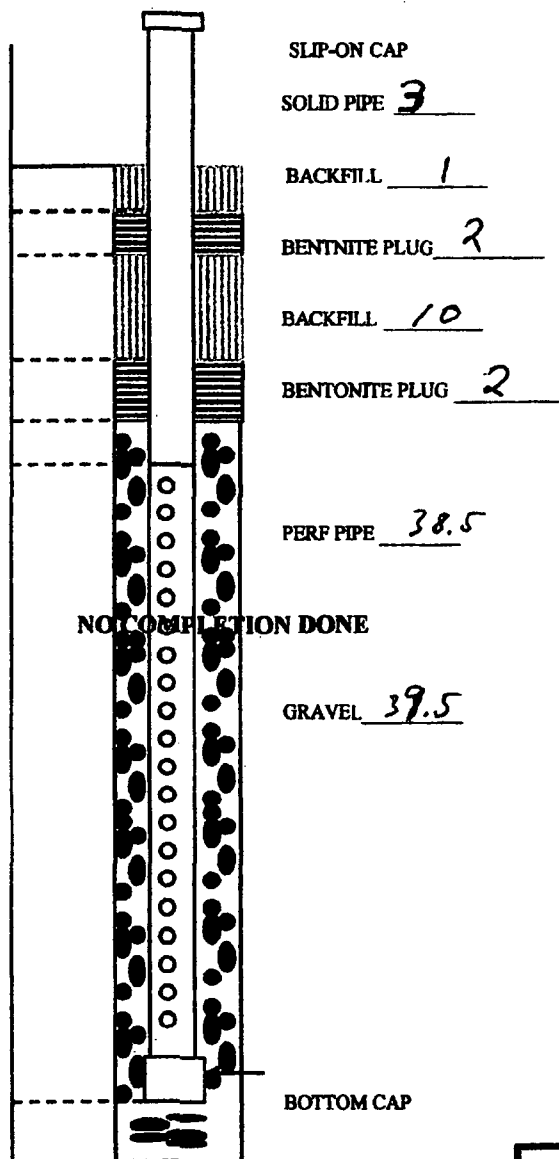
# QUALITY DRILLING SERVICE

## DRILLING & COMPLETION LOG

Project Name: Vista LG

Well Number: EW 2-A

Date: 10-4-10



DRILL	54'	WEATHER	Fair
COMP.		START	10:30am
ABAN.		STOP	12:25pm
SOLID		PIPE DIA.	
PERF.		& TYPE	

DEPTH	COMPOSITION & TEMPERATURE °	DEGREE OF DECOMPOSITION	AMOUNT OF MOISTURE
0-2	Cover	None	Pray, Mostly
2-20	C&D	Mostly	
21-30			
31-40			
41-50			
51-60			
61-70			
71-80			
81-90			
91-100			
101-110			
111-120			
121-130			
131-140			

TD 54'

### COMMENTS

~~W/~~ Set up on Well # EW-2A & drilled 0-54'  
Moved to Well # EW-3A.

CLIENT REPRESENTATIVE

DATE

NAME & TITLE

QUALITY DRILLING SERVICE

DATE

NAME & TITLE

Ray Hamby 10/4/2010

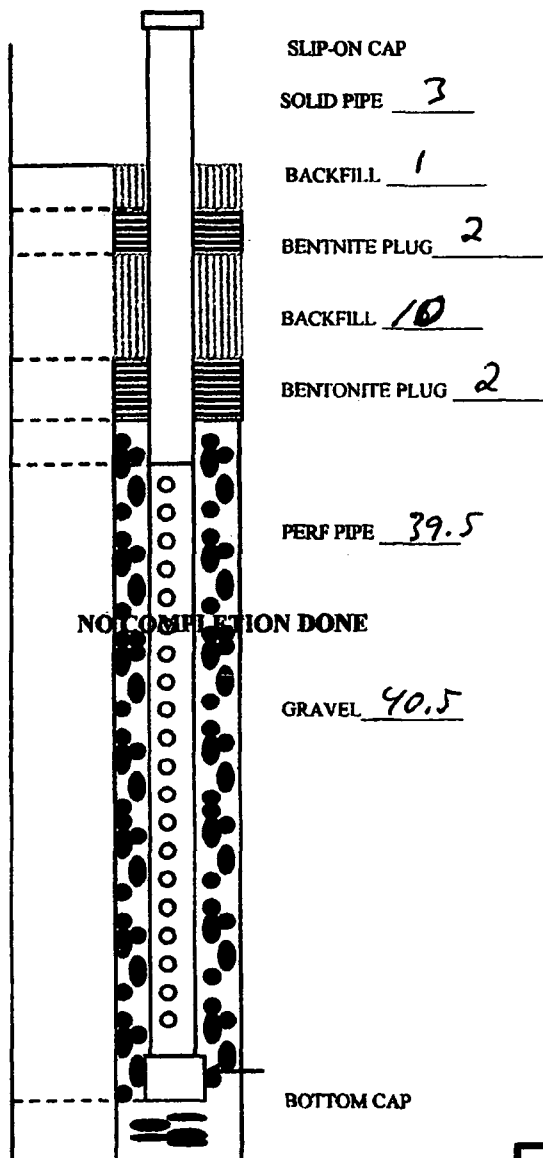
# QUALITY DRILLING SERVICE

## DRILLING & COMPLETION LOG

Project Name: Vista LF

Well Number: EW-3A

Date: 10-4-10



DRILL	SS'	WEATHER	Fair
COMP.		START	12:30 pm
ABAN.		STOP	2:30 pm
SOLID		PIPE DIA.	
PERF.		& TYPE	

DEPTH	COMPOSITION & TEMPERATURE °	DEGREE OF DECOMPOSITION	AMOUNT OF MOISTURE
0-2	COVER	None	Dry / Mostly
2-20	C&D	Mostly	
21-30			
31-40			
41-50			
51-60			
61-70			
71-80			
81-90			
91-100			
101-110			
111-120			
121-130			
131-140			

TD 55'

### COMMENTS

Set up on Well# EW-3A & drilled 0 - 55' & set pipe.

Moved to Well# EW-4A.

CLIENT REPRESENTATIVE

DATE

NAME & TITLE

QUALITY DRILLING SERVICE

DATE

NAME & TITLE

Andy Hensley 10-4-2010

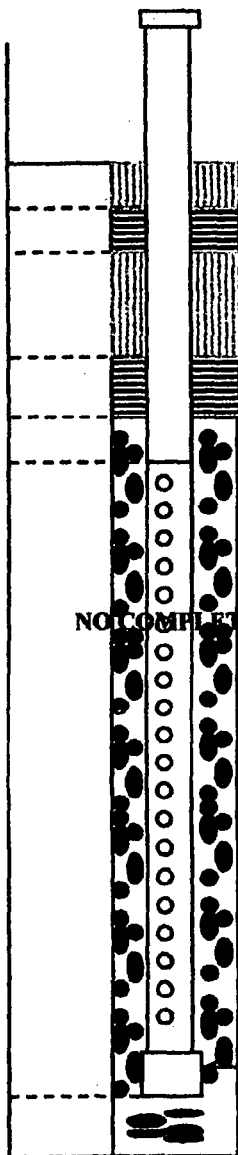
# QUALITY DRILLING SERVICE

## DRILLING & COMPLETION LOG

Project Name: Vista LF

Well Number: EW-4A

Date: 10-4-10



SLIP-ON CAP

SOLID PIPE 3

BACKFILL 1

BENTONITE PLUG 2

BACKFILL 10

BENTONITE PLUG 2

PERF PIPE 33.5

NOT COMPLETION DONE

GRAVEL 34.5

BOTTOM CAP

DRILL	<u>49'</u>	WEATHER	<u>Fair</u>
COMP.		START	<u>3:25 PM</u>
ABAN.		STOP	<u>4:35 PM</u>
SOLID		PIPE DIA.	
PERF.		& TYPE	

DEPTH	COMPOSITION & TEMPERATURE °	DEGREE OF DECOMPOSITION	AMOUNT OF MOISTURE
<u>0-2</u>	<u>Coar</u>	<u>None</u>	<u>Dry</u>
<u>2-20</u>	<u>C&amp;D</u>	<u>Mostly</u>	
<u>21-30</u>			
<u>31-40</u>			
<u>41-50</u>			
<u>51-60</u>			
<u>61-70</u>			
<u>71-80</u>			
<u>81-90</u>			
<u>91-100</u>			
<u>101-110</u>			
<u>111-120</u>			
<u>121-130</u>			
<u>131-140</u>			

TD 49'

### COMMENTS

Set up on Well # EW-4A + drilled 49' + set pipe

Moved back to Trail Ridge LF.

End of Project.

Total Footage : 212 feet (all C&D).

CLIENT REPRESENTATIVE

DATE

NAME & TITLE

Andy Hamby 10/4/2010

QUALITY DRILLING SERVICE

DATE

Andy Hamby, CDD SUPERVISOR

**APPENDIX B**

**APPENDIX B**  
**GAS MANAGEMENT SYSTEM DRAWINGS**

**Sealed Large Format**

**Drawings**

**Inserted Separately**



**APPENDIX C**  
**UPDATED FINANCIAL ASSURANCE ESTIMATE**





# Florida Department of Environmental Protection

Bob Martinez Center  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

DEP Form # 62-701.900(28), F.A.C.

Form Title: Closure Cost Estimating Form  
For Solid Waste Facilities

Effective Date: January 6, 2010

Incorporated in Rule 62-701.630(3), F.A.C.

## CLOSURE COST ESTIMATING FORM FOR SOLID WASTE FACILITIES

Date of DEP Approval: \_\_\_\_\_

### I. GENERAL INFORMATION:

Facility Name: Vista Landfill, LLC WACS ID: 87081  
 Permit Application or Consent Order No.: SO48-0165969-018 Expiration Date: 11/9/16  
 Facility Address: 242 West Keene Road, Apopka, Florida 32703  
 Permittee or Owner/Operator: Vista Landfill, LLC  
 Mailing Address: 242 West Keene Road, Apopka, Florida 32703

Latitude: 28° 38' 24.5" Longitude: 81° 30' 41.7"  
 Coordinate Method: State Plane Datum: NAD 83/90  
 Collected by: T. Jeffery Young, PSM, CP Company/Affiliation: Pickett Surv. & Photogram

### Solid Waste Disposal Units Included in Estimate:

Phase / Cell	Acres	Date Unit Began Accepting Waste	Active Life of Unit From Date of Initial Receipt of Waste	If active: Remaining life of unit	If closed: Date last waste received	If closed: Official date of closing
Phase 1/1	7.4	11/14/2008	5 years	5 years		
Phase 1/2	9.5	1/25/2010	5 years	5 years		
Phase 1/3	9.2	Proposed	5 years	5 years		

Total disposal unit acreage included in this estimate: Closure: 26.2 Long-Term Care: 26.2

Facility type: ☐ Class I ☒ Class III ☐ C&D Debris Disposal  
 (Check all that apply) ☒ Other: Class III MRF

### II. TYPE OF FINANCIAL ASSURANCE DOCUMENT (Check type)

- ☐ Letter of Credit\* ☒ Insurance Certificate ☐ Escrow Account  
☐ Performance Bond\* ☐ Financial Test ☐ Form 29 (FA Deferral)  
☐ Guarantee Bond\* ☐ Trust Fund Agreement

\* - Indicates mechanisms that require the use of a Standby Trust Fund Agreement

Northwest District  
160 Government Center  
Pensacola, FL 32502-5794  
850-595-8360

Northeast District  
7825 Baymeadows Way, Ste. B200  
Jacksonville, FL 32256-7590  
904-807-3300

Central District  
3319 Maguire Blvd., Ste. 232  
Orlando, FL 32803-3767  
407-894-7555

Southwest District  
13051 N. Telecom Pkwy.  
Tempe Terrace, FL 33637  
813-632-7600

South District  
2295 Victoria Ave., Ste. 364  
Fort Myers, FL 33901-3881  
239-332-6975

Southeast District  
400 N. Congress Ave., Ste. 200  
West Palm Beach, FL 33401  
561-681-6600

### III. ESTIMATE ADJUSTMENT

CFR Part 264 Subpart H as adopted by reference in Rule 62-701.630, Florida Administrative Code, (F.A.C.) sets forth the method of annual cost estimate adjustment. Cost estimates may be adjusted by using an inflation factor or by recalculating the maximum costs of closure in current dollars. Select one of the methods of cost estimate adjustment below.

☐ (a) Inflation Factor Adjustment

☒ (b) Recalculated or New Cost Estimates

Inflation adjustment using an inflation factor may only be made when a Department approved closure cost estimate exists and no changes have occurred in the facility operation which would necessitate modification to the closure plan. The inflation factor is derived from the most recent Implicit Price Deflator for Gross National Product published by the U.S. Department of Commerce in its survey of Current Business. The inflation factor is the result of dividing the latest published annual Deflator by the Deflator for the previous year. The inflation factor may also be obtained from the Solid Waste website [www.dep.state.fl.us/waste/categories/swfr](http://www.dep.state.fl.us/waste/categories/swfr) or call the Financial Coordinator at (850) 245-8706.

This adjustment is based on the Department approved closing cost estimate dated: \_\_\_\_\_

Latest Department Approved Closing Cost Estimate:	Current Year Inflation Factor, e.g. 1.02		Inflation Adjusted Closing Cost Estimate:
_____	x	=	_____

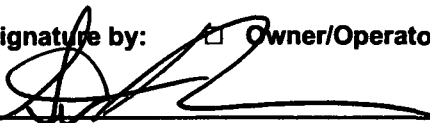
This adjustment is based on the Department approved long-term care cost estimate dated: \_\_\_\_\_

Latest Department Approved Annual Long-Term Care Cost Estimate:	Current Year Inflation Factor, e.g. 1.02		Inflation Adjusted Annual Long-Term Care Cost Estimate:
_____	x	=	_____
Number of Years of Long Term Care Remaining:		x	_____
Inflation Adjusted Long-Term Care Cost Estimate:		=	_____

Signature by: ☐ Owner/Operator

☒ Engineer

(check what applies)

  
\_\_\_\_\_  
Signature

305 South Main Street

\_\_\_\_\_  
Address

Seth Nunes, Project Manager

\_\_\_\_\_  
Name & Title

Monroe, North Carolina 28112

\_\_\_\_\_  
City, State, Zip Code

8-7-12

\_\_\_\_\_  
Date

snunes@cecenv.com

\_\_\_\_\_  
E-Mail Address

(863)634-7185

\_\_\_\_\_  
Telephone Number

**IV. ESTIMATED CLOSING COST (check what applies)**☒ **Recalculated Cost Estimate**☐ **New Facility Cost Estimate**

- Notes: 1. Cost estimates for the time period when the extent and manner of landfill operation makes closing most exp
2. Cost estimate must be certified by a professional engineer.
3. Cost estimates based on third party suppliers of material, equipment and labor at fair market value.
4. In some cases, a price quote in support of individual item estimates may be required.

Description	Unit	Number of Units	Cost / Unit	Total Cost
<b>1. Proposed Monitoring Wells (Do not include wells already in existence.)</b>				
	EA			
Subtotal Proposed Monitoring Wells:				
<b>2. Slope and Fill (bedding layer between waste and barrier layer):</b>				
Excavation	CY	21,102	\$3.00	\$63,306.00
Placement and Spreading	CY	21,102	\$2.10	\$44,314.20
Compaction	CY			
Off-Site Material	CY			
Delivery	CY			
Subtotal Slope and Fill:				\$107,620.20
<b>3. Cover Material (Barrier Layer):</b>				
Off-Site Clay	CY			
Synthetics - 40 mil	SY	126,614	\$4.68	\$592,553.52
Synthetics - GCL	SY			
Synthetics - Geonet	SY	74,135	\$5.22	\$386,984.70
Synthetics - Other (explain)	CY	63,307	\$8.50	\$538,109.50
Subtotal Cover Material:				\$1,517,647.72
<b>4. Top Soil Cover:</b>				
Off-Site Material	CY			
Delivery	CY			
Spread	CY	25,323	\$5.50	\$139,276.50
Subtotal Top Soil Cover:				\$139,276.50
<b>5. Vegetative Layer</b>				
Sodding	SY			
Hydroseeding	AC	26.2	\$1,936.00	\$50,723.20
Fertilizer	AC			
Mulch	AC			
Other (explain)				
Subtotal Vegetative Layer:				\$50,723.20
<b>6. Stormwater Control System:</b>				
Earthwork	CY			
Grading	SY			
Piping	LF	300	\$20.00	\$6,000.00
Ditches	LF	6,000	\$15.00	\$90,000.00
Berms	LF			
Control Structures	EA	2	\$2,000.00	\$4,000.00
Other (explain)				
Subtotal Stormwater Control System:				\$100,000.00



**Subtotal of 1-11 Above:** \$2,177,067.62

<b>12. Contingency</b>	<u>10</u>	% of Subtotal of 1-11 Above	<u>\$217,706.76</u>
		<b>Subtotal Contingency:</b>	<b>\$217,706.76</b>

**Estimated Closing Cost Subtotal:** \$2,394,774.38

Description	Total Cost
<b>13. Site Specific Costs</b>	
Mobilization	\$61,478.03
Waste Tire Facility	\$3,828.13
Materials Recovery Facility	
Special Wastes	
Leachate Management System Modification	
Other (explain) _____	
<b>Subtotal Site Specific Costs:</b>	<b>\$65,306.16</b>

**TOTAL ESTIMATED CLOSING COSTS (\$):** \$2,460,080.54

## V. ANNUAL COST FOR LONG-TERM CARE

See 62-701.600(1)a.1., 62-701.620(1), 62-701.630(3)a. and 62-701.730(11)b. F.A.C. for required term length. For landfills certified closed and Department accepted, enter the remaining long-term care length as "Other" and provide years remaining.  
(Check Term Length) ☐ 5 Years ☐ 20 Years ☒ 30 Years ☐ Other, \_\_\_\_ Years

Notes: 1. Cost estimates must be certified by a professional engineer.

2. Cost estimates based on third party suppliers of material, equipment and labor at fair market value.

3. In some cases, a price quote in support of individual item estimates may be required.

**All items must be addressed. Attach a detailed explanation for all entries left blank.**

Description	Sampling Frequency (Events / Year)	Number of Wells	(Cost / Well) / Event	Annual Cost
<b>1. Groundwater Monitoring [62-701.510(6), and (8)(a)]</b>				
Monthly	12			
Quarterly	4			
Semi-Annually	2	18	\$805.00	\$28,980.00
Annually	1			
Subtotal Groundwater Monitoring:				\$28,980.00
<b>2. Surface Water Monitoring [62-701.510(4), and (8)(b)]</b>				
Monthly	12			
Quarterly	4			
Semi-Annually	2			
Annually	1			
Subtotal Surface Water Monitoring:				
<b>3. Gas Monitoring [62-701.400(10)]</b>				
Monthly	12			
Quarterly	4	12	\$50.00	\$2,400.00
Semi-Annually	2			
Annually	1			
Subtotal Gas Monitoring:				\$2,400.00
<b>4. Leachate Monitoring [62-701.510(5), (6)(b) and 62-701.510(8)c]</b>				
Monthly	12			
Quarterly	4			
Semi-Annually	2			
Annually	1			
Other (explain) _____				
Subtotal Leachate Monitoring:				

Description	Unit	Number of Units / Year	Cost / Unit	Annual Cost
<b>5. Leachate Collection/Treatment Systems Maintenance</b>				
<u>Maintenance</u>				
Collection Pipes	LF			
Sumps, Traps	EA			
Lift Stations	EA	4	\$100.00	\$400.00
Cleaning	LS	1	\$3,000.00	\$3,000.00
Tanks	EA			

Description	Unit	Number of Units / Year	Cost / Unit	Annual Cost
<b>5. (continued)</b>				
<u>Impoundments</u>				
Liner Repair	SY	_____	_____	_____
Sludge Removal	CY	_____	_____	_____
<u>Aeration Systems</u>				
Floating Aerators	EA	_____	_____	_____
Spray Aerators	EA	_____	_____	_____
<u>Disposal</u>				
Off-site (Includes transportation and disposal)	1000 gallon	<u>1</u>	<u>\$100.00</u>	<u>\$100.00</u>
Subtotal Leachate Collection / Treatment Systems Maintenance:				<u>\$3,500.00</u>
<b>6. Groundwater Monitoring Well Maintenance</b>				
Monitoring Wells	LF	_____	_____	_____
Replacement	EA	<u>3</u>	<u>\$2,000.00</u>	<u>\$6,000.00</u>
Abandonment	EA	<u>3</u>	<u>\$500.00</u>	<u>\$1,500.00</u>
Subtotal Groundwater Monitoring Well Maintenance:				<u>\$7,500.00</u>
<b>7. Gas System Maintenance</b>				
Piping, Vents	LF	_____	_____	_____
Blowers	EA	_____	_____	_____
Flaring Units	EA	_____	_____	_____
Meters, Valves	EA	_____	_____	_____
Compressors	EA	_____	_____	_____
Flame Arrestors	EA	_____	_____	_____
Operation	LS	<u>1</u>	<u>\$1,000.00</u>	<u>\$1,000.00</u>
Subtotal Gas System Maintenance:				<u>\$1,000.00</u>
<b>8. Landscape Maintenance</b>				
Mowing	AC	<u>26.2</u>	<u>\$65.00</u>	<u>\$1,703.00</u>
Fertilizer	AC	_____	_____	_____
Subtotal Landscape Maintenance:				<u>\$1,703.00</u>
<b>9. Erosion Control and Cover Maintenance</b>				
Sodding	SY	<u>500</u>	<u>\$1.35</u>	<u>\$675.00</u>
Regrading	AC	_____	_____	_____
Liner Repair	SY	_____	_____	_____
Clay	CY	_____	_____	_____
Subtotal Erosion Control and Cover Maintenance:				<u>\$675.00</u>
<b>10. Storm Water Management System Maintenance</b>				
Conveyance Maintenance	LS	<u>1</u>	<u>\$900.00</u>	<u>\$900.00</u>
Subtotal Storm Water Management System Maintenance:				<u>\$900.00</u>
<b>11. Security System Maintenance</b>				
Fences	LS	<u>1</u>	<u>\$900.00</u>	<u>\$900.00</u>
Gate(s)	EA	_____	_____	_____
Sign(s)	EA	<u>1</u>	<u>\$300.00</u>	<u>\$300.00</u>
Subtotal Security System Maintenance:				<u>\$1,200.00</u>

Description	Unit	Number of Units / Year	Cost / Unit	Annual Cost
12. Utilities	LS	1	\$12,240.00	\$12,240.00
Subtotal Utilities:				\$12,240.00

### 13. Leachate Collection/Treatment Systems Operation

#### Operation

P.E. Supervisor	HR			
On-Site Engineer	HR			
Office Engineer	HR			
OnSite Technician	HR	156	\$75.00	\$11,700.00
Materials	LS	1		

Subtotal Leachate Collection/Treatment Systems Operation: \$11,700.00

### 14. Administrative

P.E. Supervisor	HR	40	\$120.00	\$4,800.00
On-Site Engineer	HR	0	\$120.00	
Office Engineer	HR	40	\$120.00	\$4,800.00
OnSite Technician	HR	60	\$75.00	\$4,500.00
Other Lump				

Subtotal Administrative: \$14,100.00

Subtotal of 1-14 Above: \$85,898.00

15. Contingency	10	% of Subtotal of 1-14 Above		\$8,589.80
Subtotal Contingency:				\$8,589.80

Description	Unit	Number of Units / Year	Cost / Unit	Annual Cost
16. Site Specific Costs				
Subtotal Site Specific Costs:				

ANNUAL LONG-TERM CARE COST (\$ / YEAR): \$94,487.80

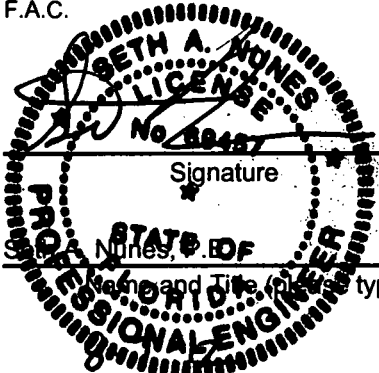
Number of Years of Long-Term Care: 30

TOTAL LONG-TERM CARE COST (\$): \$2,834,634.00



## VI. CERTIFICATION BY ENGINEER

This is to certify that the Cost Estimates pertaining to the engineering features of this solid waste management facility have been examined by me and found to conform to engineering principles applicable to such facilities. In my professional judgment, the Cost Estimates are a true, correct and complete representation of the financial liabilities for closing and/or long-term care of the facility and comply with the requirements of Rule 62-701.630 F.A.C. and all other Department of Environmental Protection rules, and statutes of the State of Florida. It is understood that the Cost Estimates shall be submitted to the Department annually, revised or adjusted as required by Rule 62-701.630(4), F.A.C.

  
\_\_\_\_\_  
Signature  
\_\_\_\_\_  
Nunes, B. A.  
Name and Title (please type)  
\_\_\_\_\_  
Date

69457  
Florida Registration Number  
(please affix seal)

305 South Main Street  
Mailing Address

Monroe, North Carolina 28112  
City, State, Zip Code

snunes@cecenv.com  
E-Mail address (if available)

(863) 634-7185  
Telephone Number

## VII. SIGNATURE BY OWNER/OPERATOR

  
\_\_\_\_\_  
Signature of Applicant

Timothy Hawkins, Vice President  
Name and Title (please type)

thawkins@wm.com  
E-Mail address (if available)

242 West Keene Road  
Mailing Address

Apopka, FL 32703  
City, State, Zip Code

407-553-4939  
Telephone Number

CARLSON ENVIRONMENTAL CONSULTANTS, PC			
CLIENT	PROJECT	JOB NO.	
WM of Inc. of Florida	Vista Landfill	101.07.07	
SUBJECT	BY	DATE	
FINANCIAL ASSURANCE	Lindsey Kennelly	9/7/12	
	CHECKED	DATE	
	SAN	9/7/12	

**OBJECTIVE:** The 2/17/11 renewal accounted for financial assurance closure and long-term care costs for 35.3 acres, which is comprised of the following Phase I areas:

**PHASE 1**

Cell 1 7.39 acres  
 Cell 2 9.54 acres  
 Cell 3 9.23 acres  
 Cell 4 9.14 acres

Total Phase I 35.3 acres

Cell 1, 2, and 3 have been constructed at the time of this permit modification. Therefore, the financial assurance is being updated to reflect the closure and long-term care costs of Cells 1, 2, and 3.

**PHASE 1**

Cell 1 7.39 acres  
 Cell 2 9.54 acres  
 Cell 3 9.23 acres

Total Closure Acreage 26.2 acres = 1,139,530 SF = 126,614 SY

**CLOSURE COSTS**

**1. Monitoring Wells:**

The groundwater monitoring well system for has already been installed. No additional cost is included.

**2. Slope and Fill:**

On-site soils to be used for 6-inches of intermediate cover

Quantity

Intermediate Cover Volume = 569,765 CF = 21,102 CY

Unit Cost

Placement, spreading, and compaction cost = \$2.10 /CY Appendix C-1

Excavation, hauling on-site material cost = \$3.00 /CY Appendix C-1

**3. Cover Material (Barrier Layer)**

Off-site soils to be used for 18-inches of protective cover

Quantity

40 mil HDPE Textured Geomembrane = 126,614 SY

Geocomposite drainage layer) = 74,135 SY

18-inches Protective Cover Soil Volume = 1,709,294 CF = 63,307 CY = Total Acreage \* 1.5 feet

Unit Cost

40 mil HDPE Textured Geomembrane: Material/installation = \$0.52 /SF = \$4.68 /SY Appendix C-1

Geocomposite drainage layer: Material/installation = \$0.58 /SF = \$5.22 /SY Appendix C-1

Protective Cover Soil Volume: Material Cost = \$5.00 /CY Appendix C-1

Excavation, hauling off-site cost = \$3.50 /CY Appendix C-1

Total Protective Cover Soil = \$8.50 /CY

**4. Top Soil Cover**

On-site soils to be used for 6-inches of vegetative cover

Quantity

6-inches Vegetative Cover Volume = 683,718 CF = 25,323 CY

Unit Cost

Excavation, placement, and spreading cost = \$3.50 /CY Appendix C-1

Material cost = \$2.00 /CY Appendix C-1

Total Top Soil = \$5.50 /CY

CARLSON ENVIRONMENTAL CONSULTANTS, PC			
CLIENT	WM of Inc. of Florida	PROJECT	Vista Landfill
		JOB NO.	101.07.07
SUBJECT	FINANCIAL ASSURANCE	BY	Lindsey Kennelly
		CHECKED	SAN
		DATE	9/7/12
		DATE	9/7/12

#### 5. Vegetative Layer

Final cover will be hydroseeded.

##### Quantity

Hydroseeded Area = 26.2 acres

##### Unit Cost

Hydroseed: Material/installation = \$0.40 /SY = \$1,936.00 /acre Appendix C-1

#### 6. Stormwater Control System

Installation of piping, ditches/berms, and control structures

##### Quantity

Earthwork = 10,000 CY

Assuming Berms/Ditches are 3 feet deep by 15 feet wide

Earthwork Length = 6000 LF

Stormwater Piping = 300 LF

No. of control structures = 2 EA

##### Unit Cost

Earthwork: Material/installation = \$15.00 /LF Appendix C-1

Stormwater Piping: Material/installation = \$20.00 /LF Appendix C-1

Control structures: Material/installation = \$2,000.00 EA Appendix C-1

#### 7. Gas Controls - Passive

12 probes are proposed for closure

##### Quantity

No. of Probes = 12 EA

Length of Probes = 15 ft/probe

##### Unit Cost

Probe: Material/installation = \$2,000 EA Appendix C-1

#### 8. Gas Controls - Active Extraction

Installation of boots around vents/wells at time of closure (Cells 1 through 3).

##### Quantity

No. of Boots = 10 EA

##### Unit Cost

Synthetic boot: Material/installation = \$500 EA Appendix C-1

#### 9. Security System

Perimeter fencing, gates, and signs to be repaired before closure

Assume lump sum fee of \$5,000

#### 10. Engineering

Include a lump sum fee for each of the following items:

- Closure Plan Report =

	<u>Quantity</u>	<u>Unit Cost</u>
PE Supervisor =	24 hrs	\$120
On-Site Engineer =	0 hrs	\$120
Office Engineer =	40 hrs	\$120
On-Site Technician =	24 hrs	\$75 (Drafting technician)

CARLSON ENVIRONMENTAL CONSULTANTS, PC			
CLIENT	PROJECT	JOB NO.	
WM of Inc. of Florida	Vista Landfill	101.07.07	
SUBJECT FINANCIAL ASSURANCE		BY	DATE
		Lindsey Kennelly	9/7/12
		CHECKED	DATE
		SAN	9/7/12

TOTAL CLOSURE PLAN REPORT = \$9,480

- Certified Engineering Drawings for Closure =

	<u>Quantity</u>	<u>Unit Cost</u>	
PE Supervisor =	40 hrs	\$120	
On-Site Engineer =	0 hrs	\$120	
Office Engineer =	120 hrs	\$120	
On-Site Technician =	80 hrs	\$75	(Drafting technician)
TOTAL CERTIFIED ENGINEERING DRAWINGS =		\$25,200	

- Title V Closure Permit

	<u>Quantity</u>	<u>Unit Cost</u>	
PE Supervisor =	8 hrs	\$120	
On-Site Engineer =	0 hrs	\$120	
Office Engineer =	40 hrs	\$120	
On-Site Technician =	0 hrs	\$75	
TOTAL TITLE V CLOSURE PERMIT =		\$5,760	

- Final Survey =

	<u>Quantity</u>	<u>Unit Cost</u>	
PE Supervisor =	8 hrs	\$120	
On-Site Engineer =	0 hrs	\$120	
Office Engineer =	40 hrs	\$120	
On-Site Technician =	40 hrs	\$75	(Survey technician)
TOTAL FINAL SURVEY =		\$8,760	

- Certification of Closure =

	<u>Quantity</u>	<u>Unit Cost</u>	
PE Supervisor =	40 hrs	\$120	
On-Site Engineer =	0 hrs	\$120	
Office Engineer =	80 hrs	\$120	
On-Site Technician =	40 hrs	\$75	(Drafting technician)
TOTAL CERTIFICATION OF CLOSURE =		\$17,400	

11. Professional Services

Include hourly estimates for Professional Services involved with Closure:

- Contract Management

	<u>Quantity</u>	<u>Unit Cost</u>	
PE Supervisor =	24 hrs	\$120	
On-Site Engineer =	40 hrs	\$120	
Office Engineer =	60 hrs	\$120	
On-Site Technician =	0 hrs	\$75	

- Quality Assurance

	<u>Quantity</u>	<u>Unit Cost</u>	
PE Supervisor =	16 hrs	\$120	
On-Site Engineer =	80 hrs	\$120	
Office Engineer =	40 hrs	\$120	
On-Site Technician =	400 hrs	\$75	

Quality Assurance Testing = \$100,000

12. Contingency

Assume 10% of Closure Costs

13. Site Specific Costs

Mobilization

CARLSON ENVIRONMENTAL CONSULTANTS, PC			
CLIENT	WM of Inc. of Florida	PROJECT	Vista Landfill
		JOB NO.	101.07.07
SUBJECT	FINANCIAL ASSURANCE	BY	Lindsey Kennelly
		CHECKED	SAN
		DATE	9/7/12
		DATE	9/7/12

Mobilization to include 3% of the construction costs (i.e. not No. 10 - Engineering or No. 11 - Professional Services)

Closure Subtotal of Items 1-11 = \$2,177,068  
 Total Item 10 = \$66,600  
 Total Item 11 = \$61,200  
 Closure Subtotal of Items 1-9 = \$2,049,268

Mobilization Cost = \$61,478.03

#### Waste Tire Facility

The site is currently permitted to store a maximum 1,500 tires on site. Assume at closure 1,500 tires are present. Tires are taken to Wheelabrator Ridge Energy, Polk County FL for processing/disposal.

#### Quantity

No. of Tires = 1,500 EA  
 No. of Tires w/ Rims = 750 EA  
 No. of Tires w/out Rims = 750 EA  
 Weight of Tire w/ Rims = 35 lb/EA  
 Weight of Tire w/out Rims = 30 lb/EA  
 Total Weight of Tires w/ Rims = 13.13 tons  
 Total Weight of Tires w/o Rims = 11.25 tons  
 TOTAL WEIGHT = 24.38 tons

#### Unit Cost

Tires w/ Rims = \$125 /ton Appendix C-3  
 Tires w/o Rims = \$70 /ton Appendix C-3  
 Hauling Cost = \$700 /trip Appendix C-3  
 Hauling Limit = 22 tons

Cost of Tires w/ Rims = \$1,640.63  
 Cost of Tires w/o Rims = \$787.50  
 Hauling Cost = \$1,400.00  
 TOTAL WASTE TIRE FACILITY COST = \$3,828.13

#### LONG-TERM CARE COSTS

##### 1. Groundwater Monitoring

18 monitoring wells installed and sampled on a semi-annual basis

#### Quantity

No. of Groundwater Wells = 18 wells

#### Unit Cost

Semi-annual Sampling Costs = \$4,800 /per event See Appendix C-2  
 Semi-annual Analysis Costs = \$5,183 /per event See Appendix C-2  
 Semi-annual Reporting Costs = \$4,500 /per event See Appendix C-2  
 TOTAL SEMI-ANNUAL COST = \$14,483 /per event  
 TOTAL ANNUAL COST = \$28,966 /year

Unit Cost Per Well = \$1,609 annually  
 Unit Cost Per Well = \$805 semi-annually

##### 2. Surface Water

The site does not have a discharge from the 100-year storm event. No surface water monitoring is included.

CARLSON ENVIRONMENTAL CONSULTANTS, PC			
CLIENT	WM of Inc. of Florida	PROJECT	Vista Landfill
		JOB NO.	101.07.07
SUBJECT	FINANCIAL ASSURANCE	BY	Lindsey Kennelly
		CHECKED	SAN
		DATE	9/7/12
		DATE	9/7/12

### 3. Gas Monitoring

12 monitoring probes installed and sampled quarterly

#### Quantity

No. of Gas Probes = 12 probes

#### Unit Cost

##### LABOR COSTS

	<u>Quantity</u>	<u>Unit Cost</u>	
PE Supervisor =	8 hrs	\$120	(2 hours of report review per quarterly event)
On-Site Engineer =	0 hrs	\$120	
Office Engineer =	0 hrs	\$120	
<u>On-Site Technician =</u>	<u>16 hrs</u>	<u>\$75</u>	<u>(4 hours of sampling per quarterly event)</u>
Total Labor Costs =		\$2,160	

##### EQUIPMENT/ANALYSIS COSTS =

Combustible Gas Meter Rental = \$100 /event = \$400

Cost per probe basis = [(Total Labor Costs) + (Total Equipment/Analysis Costs)]/(No. of Probes)/4 quarters =

\$50

### 4. Leachate

Per conversations with FDEP, Vista is no longer required to sample leachate annual.

### 5. Leachate Collection System Maintenance

#### - Leachate Collection Pipes

One cleaning event during the long-term care period

#### Quantity

No. of Collection Pipe Cleaning Events = 1 Event

#### Unit Cost

Clean LCRS Pipe Cost = \$ 3,000 EA

#### - Leachate Pumps

Replace 4 pumps during the long-term care period

#### Quantity

No. of Pumps Replaced = 4 EA

#### Unit Cost

Pump Replacement = \$ 3,000 EA

Extrapolate Cost over 30 Yr Period = \$ 100 EA

#### - Leachate Disposal

#### Quantity

Leachate Volume = 200 gal/yr Per 2007 Leachate Collection System Analysis by Geosyntec Consultants

#### Unit Cost

Leachate treatment costs = \$0.12 /gal for treatment at City WWTP

Disposal Cost = (Leachate Volume)\*(Treatment Cost) =

\$24.00 ~ Assume \$100/year

### 6. Maintenance of Groundwater Monitoring Wells

Abandon and replace 3 groundwater monitoring wells during the long-term care period

CARLSON ENVIRONMENTAL CONSULTANTS, PC			
CLIENT	WM of Inc. of Florida	PROJECT	Vista Landfill
		JOB NO.	101.07.07
SUBJECT	FINANCIAL ASSURANCE	BY	Lindsey Kennelly
		CHECKED	6AN
		DATE	9/7/12
		DATE	9/7/12

Quantity

No. of Groundwater Monitoring Wells = 3 EA

Unit Cost

Abandonment Cost (grouting): Material/Performance = \$500 EA Appendix C-1  
 2-inch Groundwater Monitoring Well: Material/installation = \$2,000 EA Appendix C-1

7. Gas System Maintenance

LABOR COSTS

	<u>Quantity</u>	<u>Unit Cost</u>	
PE Supervisor =	0 hrs	\$120	
On-Site Engineer =	0 hrs	\$120	
Office Engineer =	0 hrs	\$120	
On-Site Technician =	8 hrs	\$75	Annual costs to make misc. repairs (e.g. vent/well repair, lateral repair, etc).
Total Labor Costs =		\$600	

MATERIAL COSTS

Pipe/Material Costs = \$400 annual costs for materials to make misc. repairs

Labor/Material Costs (Included as Operations on form) = \$1,000 Annually

8. Landscape

Quantity

No. of Mowing Events = 1 Events/yr  
 No. of Acres per Event = 26.2 acres/event  
 No. of Acres per Year = 26.16 acres/yr

Unit Cost

Mowing Cost = \$65.00 /acre Appendix C-1

9. Erosion Control and Cover Maintenance

- Sodding

Repair 500 SY of sod on an annual basis

Quantity

Area of Sod to be repaired (S) = 500 SY

Unit Cost

Sod: Material/Installation = \$1.35 /SY Appendix C-1

10. Stormwater Management System Maintenance

Maintain the stormwater conveyance system annually. Assume it takes an on-site technician 12 hours

	<u>Quantity</u>	<u>Unit Cost</u>
PE Supervisor =	0 hrs	\$120
On-Site Engineer =	0 hrs	\$120
Office Engineer =	0 hrs	\$120
On-Site Technician =	12 hrs	\$75
Total Stormwater Costs =		\$900

11. Security System Maintenance

Maintain the security system annually. Assume it takes an on-site technician to do so.

- Fence

Quantity

Unit Cost

CARLSON ENVIRONMENTAL CONSULTANTS, PC			
CLIENT	PROJECT	JOB NO.	
WM of Inc. of Florida	Vista Landfill	101.07.07	
SUBJECT		BY	DATE
FINANCIAL ASSURANCE		Lindsey Kennelly	9/7/12
		CHECKED	DATE
		SAN	9/7/12

PE Supervisor =	0 hrs	\$120
On-Site Engineer =	0 hrs	\$120
Office Engineer =	0 hrs	\$120
On-Site Technician =	12 hrs	\$75
Total Fence Costs =		\$900

- Signs

	Quantity	Unit Cost
PE Supervisor =	0 hrs	\$120
On-Site Engineer =	0 hrs	\$120
Office Engineer =	0 hrs	\$120
On-Site Technician =	4 hrs	\$75
Total Sign Costs =		\$300

12. Utilities

Use current utility costs to conservatively estimate the future utility costs.

Quantity

No. of Utility Events = 12 EA

Unit Cost

Monthly Utility Cost = \$1,020

Annual Utility Costs = \$12,240

13. Leachate Collection/Treatment System Operations

Periodic, weekly inspections

Quantity

Hours per week = 3

Hours per year = 156

Unit Cost

On-site technician hourly rate = \$75 /hour

14. Administrative

Annual administrative/overhead costs

	Quantity	Unit Cost
PE Supervisor =	40 hrs	\$120
On-Site Engineer =	0 hrs	\$120
Office Engineer =	40 hrs	\$120
On-Site Technician =	60 hrs	\$75
Total Administrative Costs =		\$14,100

15. Contingency

Assume 10% of Annual Long-Term Care Costs



**APPENDIX C-1**  
**THIRD PARTY ESTIMATES – ERC**



## ERC GENERAL CONTRACTING SERVICES, INC.

Carter CommerCenter • 890 Carter Road, Suite 170  
Winter Garden, Florida 34787  
(407) 656-3900 • Fax (407) 656-2128

September 12, 2012

RE: Closure Costs

Dear Lindsey Kennelly, PE

The following are current closure costs for work which include offsite and onsite materials.

### CLOSURE COSTS

#### 1. Monitoring Wells:

##### Unit Cost

2-inch Groundwater Monitoring Well: Material/installation = \$2000 ea

#### 2. Slope and Fill:

##### Unit Cost

Placement, Spreading, and Compaction Cost = \$2.10 /cy

Excavation, Hauling On-Site Material cost = \$3.00 /cy

Excavation, Hauling Off-Site Material cost = \$5.00 /cy

#### 3. Cover Material (Barrier Layer)

##### Unit Cost

10<sup>-5</sup> cm/sec clay Material/Installation= \$12.00 /cy

40-mil HDPE textured geomembrane: Material/Installation: \$0.52 /sf

40-mil LLDPE liner: Material/Installation = \$0.46 /sf

Geonet drainage layer: Material/Installation = \$0.25 /sf

Geocomposite drainage layer: Material/Installation = \$0.58 /sf

18-inches soil excavation, placement, and spreading cost = \$3.50 /cy

18-inches soil Material cost = \$5.00 /cy

#### 4. Top Soil cover

##### Unit Cost

6-Inches Excavation, placement, and spreading cost = \$3.50 /cy

6-Inches Material cost = \$2.00 /cy

24-Inches Excavation, placement, and spreading cost = \$3.00 /cy

24-Inches Material cost = \$8.00 /cy

#### 5. Vegetative Layer

##### Unit Cost



Sod: Material and installation cost -	\$1.35	/sy	
Hydroseed: Material and installation cost =	\$0.40	/sy	
Fertilizer: Material and installation cost =	\$0.05	/sy	
6. Stormwater Control System			
<u>Unit Cost</u>			
Earthwork: Material/installation =	\$15	/lf	
18-inch Stormwater Piping: Material/installation =	\$20	/lf	
Control structures: Material/installation =	\$2000	ea	
7. Gas Controls - Passive			
<u>Unit Cost</u>			
2-inch LFG Probe: Material/installation =	\$2000	ea	
8. Gas Controls - Active			
<u>Unit Cost</u>			
Synthetic boots around 6-inch casing: Material/installation =	\$500	ea	
9. Security System			
<u>Unit Cost</u>			
Signs: Material/installation =	\$180	ea	
<b>LONG-TERM CARE COSTS</b>			
5. Leachate Collection System Maintenance			
<u>Unit Cost</u>			
Clean leachate collection system piping cost =	\$3000	ea	
Replace 4 leachate pumps: Material/Installation =	\$3000	ea	
6. Maintenance of Groundwater Monitoring Wells			
<u>Unit Cost</u>			
Abandonment Cost (grouting): Material/Performance =	\$500	ea	
2-inch Groundwater Monitoring Well: Material/installation =	\$2000	ea	
8. Landscape			
Mowing performed quarterly			
<u>Unit Cost</u>			
Mowing Cost =	\$65	/acre	
9. Erosion Control and Cover Maintenance			
<u>Unit Cost</u>			
Sod: Material and installation cost -	\$1.35	/sy	
40-mil LLDPE liner: Material/Installation =	\$0.46	/sf	
Geonet drainage layer: Material/Installation =	\$0.25	/sf	

Sincerely,

Jerry L. Pinder  
President, ERC

**APPENDIX C-2**

**THIRD PARTY ESTIMATE – GROUNDWATER MONITORING COSTS**

## **Vista Groundwater Cost Estimates**

### **1<sup>st</sup> Semi-Annual Event**

*(Based on invoices and scopes provided by third-party consultants)*

- 1) SAMPLING: ProTech = \$4,800
- 2) ANALYSIS: Test America = \$5,183
- 3) REPORTING: SCS = \$4,500

### **2<sup>nd</sup> Semi-annual event**

*(Based on invoices and scopes provided by third-party consultants)*

- 1) SAMPLING: ProTech = \$4,800
- 2) ANALYSIS: Test America = \$6,190
- 3) REPORTING: SCS = \$4,500

**APPENDIX C-3**

**THIRD PARTY ESTIMATE – WASTE TIRE FACILITY**

**Lindsey Kennelly**

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**Subject:** WMIF - 2012 Class III SW Application Financial Assurance

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**From:** Perez, Deborah [mailto:dperez@wm.com]  
**Sent:** Tuesday, September 18, 2012 9:44 AM  
**To:** Bermillo, Paul; Lindsey Kennelly  
**Cc:** 'Seth Nunes'; 'Amy Nunes'; Pelton, Craig; Grant, Sheree  
**Subject:** RE: WMIF - 2012 Class III SW Application Financial Assurance

Vista send their tires to Wheelabrator.

Cost for disposal:

Tires w/rims = \$125.00/ton

Tires w/o rims = \$70.00/ton.

Cost to haul to Wheelabrator from Vista = \$700.00

Get about 22 tons on a truck.