

MAR 11 2013

Print Form

2013-002329

# LANDFILL ANNUAL REPORT

For Calendar year 2012

## Administrative Information (Please enter all the information requested below)

Facility Name: Plain City Utah Landfill

Facility Mailing Address: 2200 N 4160 W

(Number & Street, Box and/or Route)

City: Plain City Ut. Zip Code: 84404

County: Weber Permit Number: 9402

### Owner

Name: Plain City Phone No.: 801 731-4908

Owner Mailing Address: 2200 N 4160 W

(Number & Street, Box and/or Route)

City: Plain City State: \_\_\_\_\_ Zip Code: 84404

Contact Name: Don Weston Contact Title: Environmental Services Director

Contact's Mailing Address: 2200 N 4160 W

Phone No.: 801 731-4908 Contact's Email Address: \_\_\_\_\_

### Operator (Complete this section only if the operator is not an employee of the Owner shown above)

Name: \_\_\_\_\_ Phone No.: \_\_\_\_\_

Owner Mailing Address: \_\_\_\_\_

(Number & Street, Box and/or Route)

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Contact Title: \_\_\_\_\_

Contact's Mailing Address: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Contact's Email Address: \_\_\_\_\_

## Facility Type and Status

- Class I
  - Class II
  - Class IIIa
  - Class IIIb
  - Class IVa
  - Class IVb
  - Class V
  - Class VI
  - Facility Closed during the year
- Date Closed: \_\_\_\_\_

## Annual Disposal (Tons received at the facility for disposal)

Waste Type	Waste Origin		Total	Measurement	
	In-State	Out-of-State		Tons	Cubic Yards
Municipal	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
Industrial	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
C/D*	<u>752</u>	<u>0</u>	_____	<input type="checkbox"/>	<input type="checkbox"/>

\*C/D waste includes all waste going to a Class IV or VI landfill cell

## Conversion Factor Used

- None Used
  - Site Specific
  - From Rules
- List Site Specific Conversion: \_\_\_\_\_

**Recycling**Material Recycled: 24Reported in Tons  Cubic Yards **Utah Disposal Fee**Disposal fee required to be paid to State Yes  No  (If yes please show fees paid below)

Municipal: \_\_\_\_\_ Industrial: \_\_\_\_\_ C/D: \_\_\_\_\_ Annual: \_\_\_\_\_

Municipal, Industrial and C/D are fees paid by Commercial Facilities. Annual fee is paid by facilities operated by a municipality

**Current Landfill Remaining Capacity**Tons: \_\_\_\_\_ Cubic Yards: \_\_\_\_\_ Acre: \_\_\_\_\_ Years: 25.5Acres Currently Open: 15.25 Acres Currently Closed: \_\_\_\_\_**Financial Assurance**Current Closure Cost Estimate: \$22,100.00Current Post-Closure Cost Estimate: \$8,525.00Current Amount or Balance in Mechanism: \$32,672.84

(If facility permit has been renewed and if balance does not equal or exceed total for closure and post-closure care please contact the Division)

Current Financial Assurance Mechanism: Trust Fund

(ie. Bond, Trust Fund, Corporate or government Test etc.)

Current Financial Assurance Mechanism Holder: Utah Public Treasurers Fund

(ie. Name of Bond Company, Bank etc. Account number)

**Financial Assurance:** Each facility must recalculate the cost of closure and post-closure care to account for inflation and design changes each year. The inflation factor can be found on the Division web page. Facilities that are using a trust account should include a copy of the most recent account statement.**Note** Facilities using "Local Government Financial Test" or the "Corporate Financial Test" must provide the information required in R315-309-8(4) or R315-309-9(3) each year.**Other Reports and Information to be Submitted with Annual Report****Ground Water Monitoring:** Class I and V landfills only. Check if exempt **Explosive Gas Monitoring:** Class I, II and V landfills only. Check if exempt Does the facility have a landfill gas collection system Yes  No 

If yes please briefly describe use of gas, e.g., flared or used for electricity generation.

**Training Report:** A report of all training programs or procedures completed by facility personnel during the year.**Signature:**Don J WestonDate: 3/7/2013

Signature should be by an executive officer, general partner, proprietor, elected official, or a duly authorized representative. A duly authorized representative must meet the requirements of the solid waste rules (UAC R315-310-2(4)(d)).

Type Name: Don WestonTitle: Environmental Services Director

## STATEMENT OF ACCOUNT

## PTIF

## UTAH PUBLIC TREASURERS' INVESTMENT FUND

Richard K. Ellis, Utah State Treasurer, Fund Manager

PO Box 142315

350 N State Street, Suite 180

Salt Lake City, Utah 84114-2315

Local Call (801) 538-1042 Toll Free (800) 395-7665

www.treasurer.utah.gov

ESC-PLAIN CITY-LANDFILL  
 STEVE J DAVIS DEQ HW  
 4160 WEST 2200 NORTH  
 PLAIN CITY UT 84404

<b>Account</b>	<b>Account Period</b>
6838	January 01, 2013 through January 31, 2013

**Summary**

Beginning Balance	\$ 32,654.82	Average Daily Balance	\$ 32,654.82
Deposits	\$ 18.02	Interest Earned	\$ 18.02
Withdrawals	\$ 0.00	360 Day Rate	0.6408
Ending Balance	\$ 32,672.84	365 Day Rate	0.6497

Date	Activity	Deposits	Withdrawals	Balance
01/01/2013	FORWARD BALANCE	\$ 0.00	\$ 0.00	\$ 32,654.82
01/31/2013	REINVESTMENT	\$ 18.02	\$ 0.00	\$ 32,672.84
01/31/2013	ENDING BALANCE	\$ 0.00	\$ 0.00	\$ 32,672.84

{Effective: 01/31/2013}      The GASB Fair Value factor at December 31, 2012 is 1.00557603