

PERMIT DATA FORM

CHECK IF NEW: _____

MOD ☒ **NEW** ☐ **RENEWAL** _____

SITE WAFR # AIR # SC49-0199726-020

SITE/WAFER/FACILITY NAME Oak Hammock Disposal Fac

PROJECT NAME: JED

DESC: _____

TYPE CODE: SC

SUBCODE: mm

CHECK IF GP ☐ **EXEMPT** ☐ **NPDES** ☐

CORRECT FEE: 250 -

PROCESSOR: K. Rush

AMOUNT RCV'D: 250 -

WACS # 89544

AMOUNT REFUND: -

MONIES DUE: -

RED ___ YELLOW ___ GREEN ___ NO PERMIT REQ ___

HISTORY SHEET

SITE/WAFR/AIR#: 49-019726-020 TYPE: SC SUBTYPE: MM

SITE/WAFR/APP

NAME:

PROJECT

NAME:

[illegible]

consultants

To: Mr. F. Thomas Lubozynski, P.E.
FDEP Solid & Haz. Waste, Central Dist.
3319 Maguire Boulevard, Suite 232
Orlando, Florida 32803-3767
phone: (407) 893-3327

Date	16-Aug-11	Job No.	FL1970
Attention	Mr. Thomas Lubozynski		
Re:	Minor Modification Permit Application JED Solid Waste Management Facility		

RECEIVED
AUG 17 2011
DEP Central Dist.

These are transmitted as checked below:

☐ **Return** **corrected prints**

Remarks

Signed *Victor M. Damasceno, Ph.D., P.E.*

THE FACE OF THIS DOCUMENT HAS A COLORED BACKGROUND ON WHITE PAPER - THE BACK CONTAINS AN ARTIFICIAL WATERMARK - HOLD AT AN ANGLE TO VIEW

IESI Corporation

2301 Eagle Parkway, Suite 200
Fort Worth, TX 76177

(817) 632-4000

Fleet Maine, N.A.
South Portland, ME
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Check # 101918453

Check Date

7/26/2011

Check Amount

*****\$250.00

** Void after 120 days **

** Not valid over \$50,000 without two manual signatures **

Two Hundred Fifty and 00/100-----

USD

**PAY TO THE
ORDER OF**

FLORIDA DEPT OF ENVIRONMENTAL PROTEC

Stephen Moody

Authorized Signature

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Geosyntec[®]

consultants

13101 Telecom Drive, Suite 120
Tampa, FL 33637
PH 813-558-0990
FAX 813-558-9726
www.geosyntec.com

16 August 2011

Mr. Thomas Lubozynski, P.E.
Waste Program Administrator
Florida Department of Environmental Protection
Central District Office
3319 Maguire Boulevard, Suite 232
Orlando, Florida 32803-3767

RECEIVED

AUG 17 2011

DEP Central Dist.

Subject: Minor Modification Permit Application
FDEP Permit No. SC49-0199726-017
J.E.D. Solid Waste Management Facility (WACS #89544)
Class I – Lateral Expansion Construction
Osceola County, Florida

Dear Mr. Lubozynski:

Geosyntec Consultants (Geosyntec) prepared this minor modification permit application on behalf of Omni Waste of Osceola County, LLC (Omni) for the J.E.D. Solid Waste Management Facility (JED facility) located in St. Cloud, Florida. This minor modification permit application is prepared in accordance with applicable sections of Chapter 62-701 of the Florida Administrative Code (FAC) and the Florida Department of Environmental Protection (FDEP) Form 62-701.900(1) – *Application to Construct, Operate, Modify, or Close a Solid Waste Management Facility*, completed and included in **Attachment 1** of this submittal. This minor modification permit application was also prepared in accordance with discussions held between Waste Services, Inc. (WSI), Geosyntec, and the FDEP during a meeting on 11 July 2011.

A check in the amount of \$250 (in accordance with Rule 62-701.315(4), F.A.C.) and FDEP Form 62-701.900(1) are submitted herein.

BACKGROUND

The JED facility is currently operating under construction and operation Permit Nos. SC49-0199726-004 and SO49-0199726-005, respectively, issued by the FDEP in March 2007. The 5-year construction and operation permits expire in January 2012. These permits authorize the construction and operation of Phases 1 through 3, which consists of Cells 1 through 10. To date, Cells 1 through 7 of the JED Facility have been constructed.

In February 2011, Geosyntec submitted a Major Modification Permit Application entitled "*Landfill Lateral Expansion – Application for a Major Permit Modification*" (2011

Mr. Thomas Lubozynski
16 August 2011
Page 2

Lateral Expansion) to laterally expand the waste landfill footprint to approximately 363 acres while maintaining the current permitted maximum elevation of 330 feet (NGVD). The 2011 Lateral Expansion also included design changes to Phases 4 and beyond, which encompasses Cells 11 through 23.

PURPOSE

On 15 June 2011, FDEP issued a notice of application completion for Permit Application No. SC49-0199726-017, which incorporates the lateral expansion modifications and Cells 11 through 23. As indicated during the 11 July 2011 meeting, FDEP intends to issue Permit No. SC49-0199726-017 by 20 September 2011 (assuming no comments are received).

At present, Cells 8, 9, and 10 (currently included in construction Permit No. SC49-0199726-004 which expires in January 2012) have not yet been constructed. As such, the purpose of this minor modification application is to request that the construction of Cells 8 through 10 be transferred from Permit No. SC49-0199726-004 and incorporated into construction Permit No. SC49-0199726-017, which will expire in 2017.

PERMIT MINOR MODIFICATION APPLICATION

Geosyntec has completed FDEP Form No. 62-701.900(1) – *Application to Construct, Operate, Modify, or Close a Solid Waste Management Facility*, which is included in **Attachment 1** of this submittal. The permit application is duly certified by the applicant and a professional engineer registered in the State of Florida.

Relevant details of Cells 8 through 10 construction including the engineering report, permit drawings, technical specifications, and Construction Quality Assurance Plan are not proposed to change from the approved documents currently on file with FDEP. In addition, the Financial Assurance Deferral cost estimate form (No. 62-701.900(28), F.A.C.), which covered Cells 8 through 23 was submitted to FDEP as part of Response to Request for Additional Information #2 for the 2011 Lateral Expansion in a letter dated 18 May 2011.

Mr. Thomas Lubozynski
16 August 2011
Page 3

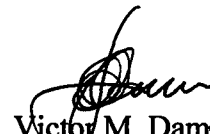
CLOSURE

If you have any questions or need additional information, please do not hesitate to contact either of the undersigned.

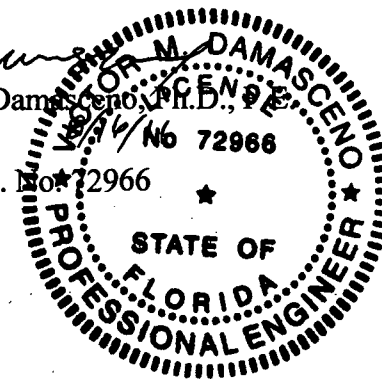
Sincerely,



Craig R. Browne, P.E.
Project Engineer



Victor M. Damasceno, Ph.D., P.E.
Engineer
Florida P.E. No. 72966



Attachment:

Copies to: Michael Kaiser, WSI

FL1970\2011 Minor Modification.doc

engineers | scientists | innovators

ATTACHMENT 1
FDEP Form 62-701.900(1)



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

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
813-632-7800

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

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 type="checkbox"/> Intermediate Modification |
| | <input checked="" type="checkbox"/> Minor Modification |

4. Facility name: J.E.D. Solid Waste Management Facility

5. DEP ID number: 89544 (WACS) County: Osceola

6. Facility location (main entrance):
1501 Omni Way, St. Cloud, FL 34773

7. Location coordinates:

Section: 11,13,14,17, & 18 Township: 28S Range: 32E & 33E

Latitude: 28° 3' 32" Longitude: 81° 5' 46"

Datum: WGS84 Coordinate Method: DGPS

Collected by: Johnston's Surveying Company/Affiliation: Johnston's Surveying

8. Applicant name (operating authority): Omni Waste of Osceola County, LLC
- Mailing address: 1501 Omni Way St. Cloud FL 34773
Street or P.O. Box City State Zip
- Contact person: Michael Kaiser Telephone: (904) 673-0446
- Title: Regional Engineer
- MKaiser@wasteservicesinc.com
E-Mail address (if available)
9. Authorized agent/Consultant: Geosyntec Consultants
- Mailing address: 13101 Telecom Drive, Suite 120 Temple Terrace FL 33637
Street or P.O. Box City State Zip
- Contact person: Victor M. Damasceno, Ph.D., P.E. Telephone: (813) 558-0990
- Title: Engineer
- vdamasceno@geosyntec.com
E-Mail address (if available)
10. Landowner (if different than applicant): N/A
- 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:
Primarily Osceola, Brevard, Indian River, Okeechobee, Orange, Polk, Volusia, Sumter, Lake, Seminole, Pasco, Hillsborough, Hardee, and Highlands Counties. Other Florida counties are served as waste streams are available.
- _____
- _____
12. Population to be served:
Current: 5,800,000 (approx.) Five-Year Projection: 6,000,000 (approx.)
13. Date site will be ready to be inspected for completion: Spring 2012 (for Cell 8 construction)
14. Expected life of the facility: 23 years
15. Estimated costs: (Estimated costs correspond to construction and corresponding closing for the 272.7-acre Cells 8 through 23 area)
Total Construction: \$ 68200000 Closing Costs: \$ 29400000
16. Anticipated construction starting and completion dates:
From: 10/1/2011 To: 10/1/2034
17. Expected volume or weight of waste to be received:
_____ yds³/day 6,000 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 minor modification application is being submitted to transfer construction of Phase 3 (Cells 8-10) from
existing Permit No. SC49-0199726-004 to Permit No. SC49-0199726-017. Permit No. SC49-0199726-017
covers construction of Cells 11 through 23. This permit modification is prepared to incorporate construction
of Cells 8-10 into Permit No. SC49-0199726-017.

2. Facility site supervisor: Matt Orr

Title: Site Manager Telephone: (407) 891-3720

morr@wasteservicesinc.com

E-Mail address (if available)

3. Disposal area: Total 363 acres; Used 89 acres; Available 274 acres.

4. Weighing scales used: ☒ Yes ☐ No

5. Security to prevent unauthorized use: ☒ Yes ☐ No

6. Charge for waste received: _____ \$/yds³ 35 \$/ton

7. Surrounding land use, zoning:

☐ Residential

☐ Industrial

☒ Agricultural

☐ None

☐ Commercial

☐ Other Describe:

8. Types of waste received:

☒ Household

☒ C & D debris

☒ Commercial

☒ 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:
Waste tires, auto shredder waste, and industrial liquid waste for solidification.

9. Salvaging permitted: ☐ Yes ☒ No

10. Attendant: ☒ Yes ☐ No Trained operator: ☒ Yes ☐ No

11. Trained spotters: ☒ Yes ☐ No Number of spotters used: Minimum of 1 per work face

12. Site located in: ☒ Floodplain ☒ Wetlands ☐ Other:

13. Days of operation: Monday thru Sunday

14. Hours of operation: Mon-Fri: 5am to 4pm, Sat: 6am to 12pm, Sun: 6am to 10am

15. Days Working Face covered: each working day

16. Elevation of water table: 79 ft. Datum Used: NGVD 1929

17. Number of monitoring wells: 63

18. Number of surface monitoring points: 2

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 (Cells 5 thru 23)
☐ Single geomembrane ☒ Double composite (Cells 1 thru 4)
☐ Single composite ☐ None
☐ Slurry wall ☐ Other Describe:
A GCL layer is provided below primary geomembrane liner in the sump area in Cells 5 through 23.

21. Leachate collection method:

- | | |
|------------------------------------------------------------|------------------------------------------------|
| <input checked="" type="checkbox"/> Collection pipes | <input checked="" type="checkbox"/> Sand layer |
| <input checked="" type="checkbox"/> Geonets (geocomposite) | <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: | |

22. Leachate storage method:

- | | |
|------------------------------------------|-------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Tanks | <input checked="" type="checkbox"/> Surface impoundments with flexible storage containers |
| <input type="checkbox"/> Other Describe: | |

23. Leachate treatment method:

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

Oxidation performed through aeration in the uncovered Cell 2 of the leachate storage area. Cells 1, 3, and 4 are covered with no oxidation activity.

24. Leachate disposal method:

- | | |
|---------------------------------------------------------|--------------------------------------------------------------|
| <input checked="" type="checkbox"/> Recirculated | <input type="checkbox"/> Pumped to WWTP |
| <input checked="" 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 | |

25. For leachate discharged to surface waters:

Name and Class of receiving water:

N/A

26. Storm Water:

Collected: ☒ Yes ☐ No

Type of treatment:

Dry and wet retention for landfill and dry retention for access road.

Name and Class of receiving water:

Bull Creek, Class III

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

Current ERP Numbers are ERP49-0199752-001-EI (Phase 1 Individual), ERP49-0199752-002-EI (Conceptual), ERP-49-0199752-003-EI (Phase 2 Individual), and ERP49-0199752-004-EM (Phase 3 Individual).

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 checked="" type="checkbox"/>	<input 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)

<u>S</u>	<u>LOCATION</u>	<u>N/A</u>	<u>N/C</u>
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DEP FORM 62-701.900(1)
Effective January 6, 2010

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 type="checkbox"/> | <input checked="" 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;

<u>S</u>	<u>LOCATION</u>	<u>N/A</u>	<u>N/C</u>
----------	-----------------	------------	------------

PART E CONTINUED

<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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d. The source and type of cover material used for the landfill.

<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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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"/>
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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)

<u>S</u>	<u>LOCATION</u>	<u>N/A</u>	<u>N/C</u>
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<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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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"/>
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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)

<u>S</u>	<u>LOCATION</u>	<u>N/A</u>	<u>N/C</u>
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<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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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"/>
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2. Landfill liner requirements; (62-701.400(3),FAC)

<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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a. General construction requirements; (62-701.400(3)(a),FAC):

<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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(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;

PART G CONTINUED

S LOCATION N/A N/C

☐ _____ ☐ ☒

(2) Document foundation is adequate to prevent liner failure;

☐ _____ ☐ ☒

(3) Constructed so bottom liner will not be adversely impacted by fluctuations of the ground water;

☐ _____ ☐ ☒

(4) Designed to resist hydrostatic uplift if bottom liner located below seasonal high ground water table;

☐ _____ ☐ ☒

(5) Installed to cover all surrounding earth which could come into contact with the waste or leachate.

☐ _____ ☐ ☒

b. Composite liners; (62-701.400(3)(b),FAC)

☐ _____ ☐ ☒

(1) Upper geomembrane thickness and properties;

☐ _____ ☐ ☒

(2) Design leachate head for primary LCRS including leachate recirculation if appropriate;

☐ _____ ☒ ☐

(3) Design thickness in accordance with Table A and number of lifts planned for lower soil component.

☐ _____ ☐ ☒

c. Double liners; (62-701.400(3)(c),FAC)

☐ _____ ☐ ☒

(1) Upper and lower geomembrane thicknesses and properties;

☐ _____ ☐ ☒

(2) Design leachate head for primary LCRS to limit the head to one foot above the liner;

☐ _____ ☐ ☒

(3) Lower geomembrane sub-base design;

☐ _____ ☐ ☒

(4) Leak detection and secondary leachate collection system minimum design criteria ($k \geq 10$ cm/sec, head on lower liner ≤ 1 inch, head not to exceed thickness of drainage layer);

☐ _____ ☐ ☒

d. Standards for geosynthetic components; (62-701.400(3)(d),FAC)

PART G CONTINUED

<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) 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;

PART G CONTINUED

<u>S</u>	<u>LOCATION</u>	<u>N/A</u>	<u>N/C</u>	
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(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;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(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;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(5) Geotextile and geogrid specifications including handling and placement, conformance testing, seams and overlaps, repair, and placement of soil materials and any overlying materials;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(6) Geonet and geocomposite specifications including handling and placement, conformance testing, stacking and joining, repair, and placement of soil materials and any overlying materials;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(7) Geosynthetic clay liner specifications including handling and placement, conformance testing, seams and overlaps, repair, and placement of soil material and any overlying materials;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	f. Standards for soil liner components (62-710.400(3)(f),FAC):
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(1) Description of construction procedures including overexcavation and backfilling to preclude structural inconsistencies and procedures for placing and compacting soil component in layers;
<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(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;
<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(3) Procedures for testing in-situ soils to demonstrate they meet the specifications for soil liners;

PART G CONTINUED

<u>S</u>	<u>LOCATION</u>	<u>N/A</u>	<u>N/C</u>	
<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;

PART G CONTINUED

<u>S</u>	<u>LOCATION</u>	<u>N/A</u>	<u>N/C</u>	
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(3) Have granular material or synthetic geotextile to prevent clogging;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(4) Have method for testing and cleaning clogged pipes or contingent designs for rerouting leachate around failed areas;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	b. Other LCRS requirements; (62-701.400(4)(b) and (c),FAC)
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(1) Bottom 12 inches having hydraulic conductivity $\geq 1 \times 10^{-3}$ cm/sec;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(2) Total thickness of 24 inches of material chemically resistant to the waste and leachate;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(3) Bottom slope design to accommodate for predicted settlement and still meet minimum slope requirements;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(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.
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	4. Leachate recirculation; (62-701.400(5),FAC)
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	a. Describe general procedures for recirculating leachate;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	b. Describe procedures for controlling leachate runoff and minimizing mixing of leachate runoff with storm water;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	c. Describe procedures for preventing perched water conditions and gas buildup;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	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;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	e. Describe methods of gas management in accordance with Rule 62-701.530, FAC;

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

PART G CONTINUED

<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	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.
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	5. Leachate storage tanks and leachate surface impoundments; (62-701.400(6), FAC)
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	a. Surface impoundment requirements; (62-701.400(6)(b), FAC)
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(1) Documentation that the design of the bottom liner will not be adversely impacted by fluctuations of the ground water;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(2) Designed in segments to allow for inspection and repair as needed without interruption of service;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(3) General design requirements;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(a) Double liner system consisting of an upper and lower 60-mil minimum thickness geomembrane;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(b) Leak detection and collection system with hydraulic conductivity ≥ 1 cm/sec;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(c) Lower geomembrane placed on subbase ≥ 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;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(d) Design calculation to predict potential leakage through the upper liner;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(e) Daily inspection requirements and notification and corrective action requirements if leakage rates exceed that predicted by design calculations;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(4) Description of procedures to prevent uplift, if applicable;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(5) Design calculations to demonstrate minimum two feet of freeboard will be maintained;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(6) Procedures for controlling vectors and off-site odors.

PART G CONTINUED

S LOCATION N/A N/C

- | | | | | |
|--------------------------|-------|-------------------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | b. Above-ground leachate storage tanks; (62-701.400(6)(c),FAC) |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | (1) Describe tank materials of construction and ensure foundation is sufficient to support tank; |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | (2) Describe procedures for cathodic protection if needed for the tank; |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | (3) Describe exterior painting and interior lining of the tank to protect it from the weather and the leachate stored; |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | (4) Describe secondary containment design to ensure adequate capacity will be provided and compatibility of materials of construction; |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | (5) Describe design to remove and dispose of stormwater from the secondary containment system; |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | (6) Describe an overfill prevention system such as level sensors, gauges, alarms and shutoff controls to prevent overfilling; |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (7) Inspections, corrective action and reporting requirements; |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (a) Overfill prevention system weekly; |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (b) Exposed tank exteriors weekly; |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (c) Tank interiors when tank is drained or at least every three years; |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (d) Procedures for immediate corrective action if failures detected; |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (e) Inspection reports available for department review. |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | c. Underground leachate storage tanks; (62-701.400(6)(d),FAC) |

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

PART G CONTINUED

- | | | | | |
|--------------------------|-------|-------------------------------------|-------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | (1) Describe materials of construction; |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | (2) A double-walled tank design system to be used with the following requirements; |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | (a) Interstitial space monitoring at least weekly; |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | (b) Corrosion protection provided for primary tank interior and external surface of outer shell; |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | (c) Interior tank coatings compatible with stored leachate; |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | (d) Cathodic protection inspected weekly and repaired as needed; |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | (3) Describe an overfill prevention system such as level sensors, gauges, alarms and shutoff controls to prevent overfilling and provide for weekly inspections; |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | (4) Inspection reports available for department review. |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | d. Schedule provided for routine maintenance of LCRS; (62-701.400(6)(e), FAC) |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 6. Liner systems construction quality assurance (CQA); (62-701.400(7), FAC) |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | a. Provide CQA Plan including: |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (1) Specifications and construction requirements for liner system; |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (2) Detailed description of quality control testing procedures and frequencies; |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (3) Identification of supervising professional engineer; |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (4) Identify responsibility and authority of all appropriate organizations and key personnel involved in the construction project; |

<u>S</u>	<u>LOCATION</u>	<u>N/A</u>	<u>N/C</u>	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 type="checkbox"/>	<input checked="" type="checkbox"/>	7. Soil Liner CQA (62-701.400(8)FAC)
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input checked="" type="checkbox"/>	b. Description of field test section construction and test methods to be implemented prior to liner installation;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" 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)

PART K CONTINUED

<u>S</u>	<u>LOCATION</u>	<u>N/A</u>	<u>N/C</u>	
<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.

PART K CONTINUED

<u>S</u>	<u>LOCATION</u>	<u>N/A</u>	<u>N/C</u>	
<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; (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 type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" 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; (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

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|--------------------------|-------|--------------------------|-------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <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;
(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 type="checkbox"/>	<input checked="" type="checkbox"/>	(9) Detailed description of detection sensors if proposed.
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	d. Surface water monitoring requirements; (62-701.510(4),FAC)

PART L CONTINUED

S LOCATION N/A N/C

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|--------------------------|-------|--------------------------|-------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" 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 type="checkbox"/> | <input checked="" 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 type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input checked="" type="checkbox"/>	4. Describe procedures for disposal or management of contaminated soil; (62-701.520(4), FAC)
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1. Provide the design for a gas management system that will (62-701.530(1), FAC):
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	b. Be designed for site-specific conditions;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	c. Be designed to reduce gas pressure in the interior of the landfill;
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	d. Be designed to not interfere with the liner, leachate control system or final cover.
<input type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input checked="" type="checkbox"/>	4. Landfill gas recovery facilities; (62-701.530(5), FAC):

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

PART N CONTINUED

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|--------------------------|-------|-------------------------------------|-------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" 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 type="checkbox"/> | <input checked="" type="checkbox"/> | c. Estimate of current and expected gas generation rates and description of condensate disposal methods provided; |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | d. Description of procedures for condensate sampling, analyzing and data reporting provided; |
| <input type="checkbox"/> | _____ | <input checked="" 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)

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

- | | | | | |
|--------------------------|-------|-------------------------------------|--------------------------|------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 1. Closure permit requirements; (62-701.600(2),FAC) |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | a. Application submitted to Department at least 90 days prior to final receipt of wastes; |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | b. Closure plan shall include the following: |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | (1) Closure design plan; |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | (2) Closure operation plan; |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | (3) Plan for long-term care; |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input 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

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|--------------------------|-------|-------------------------------------|-------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 2. Closure design plan including the following requirements: (62-701.600(3),FAC) |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | a. Plan sheet showing phases of site closing; |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | b. Drawings showing existing topography and proposed final grades; |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | c. Provisions to close units when they reach approved design dimensions; |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | d. Final elevations before settlement; |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input 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 checked="" type="checkbox"/> | <input type="checkbox"/> | f. Final cover installation plans including: |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | (1) CQA plan for installing and testing final cover; |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | (2) Schedule for installing final cover after final receipt of waste; |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | (3) Description of drought-resistant species to be used in the vegetative cover; |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | (4) Top gradient design to maximize runoff and minimize erosion; |
| <input type="checkbox"/> | _____ | <input checked="" type="checkbox"/> | <input 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 checked="" type="checkbox"/> | <input 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 checked="" type="checkbox"/>	<input 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 type="checkbox"/>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	j. Description of the proposed or existing gas management system which complies with Rule 62-701.530, FAC.
<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	3. Closure operation plan shall include:(62-701.600(4),FAC)
<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	a. Detailed description of actions which will be taken to close the landfill;
<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	b. Time schedule for completion of closing and long-term care;
<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	c. Describe proposed method for demonstrating financial assurance for long-term care;
<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	d. Operation of the water quality monitoring plan required in Rule 62-701.510, FAC.
<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	e. Development and implementation of gas management system required in Rule 62-701.530, FAC.
<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	4. Certification of closure construction completion including: (62-701.600(6),FAC)
<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	a. Survey monuments; (62-701.600(6)(a),FAC)
<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	b. Final survey report; (62-701.600(6)(b),FAC)

<u>S</u>	<u>LOCATION</u>	<u>N/A</u>	<u>N/C</u>	PART O CONTINUED
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<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	5. Declaration to the public; (62-701.600(7),FAC)
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<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	6. Official date of closing; (62-701.600(8),FAC)
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<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input 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)
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PART P. OTHER CLOSURE PROCEDURES (62-701.610,FAC)

<u>S</u>	<u>LOCATION</u>	<u>N/A</u>	<u>N/C</u>
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<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	1. Describe how the requirements for use of closed solid waste disposal areas will be achieved;(62-701.610(1),FAC)
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<input type="checkbox"/>	_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2. Describe how the requirements for relocation of wastes will be achieved; (62-701.610(2), FAC)
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PART Q. LONG-TERM CARE (62-701.620,FAC)

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

is aware that statements made in this form and attached

Mike Kamm
Signature of Applicant or Agent

***Omni is a wholly owned subsidiary of Waste Services, Inc. (WSI)**

1501 Omni Way
Mailing Address

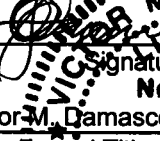
(904) 673-0446
Telephone Number

Date: 8/11/11

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 _____
No 72966

Victor M. Damasceno, Engineer
Name and Title (please type) _____

72966

Florida Registration Number
(please affix seal)

13101 Telecom Drive, Siure 120
Mailing Address

Temple Terrace, FL, 33637
City, State, Zip Code

vdamasceno@geosyntec.com
E-Mail address (if available)

(813) 558-0990
Telephone Number

Date: 8/16/11



2893 Executive Park Drive, Suite 305, Weston, Florida 33331

January 24, 2011

RE: Omni Waste of Osceola County, LLC

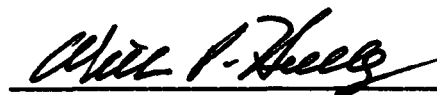
To Whom It May Concern:

This is to confirm that Michael Kaiser is an authorized signatory of Omni Waste of Osceola County, LLC (the "Corporation"), with authority to execute and deliver all documents and instruments required in connection with environmental matters for the Corporation, including without limitation, permit applications, modifications and financial assurances for permits issued to the Corporation.

Omni Waste of Osceola County, LLC


William P. Hulligan
Manager

Waste Services, Inc.


William P. Hulligan
Executive Vice President, U.S. Operations