

ENVIRONMENTAL PROTECTION DIVISION

Richard E. Dunn, Director

Mountain District Office

16 Center Road Cartersville, Georgia 30121 770-387-4900

Correspondence: Post Office Box 3250 Cartersville, Georgia 30120

Sam Buckles Solid Waste & Recycling Forsyth County 110 East Main Street, Suite 140 Cumming, Georgia 30040

OCT 20 2021:

RE: Post Closure Landfill Inspection

Hightower Road Landfill Phase I & II

Permit No. 058-006D(SL)

Forsyth County

Dear Mr. Buckles:

On October 12, 2021, a representative of the Environmental Protection Division (EPD) conducted an inspection at the referenced facility. This inspection was carried out to determine your facility's compliance status with the Georgia Comprehensive Solid Waste Management Act and the Georgia Rules for Solid Waste Management.

Enclosed is a copy of the Evaluation Report. Please review the comment section (page 3) of the report to see concerns that were discussed with you on the day of inspection. If you have any questions, then please call me at (678) 767-9441.

Sincerely,

Jason Rogers

Environmental Compliance Specialist

Mountain District Office

Enclosure: Inspection Report

CC: EPD Solid Waste Management Program, Suite 104

Tim Allen Forsyth County Engineering 110 East Main Street, Suite 120 Cumming, GA 30040



 Date:
 10/12/2021

 County:
 Forsyth

 Permit No.:
 058-006D(SL)

ENVIRONMENTAL PROTECTION DIVISION

Land Protection Branch 4244 International Parkway, Ste 104 Atlanta, Georgia 30354

Post-Closure Checklist

Facility Name: Forsyth County - Hightower Road Phase I & II					
Permit No.:	058-006D(SL)				
Date of Closure I	Notification:	7/14/1999			
Date Closure Cer	tificate Issued:	7/14/1999			
DOCUMENTAT	ION		YES	NO	N/A
1. Does the facility	have an approved closure/	post closure care plan?	/	-	
2. Does the facility	have an approved groundy	vater monitoring plan?	~		
3. Does the facility	have an approved methane	monitoring plan?	!		
4. Has the groundw	vater monitoring system bed	en approved?	~		
5. Has groundwate	r monitoring data been sub	mitted?	~		
6. Has methane mo	nitoring data been submitte	ed?	<u> </u>		
7. Has all certificat	ion documentation been su	bmitted?	~		
8. If applicable, has	s final cover test data been	submitted?	✓		
(if governmental	echanism been submitted an municipality ceased excep of required - all private sites	ting waste on or before	V		
10. Will this facilit after closure?	y be used for any solid was If so, what?	te handling purposes		V	
	ne used for a solid waste puriate documents been subm	=			\checkmark

Water Monitoring System

1	Wells have been installed in accordance with approved			
	groundwater monitoring plan, and are in good condition.	V		
2.	Wells are easily accessible.	~		**************************************
3.	Wells are marked in accordance with plans.	~		
4.	Wells are locked.	✓		
5.	Pad are in good condition.	\checkmark		
6.	Surface water monitoring points are marked and accessible.	✓		
M	lethane Monitoring System			
1.	Methane monitoring wells have been installed in accordance with approved plan and in satisfactory condition.	√		
2.	Monitoring points are marked in accordance with plan.	\checkmark		
3.	Pads, if applicable, are in good condition.	✓		
E	rosion & Sedimentation Control			
1.	Sediment pond has been cleaned.	<u> </u>		
2.	Silt markers are located in pond.	\checkmark		a de la constante de la consta
3.	Downdrains, checkdams, etc. located as specified on plan.	V		
<u>Fi</u>	inal Cover			
1.	All waste has been completely covered.	✓		
2.	Facility has been adequately vegetated and mulched.		✓	
<u>M</u>	<u>liscellaneous</u>			
1.	Access control is satisfactory.	V		
2.	Closure signs have been posted.	V		
3.	All litter has been picked up and properly disposed of.	\checkmark		
4.	All equipment, unnecessary structures and excess materials have been removed from landfill property.	√		

Time of inspection:	9:00	✓ a.m. □ p	o.m.	Weath	er Conditions:	Overcast
Reason for inspection	on:	Routine	V	Other		
•						
Dia						
Discussed with: Name	Title		Address			Telephone
Charles Adams, Co		(Atlantic Coas	***************************************	g)	678-296-9825	receptione
charles.adams@atlcc			****			
Sam Buckles Solid V 470-208-8582	Vaste & I	Recycling, 110) E. Main Sti	reet, Suite	140, Cumming, GA	. 30040
+70-208-8382	<u></u>					
			-			
Copy of this report s		d to:				
Name	Title	nainamina	Address			Telephone
Tim Allen Forsyth (110 East Main Str			ng Georgia	30040	678-965-7130	
110 Dast Wall Du	oci, sanc	120 Cummi	ing, Georgia	30040	070-705-7130	
Charles Adams ch	arles.ada	ms@atlcc.net				
Cama Darakia - Emailar		7 - ' M	1050 81	D	1.0	20.41
Sam Buckles Environ 678-513-5892	nmental	Science Manag	ger 1950 Sh	aron Road	d, Cumming, GA 30	1041
070-313-3072						
Photographs:	Yes [] No ☑			Location	
						
Inspector:	Jason R	logers				
D	1/	n Dallwien			.	40.5
Reviewer:	1heur	· Vall Wilev	<u></u>		Review Date:	10-20-21
Attachments:						
_						
Comments:			4 . 4	•		
		eds to be mo				
woody v	egetatio	n needs to be	removed f	rom stop	es.	
				· · · · · · · · · · · · · · · · · · ·		

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Operating Records for Facilities in Post Closure

	Compliance Status			
	Director Notified	In	Out	N/A
A. Groundwater Monitoring				
1. Approved plan		~		
2. Certification of installation		_ _		
3. Monitoring reports				
B. Gas Monitoring				
1. Quarterly monitoring results		V		
2. If methane exceeds limits provide written record				
a. Within 7 days, levels detected and				
steps taken to protect human health		7		
b. Within 60 days, implementation of				
remediation plan and Director notified		✓		
C. Closure and Post Closure Criteria				
1. Closure Criteria				
a. Approved plan		√		
b. Notice of final closure		V		
c. Copy of deed to include:				
1. Notice of landfill operation		✓		
2. Legal description location		<u> </u>		
3. Type of waste deposited		✓		
d. Confirmation (written) of b & c	_		_	
recorded on deed		V		
e. Signed compliance certification by			*******	_
GA P.E.		√		
2. Post Closure Criteria				
a. Approved plan		V		
b. Results of all monitoring activities		V		
c. Notice to Director within 5 days of				
exceedance of standards		7		
d. Remediation plan within 30 days		4		
e. copy of written approval for removal of				
any contaminated material		✓		
D. Financial Assurance		✓		
1. Written cost estimates		✓		
2. Copy of financial instrument				
3. Written justification for reduction in cost of				
reimbursements paid out		4		
4. Notice to Director for any of the above if				
necessary		V		



ENVIRONMENTAL PROTECTION DIVISION

Richard E. Dunn, Director

Mountain District Office

16 Center Road Cartersville, Georgia 30121 770-387-4900

Correspondence: Post Office Box 3250 Cartersville, Georgia 30120

Sam Buckles Solid Waste & Recycling Forsyth County 110 East Main Street, Suite 140 Cumming, Georgia 30040

OCT 20 2021

RE: Post Closure Landfill Inspection

Hightower Road Landfill Phase III

Permit No. 058-009D(SL)

Forsyth County

Dear Mr. Buckles:

On October 12, 2021, a representative of the Environmental Protection Division (EPD) conducted an inspection at the referenced facility. This inspection was carried out to determine your facility's compliance status with the Georgia Comprehensive Solid Waste Management Act and the Georgia Rules for Solid Waste Management.

Enclosed is a copy of the Evaluation Report. Please review the comment section (page 3) of the report to see concerns that were discussed with you on the day of inspection. If you have any questions, then please call me at (678) 767-9441.

Sincerely,

Jason Rogers

Environmental Compliance Specialist

Mountain District Office

Enclosure: Inspection Report

CC: EPD Solid Waste Management Program, Suite 104

Tim Allen Forsyth County Engineering 110 East Main Street, Suite 120 Cumming, GA 30040



Date: County: Permit No.:

10/12/2021 Forsyth 058-009D(SL)

ENVIRONMENTAL PROTECTION DIVISION

Land Protection Branch 4244 International Parkway, Ste 104 Atlanta, Georgia 30354

Post-Closure Checklist

Facility Name:	Forsyth County -	Hightower Road Phase III					
Permit No.:	Permit No.: 058-009D(SL)						
Date of Closure N	Notification:	7/14/1999					
Date Closure Cer	tificate Issued:	7/14/1999					
DOCUMENTAT	<u>ION</u>		YES	NO	N/A		
1. Does the facility	have an approved clo	sure/post closure care plan?	✓				
2. Does the facility	have an approved gro	oundwater monitoring plan?	√				
3. Does the facility	have an approved me	thane monitoring plan?	7				
4. Has the groundw	rater monitoring syste	m been approved?					
5. Has groundwater	monitoring data been	n submitted?	V				
6. Has methane mo	nitoring data been sul	omitted?	V				
7. Has all certificate	ion documentation be	en submitted?	✓				
8. If applicable, has	s final cover test data	been submitted?	V				
(if governmental	chanism been submit municipality ceased of t required - all private	excepting waste on or before	V				
10. Will this facility after closure? I	·	d waste handling purposes		V			
_		ste purpose after closure,			[\forall]		

Water Monitoring System

1	Wells have been installed in accordance with approved			
	groundwater monitoring plan, and are in good condition.	√		
2.	Wells are easily accessible.	~		
3.	Wells are marked in accordance with plans.	√		
4.	Wells are locked.	✓		
5.	Pad are in good condition.		7	
6.	Surface water monitoring points are marked and accessible.	V		
<u>M</u>	lethane Monitoring System			
1.	Methane monitoring wells have been installed in accordance with approved plan and in satisfactory condition.	V		
2.	Monitoring points are marked in accordance with plan.	V		
3.	Pads, if applicable, are in good condition.		V	
<u>E</u> 1	rosion & Sedimentation Control			
1.	Sediment pond has been cleaned.	V		
2.	Silt markers are located in pond.	V		
3.	Downdrains, checkdams, etc. located as specified on plan.	~		
<u>Fi</u>	nal Cover			
1.	All waste has been completely covered.	~		
2.	Facility has been adequately vegetated and mulched.		√	
M	<u>iscellaneous</u>			
1.	Access control is satisfactory.	~		
2.	Closure signs have been posted.	✓		
3.	All litter has been picked up and properly disposed of.	✓		
4.	All equipment, unnecessary structures and excess materials have been removed from landfill property.	V		

Time of inspection:	9:00	✓ a.m p	o.m.	Weath	er Conditions:	Overcast
Reason for inspection	on:	Routine	✓	Other		
Discussed with:	m·/I					
Name Charles Adams, Co	Title	(Atlantic Coa	Address	· · · · · · · · · · · · · · · · · · ·	(79.20(.0925	Telephone
<u>charles.adams@atlco</u>		(Atlantic Coa	st Consumng	<u> </u>	678-296-9825	
<u>enance.adams(wance</u>	<i>y.</i> 1100					
Sam Buckles Solid V	Waste & F	Recycling, 110	E. Main Stre	eet. Suite	140 Cumming GA	30040
470-208-8582		<u> </u>		,		
	····					
_						
Copy of this report		d to:				
Name	Title		Address			Telephone
Tim Allen Forsyth			0	30040	(70.0(5.7100	
110 East Main Str	eet, Suite	120 Cummi	ng, Georgia	30040	678-965-7130	
Charles Adams ch	arles ada	ms@atlcc.net				
Charles Adams Ch	iai ics.auai	inswallee.net				
Sam Buckles Environ	nmental S	Science Manas	ger 1950 Sha	ron Roac	1 Cumming GA 30	041
678-513-5892			344 23 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		., camming, or r	O I I
Photographs:	Yes [No ☑			Location	

Inspector:	Jason R	ogers.		_		
	. /	Λ <i>I</i> Ι		_		
Reviewer:	Keun	~ Dallmier	~	_	Review Date:	10-20-21
Attachments:						
 						
Comments:						
		eds to be mo				
Woody v	egetation	n needs to be	removed fro	om slope	es.	
Methane	well pac	ls need to be	cleared of d	ebris.		

Operating Records for Facilities in Post Closure

	Com			
	Director Notified	In	Out	N/A
A. Groundwater Monitoring				
Approved plan		7		
2. Certification of installation		<u> </u>		
3. Monitoring reports		7		
B. Gas Monitoring				
1. Quarterly monitoring results		V		
2. If methane exceeds limits provide written record				
a. Within 7 days, levels detected and				
steps taken to protect human health		V		
b. Within 60 days, implementation of				
remediation plan and Director notified		✓		
C. Closure and Post Closure Criteria				
1. Closure Criteria				
a. Approved plan		7		
b. Notice of final closure		7		
c. Copy of deed to include:				
1. Notice of landfill operation		$\overline{\checkmark}$		
2. Legal description location		<u> </u>		
3. Type of waste deposited		✓		
d. Confirmation (written) of b & c		_		
recorded on deed		✓		
e. Signed compliance certification by		_		
GA P.E.		✓		
2. Post Closure Criteria				
a. Approved plan		✓		
b. Results of all monitoring activities		\checkmark		
c. Notice to Director within 5 days of				
exceedance of standards		\checkmark		
d. Remediation plan within 30 days		✓		
e. copy of written approval for removal of				
any contaminated material		✓		
D. Financial Assurance		y		
1. Written cost estimates		V		
2. Copy of financial instrument				
3. Written justification for reduction in cost of				
reimbursements paid out		V		
4. Notice to Director for any of the above if				
necessary		V		



ENVIRONMENTAL PROTECTION DIVISION

Richard E. Dunn, Director

Mountain District Office

16 Center Road Cartersville, Georgia 30121 770-387-4900

Correspondence: Post Office Box 3250 Cartersville, Georgia 30120

Sam Buckles Solid Waste & Recycling Forsyth County 110 East Main Street, Suite 140 Cumming, Georgia 30040

OGT 20 2021

RE:

Post Closure Landfill Inspection Hightower Road Landfill Phase IV Permit No. 058-010D(SL) Forsyth County

Dear Mr. Buckles:

On October 12, 2021, a representative of the Environmental Protection Division (EPD) conducted an inspection at the referenced facility. This inspection was carried out to determine your facility's compliance status with the Georgia Comprehensive Solid Waste Management Act and the Georgia Rules for Solid Waste Management.

Enclosed is a copy of the Evaluation Report. Please review the comment section (page 3) of the report to see concerns that were discussed with you on the day of inspection. If you have any questions, then please call me at (678) 767-9441.

Sincerely,

Jason Rogers

Environmental Compliance Specialist

Mountain District Office

Enclosure: Inspection Report

CC: EPD Solid Waste Management Program, Suite 104

Tim Allen Forsyth County Engineering 110 East Main Street, Suite 120 Cumming, GA 30040



 Date:
 10/12/2021

 County:
 Forsyth

 Permit No.:
 058-010D(SL)

ENVIRONMENTAL PROTECTION DIVISION

Land Protection Branch 4244 International Parkway, Ste 104 Atlanta, Georgia 30354

Post-Closure Checklist

Facility Name: Forsyth County - Hightower Road Phase IV							
Permit No.: 058-010D(SL)							
Date of Closure I	Notification: 7/14/1999			-			
Date Closure Cer	rtificate Issued: 7/14/1999						
DOCUMENTAT	<u> TION</u>	YES	NO	N/A			
1. Does the facility	have an approved closure/post closure care plan?	\checkmark					
2. Does the facility	have an approved groundwater monitoring plan?	\checkmark					
3. Does the facility	have an approved methane monitoring plan?	\rightarrow					
4. Has the groundw	vater monitoring system been approved?	\checkmark					
5. Has groundwater	monitoring data been submitted?	V					
6. Has methane mo	nitoring data been submitted?	V					
7. Has all certificati	ion documentation been submitted?	V					
8. If applicable, has	final cover test data been submitted?	V					
(if governmental	chanism been submitted and accepted? municipality ceased excepting waste on or before t required - all private sites required)	✓					
10. Will this facility after closure? I	be used for any solid waste handling purposes f so, what?		✓				
	e used for a solid waste purpose after closure,	П					

Water Monitoring System

1. Wells have been installed in accordance with approved			
groundwater monitoring plan, and are in good condition.	\checkmark		
2. Wells are easily accessible.	7		
3. Wells are marked in accordance with plans.	V		
4. Wells are locked.	V		
5. Pad are in good condition.	V		
6. Surface water monitoring points are marked and accessible.	V		
Methane Monitoring System			
1. Methane monitoring wells have been installed in accordance with approved plan and in satisfactory condition.	V		
2. Monitoring points are marked in accordance with plan.	V		
3. Pads, if applicable, are in good condition.	V		
Erosion & Sedimentation Control			
1. Sediment pond has been cleaned.	\checkmark		
2. Silt markers are located in pond.	V		
3. Downdrains, checkdams, etc. located as specified on plan.	V		
Final Cover			
1. All waste has been completely covered.	V		
2. Facility has been adequately vegetated and mulched.		~	
Miscellaneous			
. Access control is satisfactory.	abla		
2. Closure signs have been posted.	V		
3. All litter has been picked up and properly disposed of.	V		
All equipment, unnecessary structures and excess materials have been removed from landfill property.	√		

Time of inspectio	n: 9:00	✓ a.m.	p.m.	Weath	er Conditions:	Overcast
Reason for inspec	ction:	Routine	V	Other		
Discussed with:	T:41.		4 7 7			
Name Charles Adams,	Title Consultant	(Atlantia Coa	Address	~_\	(79.20(.0025	Telephone
<u>charles Adams.</u> charles.adams@a		(Atlantic Coa	st Consulting	31	678-296-9825	
0.147.00.44637.10(6)4	000.1101	·				
Sam Buckles Soli	d Waste & 1	Recycling, 110	E. Main St	reet. Suite	140, Cumming, GA	30040
470-208-8582				,		
G 641		• .				
Copy of this repor		d to:				
Name Tim Allen Forsyt	Title		Address			Telephone
110 East Main S			no Georgia	30040	678-965-7130	
110 2000 1714111	stroot, State	120 Cullinii	ag, deorgia	30070	070-903-7130	
Charles Adams	charles.ada	ms@atlcc.net				
		Science Manag	ger 1950 Sh	aron Road	, Cumming, GA 30	0041
678-513-5892						
Photographs:	Yes [] No ☑			*	
notograpus:	res =	ı No ∟ı			Location	
Inspector:	Jason R	ngers				
anspector.			······································			
Reviewer:	Kein	r Nallmit	'γ		Review Date:	10-20-21
					itteriori Date.	10 10-21
Attachments:						
Comments:						
		eds to be mov				
Woody	vegetation	needs to be	removed fr	om slope	S.	
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Operating Records for Facilities in Post Closure

	Com			
	Director Notified	In	Out	N/A
A. Groundwater Monitoring				
1. Approved plan		V		
2. Certification of installation		<u></u>		
3. Monitoring reports		7		
B. Gas Monitoring				
1. Quarterly monitoring results		V		
2. If methane exceeds limits provide written record				
a. Within 7 days, levels detected and				
steps taken to protect human health		4		
b. Within 60 days, implementation of				
remediation plan and Director notified		V		
C. Closure and Post Closure Criteria				
1. Closure Criteria				
a. Approved plan			Ц	
b. Notice of final closure		\sqrt		Ц
c. Copy of deed to include:				[]
 Notice of landfill operation Legal description location 		<u> </u>		
3. Type of waste deposited		V V		
d. Confirmation (written) of b & c		Ľ		
recorded on deed		√		П
e. Signed compliance certification by	 J			لـــا
GA P.E.		V		
2. Post Closure Criteria				
a. Approved plan		~		
b. Results of all monitoring activities		~		
c. Notice to Director within 5 days of				
exceedance of standards		V		
d. Remediation plan within 30 days		4		
e. copy of written approval for removal of				
any contaminated material		V		
D. Financial Assurance		~		
1. Written cost estimates		✓		
2. Copy of financial instrument				
3. Written justification for reduction in cost of				
reimbursements paid out		V		
4. Notice to Director for any of the above if				
necessary		4		