

Board of County Commissioners DEPARTMENT OF PUBLIC WORKS SOLID WASTE MANAGEMENT DIVISION

P.O. Box 340, Lecanto, Florida 34460
Telephone: (352) 527-7670 FAX: (352) 527-7672

email: landfillinfo@bocc.citrus.fl.us TDD Telephone 527-5303

Citrus Springs/Dunnellon/Inglis/Yankeetown area Toll Free (352) 489-2120

July 9, 2007

Dept. of Environmental
Protection

Mr. John Morris, Florida Department of Environmental Protection 13051 N Telecom Pkwy Temple Terrace, FI 33637-0926

JUL 12 2007

Southwest District

RE: WEEKLY LEACHATE MONITORING REPORT FOR CITRUS COUNTY CENTRAL LANDFILL 60 AND 80 ACRE SITES - PERMIT NO. 21375-008-SO/01

Dear Mr. Morris:

Enclosed please find the quarterly Operator's Reports for the months of April, May and June 2007.

The weekly analytical reports are now included with the quarterly report submitted by Jones, Edmunds & Associates for the Landfill. The attached summary is included for reference.

Should further information or clarification be necessary, please do not hesitate to contact me.

Sincerely,

Susan J. Metcalfe Director, Division of

Solid Waste Management

Susan Mutcelf

CC: Michael K. Arnold, Assistant Director, Department of Public Works (w/xls sheet) Susan Pelz, Florida Department of Environmental Protection (w/xls sheet)

CITRUS COUNTY CENTRAL LANDFILL WEEKLY LEACHATE MONITORING

	SAC									
 	Laboratories		MAX	IMUM C	0	NTAMINAT	IT LEVI	EL	BY PERMIT	
	Results		20			10			20	
			CBOD		ĺ	_			SUSPENDED	
	DATE	<	5 day	MG/L	<	NITRATE	MG/L	<	SOLIDS	MG/L
	4/3/07		3.18			2.2			1.5	
	4/11/07		4.57			1.7		<	1.0	
	4/17/07		2.11			3.0		<	1.0	
	4/25/07		5.49			2.0			5.5	
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	5/2/07	T	1.77			3.1			2.0	
	5/9/07		1.77			1.7			3.5	
	5/15/07		3.39			2.2			5.0	
	5/23/07		3.11			2.3			5.0	
	5/30/07		4.74			2.2		<	1.0	
	6/6/07		3.16			0.85			3.0	
	6/13/07		2.63			2.33			4.5	
	6/20/07		5.13			3.2			7.5	
	6/27/07		2.47			4.9			4.5	
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DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

WHEN COMPLETED MAIL THIS REPORT TO:

DEPARTMENT OF ENVIRONMENTAL PROTECTION SOUTHWEST DISTRICT

Solid Waste Section, 3805 Coconut Palm Drive Tampa, FL 33619-8218

PERMITTEE NAME: MAILING ADDRESS:

FACILITY:

LOCATION:

Citrus County Board Of County Commissioners

P.O. Box 340

Lecanto, FL 34460

Central Landfill Leachate Plant

PERMIT NUMBER: 21375-008-SQ/01

WACS FACILTY ID NUMBER: SWD/09/039859

TEST SITE ID NUMBER: WACS 175

MONITORING PERIOD:

From: 6/1 CLASS SIZE: 1-C To: 06/30/2007

230 W. Gulf to Lake Hwy

Lecanto, FL 34461

COUNTY:

Citrus

REPORT: Quarterly GROUP: Solid Waste

Please read instructions before completing this form.

Parameter		Ç	Quantity or Loadin	ıg		Quality or Con-	centration		No. Ex	Frequency of Analysis	Sample Type
		Avg.	Max.	Units	Min.	Avg.	Max.	Units	1		'
Flow, in conduit or thru treatment plant	Sample Measurement	0.007		MGD							
PARM Code 50053	Permit Requirement	Report Mon AVG	030 (3) Month Rolling Average	MGD						Daily	Metered
C OD. 5 day 20 degree C	Sample Measurement					3.3		mg/L			
PARM Code 80082	Permit Requirement					20 (Ma, Avg.)		mg/L		Weekly	Grab
Total Suspended Solids	Sample Measurement					4.9		mg/L			
PARM Code 900201	Permit Requirenient					20 (Mo. Avg.)		mg/L		Weekly	Grah
Nitrate (as N)	Sample Measurement						4.9	mg/L			
PARM Code 071850	Permit Requirement					10.0 (Mo. Avg.)		tng/L		Weekly	Grah
pH	Sample Measurement				7.9		8.5	S.U.			
PARM Code 00500	Permit Requirement				6.5 Min.		8.5 Max.	S.U.		Daily	Grab

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information the possibility of fine and imprisonment

Name/Title of Pricinpal Executi	ve Officer or Authorized Age	Signature of Princip		Telephone No. (include area code)	Date (yy/mm/dd)
· ·	tility Operator II /14117	Derild of	uda.	(352)527-7670	07/06/07

COMMENT AND EXPLANATION OF ANY VIOLATONS (Reference all attatchments here):

^{*} Rolling Annual Average is the average of the current month's average and the preceding 11 monthly averages.

DAILY SAMPLE RESULTS - PART B

Facility: Central Landfill Leachate Plant

PERMIT NUMBER: 21375-008-SO/01

Three-month Average Daily Flow:

Month/Year			-															D-2			age Dan	-		0.4.667						
	7 0/07	Т								 -					, <u>.</u>	Υ					mitted Ca			24.8%		,				
Days of the Month	1	2	3	4	5 .	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	.28	29	30
Flow (MGD)	0.005	0.006	0.008	0.007	0.008	0.008	0.008	0.007	0.008	0.007	0.008	0.007	0.005	0.006	0.007	0.007	0.007	0.000	0.006	0.008	0.009	0.010	0.008	0.009	0.007	0.009	0.009	0.009	0.010	0.010
PARM Code 50053		i		}																							İ			
CBOD5 Effluent (nig/L as O2)						3.2]			2.6					ļ			5.1							2.5			
PARM Code 80082	↓	L					L											<u> </u>	<u> </u>								<u> </u>			
TSS Effluent (mg/L)					1	3.0	1		1		1	4.5					1	-	1	7.5	1			İ			4.5			
PARM Code 900201		ļ			!						L					<u> </u>			ļ		L									· ·
Nitrate (as N) (mg/L)		i				0.9						2.3			ĺ				ĺ	3.2		ļ					4.9			
PARM Code 071850	 	<u> </u>									<u> </u>		<u> </u>			<u> </u>	ļ	ļ				<u> </u>		ļ		ļ <u>.</u>				
pH Effuent (standard units)	8.4	8.3	8.3	8.3	8.4	8.4	8.4	8.4	8.5	8.1	8.1	8.4	8.2	8.2	8.2	8.4	8.2		8.2	8.1	7.9	7.9	8.2	8.2	8.3	8.2	8.4	8.4	8.3	8.3
PARM Code 00500	-	 	-		-											-	-	-		<u> </u>	-			ļ			-			
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PLANT STAFFING:

Day Shift Operator

Class: B

Certificate No.:

14117

Name: Gerald Nusbaum

Evening Shift Operator Night Shift Operator

Class:

Certificate No.:

Name:

Class:

Certificate No.:

Name:

Lead Operator

Class: B

Certificate No.:

Type of Effluent Disposal or Reclaimed Water Reuse:

Limited Wet Weather Discharge Activated :

Yes:

13057

Name: Gary Loggins

Perc. Pond

No: * Attatch additional sheets if necessary to list all certified operators.

Not applicable: X

MOR 2007.xls JUNE

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

WHEN COMPLETED MAIL THIS REPORT TO:

DEPARTMENT OF ENVIRONMENTAL PROTECTION SOUTHWEST DISTRICT

Solid Waste Section, 3805 Coconut Palm Drive Tampa, FL 33619-8218

PERMITTEE NAME:

Citrus County Board Of County Commissioners

MAILING ADDRESS:

P.O. Box 340

Lecanto, FL 34460

Lecanto, FL 34461

Central Landfill Leachate Plant

230 W. Gulf to Lake Hwy

WACS FACILTY ID NUMBER: SWD/09/039859 TEST SITE ID NUMBER: WACS 175

MONITORING PERIOD:

From: 5/1

PERMIT NUMBER: 21375-008-SO/01

To: 05/31/2007

CLASS SIZE: 1-C

REPORT: Quarterly GROUP: Solid Waste

COUNTY:

FACILITY:

LOCATION:

Citrus

Please read instructions before completing this form

							r iease read ins	tructi <u>ons before</u>	completing this	iorm.	
Parameter		(Quantity or Loadii	ng .	_	Quality or Con	centration		No. Ex	Frequency of Analysis	Sample Type
<u> </u>		Avg.	Max.	Units	Min.	Avg.	Max.	Units			
Flow, in conduit or thru											
treatment plant	Sample Measurement	0.006		MGD							
PARM Code 50053	Permit Requirement	Report Mon AVG	030 (3) Month Rolling Average	MGD						Daily	Metered
C OD. 5 day 20 degree C	Sample Measurement					3.3		mg/L			
PARM Code 80082	Permit Requirement					20 (Ma. Avg.)		mg/L		Weekly	Grab
Total Suspended Solids	Sample Measurement					3.6		mg/L			
PARM Code 900201	Permit Requirement					20 (Mo: Avg.)		mg/L		Weekly	Grab
Nitrate (as N)	Sample Measurement					·	3.1	mg/L			
PARM Code 071850	Permit Requirement					10:0 (Mo: Avg.)		mg/L		Weekly	Grah
рН	Sample Measurement				7.8		8.5	S.U.			
PARM Code 00500	Permit Requirement				6.5 Min.		8.5 Max.	s.t.		Daily	Grab

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information the possibility of fine and imprisonment

Name/Title of Pricinpal	Executive Officer or Authorized Ag	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Gerald Nusbaum	Utility Operator II	04 11 1	(352)527-7670	07/15/07
	B/14117	Neight 1 Justin		

COMMENT AND EXPLANATION OF ANY VIOLATONS (Reference all attachments here);

^{*} Rolling Annual Average is the average of the current month's average and the preceding 11 monthly averages.

DAILY SAMPLE RESULTS - PART B

Facility: Central Landfill Leachate Plant

PERMIT NUMBER: 21375-008-SO/01

Three-month Average Daily Flow:

Month/Year	r: 5/07																	Dai	ly Flow %	6 of Pern	nitted Cap	pacity:		21.1%	n .						
. Days of the Month		2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Flow (MGD) PARM Code 50053	0.008	0.007	0.007	0.007	0.007	0.008	0.000	0,006	0.007	0.006	0.007	0.007	0.007	0.007	0.007	0.007	0.007	0.007	0.007	0.007	0.007	0.007	0.005	0.005	0.005	0.005	0.006	0.005	0.005	0.005	0.006
CBOD5 Effluent (mg/L as O2) PARM Code 80082		1.8	,						1.8						3.4								3.1							4.7	
TSS Effluent (mg/L) PARM Code 900201		2.0							3.5						5.0								5.0					Ι.		1.0	
Nitrate (as N) (mg/L) PARM Code 071850		3.1							1.7						2.2								2.3							2.2	
pH Effuent (standard units) PARM Code 00500	8.3	8.1	7.8	7.8	7.8	7.8		8.0	8.0	8.1	8.2	8.2	8,5	8,1	8.2	8,2	8.2	8,3	8.4	8.3	8.4	8.4	8.2	8.2	8.3	8.2	8.4	8.3	8.3	8.1	8.1
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PLANT STAFFING:

Day Shift Operator Evening Shift Operator Night Shift Operator

Lead Operator

Class: Class:

Class: B

Class: B

Certificate No.:

14117

Name: Gerald Nusbaum

Certificate No.: Certificate No.: Name: Name:

Certificate No.:

Name: Gary Loggins

Type of Effluent Disposal or Reclaimed Water Reuse:

Perc. Pond

13057

Limited Wet Wenther Discharge Activated :

No:

Yes:

Not applicable: X

* Attatch additional sheets if necessary to list all certified operators.

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

WHEN COMPLETED MAIL THIS REPORT TO:

DEPARTMENT OF ENVIRONMENTAL PROTECTION SOUTHWEST DISTRICT

Solid Waste Section, 3805 Coconut Palm Drive Tampa, FL 33619-8218

PERMITTEE NAME:

Citrus County Board Of County Commissioners

MAILING ADDRESS:

P.O. Box 340

Lecanto, FL 34460

PERMIT NUMBER: 21375-008-SO/01

WACS FACILTY ID NUMBER: SWD/09/039859

TEST SITE ID NUMBER: WACS 175

MONITORING PERIOD:

From: 4/1

To: 4/30/2007

CLASS SIZE: 1-C

REPORT: Quarterly

GROUP: Solid Waste

COUNTY:

FACILITY:

LOCATION:

Lecanto, FL 34461

Central Landfill Leachate Plant

230 W. Gulf to Lake Hwy

Citrus

Please read instructions before completing this form

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Parameter		Q	uantity or Loadin	g		Quality or Con	centration		No. Ex	Frequency of Analysis	Sample Type
	1327	Avg.	Max.	Units	Min.	Avg.	Max.	Units	7	,	
Flow, in conduit or thru treatment plant	Sample Measurement	0.007		MGD							
PARM Code 50053	Permit Requirement	Report Mon AVG.	.030 (3) Month Rolling Average	MGD	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1882 J				Daily	Metered
CBOD. 5 day 20 degree C	Sample Measurement	·				3.8		mg/L			
PARM Code 80082	Permit Requirement					20 (Mo. Avg.)		mg/L		Weekly	Grab
Total Suspended Solids	Sample Measurement					2.3		mg/L		. !	
PARM Code 900201	Permit Requirement					20 (Mo. Avg.)		mg/L		Weekly	Grab
Nitrate (as N)	Sample Measurement						3.0	mg/L			
PARM Code 071850	Permit Requirement		The Service Color			10.0 (Mo. Avg.)		mg/L		Weekly	Grab
pH	Sample Measurement	·			7.9		8.5	S.U.			
PARM Code 00500	Permit Requirement				6.5 Min.		8.5 Max.	S. U.		Daily	Gråb

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true accurate and complete. Lam aware that there are significant penalties for submitting false information the possibility of fine and imprisonment

T Deneve the sublineted	miormation is true, accurate, and	complete. I am aware to	iat there are significant penastics for subini	tung laise mormation the possibility of time	and miprisonnent
Name/Title of Pricinpa	d Executive Officer or Authorized	Age Signature of Princip	A Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Gerald Nusbaum	Utility Operator II	ull		(352)527-7670	07/12/07
	B/14117	1 Jerel Or 7	1 yellow		

COMMENT AND EXPLANATION OF ANY VIOLATONS (Reference all attatchments here):

^{*} Rolling Annual Average is the average of the current month's average and the preceding 11 monthly averages.

DAILY SAMPLE RESULTS - PART B

Facility: Central Landfill Leachate Plant

PERMIT NUMBER: 21375-008-SO/01

Three-month Average Daily Flow:

Month/Year	: 4/07																	Dail	ly Flow %	6 of Perm	itted Cap	acity:		23.4%						
Days of the Month	1	2	3	4	5	6	7	8	9	10	Ш	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
Flow (MGD) PARM Code 50053	0.006	0.006	0.007	0.007	0.006	0.005	0.005	0.005	0.005	0.006	0.009	0.009	0.008	0.008	0.008	0.007	0.007	0.007	0.008	0.008	0.007	0.007	0.008	0.007	0.007	0.007	0.007	0.008	0.008	0.007
CBOD5 Effluent (mg/L as O2) PARM Code 80082			3.2								4.6						2.1			•					5.5					
TSS Effluent (mg/L) PARM Code 900201			1.5								1.0						1.0								5.5					· ·
Nitrate (as N) (mg/L) PARM Code 071850			2.2								1.7 .						3.0	,							2.0					
pH Effuent (standard units) PARM Code 00500	8.0	8.0	8.1	8.0	8.0	8.0	8.1	8.0	8.0	8.3	8.4	8.5	8.3	8.1	8.3	7.9	7.9	8.3	8,3	8.4	8.2	7.9	7.9	7.9	8.0	8.0	1.8	8.1	8.0	8.0
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PLANT STAFFING:

Day Shift Operator Evening Shift Operator Class: B Class:

Certificate No.:

14117

Name: Gerald Nusbaum

Certificate No.:

13057

Night Shift Operator Class: Lead Operator Class: B

Certificate No.: ' Certificate No.:

Name: Name: Gary Loggins

Name:

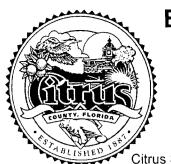
Type of Effluent Disposal or Reclaimed Water Reuse:

Limited Wet Weather Discharge Activated :

Perc. Pond

Not applicable: X

* Attatch additional sheets if necessary to list all certified operators.



Board of County Commissioners DEPARTMENT OF PUBLIC WORKS SOLID WASTE MANAGEMENT DIVISION

P.O. Box 340, Lecanto, Florida 34460 Telephone: (352) 527-7670 FAX: (352) 527-7672

> email: landfillinfo@bocc.citrus.fl.us TDD Telephone 527-5303

Citrus Springs/Dunnellon/Inglis/Yankeetown area Toll Free (352) 489-2120

July 9, 2007

Dept. of Environmental Protection

Mr. John Morris, Florida Department of Environmental Protection 13051 N Telecom Pkwy Temple Terrace, Fl 33637-0926

JUL 12 2007

Southwest District

RE: WEEKLY LEACHATE MONITORING REPORT FOR CITRUS COUNTY CENTRAL LANDFILL 60 AND 80 ACRE SITES - PERMIT NO. 21375-008-SO/01

Dear Mr. Morris:

Enclosed please find the quarterly Operator's Reports for the months of April, May and June 2007.

The weekly analytical reports are now included with the quarterly report submitted by Jones, Edmunds & Associates for the Landfill. The attached summary is included for reference.

Should further information or clarification be necessary, please do not hesitate to contact me.

Sincerely, Susan Multaff

Susan J. Metcalfe

Director, Division of

Solid Waste Management

CC: Michael K. Arnold, Assistant Director, Department of Public Works (w/xls sheet)
Susan Pelz, Florida Department of Environmental Protection (w/xls sheet)

CITRUS COUNTY CENTRAL LANDFILL WEEKLY LEACHATE MONITORING

	SAC	Ti	1							
	Laboratories		MAX	IMUM (o	NTAMINAT	IT LEVI	ĒL	BY PERMIT	
	Results		20			10			20	
			CBOD						SUSPENDED	
	DATE	<	5 day	MG/L	<	NITRATE	MG/L	<	SOLIDS	MG/L
										_
	4/3/07		3.18			2.2			1.5	
	4/11/07		4.57			1.7		<	1.0	
·	4/17/07		2.11			3.0		<	1.0	
	4/25/07		5.49			2.0			5.5	
	•									
	5/2/07		1.77			3.1			2.0	
	5/9/07		1.77			1.7			3.5	
	5/15/07		3.39			2.2			5.0	
	5/23/07		3.11			2.3			5.0	
	5/30/07		4.74			2.2		<	1.0	
	6/6/07		3.16			0.85			3.0	
	6/13/07		2.63			2.33			4.5	
	6/20/07		5.13			3.2			7.5	
	6/27/07		2.47			4.9			4.5	
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FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

JUL 12 2007

SOUTHWEST DISTRICT TAMPA