



1551 Green Valley Drive, Ashland, Kentucky 41102
o 606 928 0239 f 606 928 1239 republicservices.com

March 2, 2015

Tony Hatton
Solid Waste Branch
Division of Waste Management
200 Fair Oaks
Frankfort, KY 40601

Received

MAR 02 2015

Reception

**RE: Green Valley Landfill General Partnership
Green Valley Landfill, Greenup County
Solid Waste Permit No. SW04500012
First Quarter 2015 -
Groundwater Monitoring and Surface Water Monitoring Reports**

Mr. Hatton:

Enclosed please find one copy of the quarterly groundwater and surface water monitoring reports and the statistical evaluation report for Green Valley Landfill. No groundwater or surface water exceedances were detected. No verified statistical exceedances were identified.

Feel free to contact me at 502-403-8908 (cell) or WChlebowy@republicservices.com if you have any questions or need additional information.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based upon my inquiry of the person or persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for such violations.

Sincerely,

GREEN VALLEY LANDFILL GENERAL PARTNERSHIP

William L. Chlebowy, P.E.
Environmental Manager
Republic Services, Inc.

Enclosures

cc: Kim Cecil – Operations Manager Landfill
Green Valley Landfill – File

FACILITY INFORMATION SHEET

Sampling Date: 01/07/2015 County: Greenup Permit No. 045-00012
Facility Name Green Valley Landfill
(As officially shown on DWM Permit Face)
Site Address: 100 Addington Road Ashland, Kentucky 41102
Street City Zip
Phone No.: (606) 928-0239 Latitude 38° 23' 00" Longitude 82° 48' 58"

OWNER INFORMATION

Facility Owner: Green Valley Environmental Corporation Phone No.: 606-928-0239
Contact Person: Bill Chlebowy, P.E. Phone No.: 502-209-3816
Contact Person Title: Environmental Manager
Mailing Address: 2157 Highway 151 Frankfort, KY 40601
Street City Zip

SAMPLING PERSONNEL

(IF OTHER THAN LANDFILL OR LABORATORY)

Company: Kenvirons, Inc.
Contact Person: Bill Knarr Phone No.: (502) 695-4357
Mailing Address: 452 Versailles Road Frankfort, KY 40601
Street City Zip

LABORATORY RECORD #1

Laboratory: Pace Analytical Services, Inc. Lab ID No.: _____
Contact Person: Chris Boyle Phone No.: (317) 228-3134
Mailing Address: 7726 Moller Road Indianapolis, IN 46268
Street City Zip

LABORATORY RECORD #2

Laboratory: Keystone Laboratories, Inc. Lab ID No.: _____
Contact Person: Sue Thompson Phone No.: (800)-858-5227
Mailing Address: 600 East 17th Street South Newton, IA 50208
Street City Zip

Division of Waste Management
 Solid Waste Branch
 14 Reilly Road
 Frankfort, KY 40601 (502) 564-6716

RESIDENTIAL/CONTAINED-QUARTERLY
 Facility: Green Valley
 Permit Number: 045-00012

FINDS/UNIT: _____

LAB ID: _____

For Official Use Only

GROUNDWATER SAMPLE ANALYSES

AKGWA NUMBER1, Facility Well/Spring Number						NA		NA		8000-8086		8000-2931	
Facility's Local Well or Spring Number (e.g. MW-1, MW-2, etc.)						DUP		FB		MW-1		MW-1A	
Sample Sequence #						1		1		1		1	
If sample is a Blank, specify Type (F)ield, (T)rip, (M)ethod, or (E)quipment						NA		NA		NA		NA	
Sample Date and Time (Month/Day/Year hour:minutes)						01/07/2015 08:00		01/07/2015 10:35		01/07/2015 09:40		01/07/2015 10:10	
Duplicate ("Y" or "N") ²						Y		N		N		N	
Split ("Y" or "N") ³						N		N		N		N	
Facility Sample ID Number (if applicable)						DUP		FB		MW-1		MW-1A	
Laboratory Sample ID Number (if applicable)						50110352009		50110352008		50110352001		50110352002	
Date of Analysis (Month/Day/Year)						01/09/15 - 01/14/15		01/09/15 - 01/14/15		01/09/15 - 01/15/15		01/09/15 - 01/15/15	
Gradient with respect to Monitored Unit (UP, DOWN, SIDE, UNKNOWN)						UNKNOWN		UNKNOWN		SIDE		SIDE	
CAS RN4		CONSTITUENT	T D5	UNIT OF MEASURE	METHOD	DETECTED VALUE OR PQL6	F L A G S	DETECTED VALUE OR PQL6	F L A G S	DETECTED VALUE OR PQL6	F L A G S	DETECTED VALUE OR PQL6	F L A G S
S0906	0	Static Water Level Elevation	T										
S0907	0	Temperature	T	deg C						8.79		11.06	
16887-00-6	2	Chloride(s)	T	mg/L	EPA 9056	3.5		<0.25	U	1.4		3.6	
S0130	0	Chemical Oxygen Demand	T	mg/L	HACH 8000	<10.0	U	<10.0	U	<10.0	U	<10.0	U
S0266	0	Total Dissolved Solids	T	mg/L	SM 2540C	233		<10.0	U	47.0		244	
S0268	1	Total Organic Carbon	T	mg/L	SM 5310C	<1.0	U	<1.0	U	<1.0	U	<1.0	U
S0145	1	Specific Conductance Field	T	umhos/cm						79		397	

1AKGWA # is 0000-0000 for any type of blank.

2Respond "Y" if the sample was a duplicate of another sample in this report.

3Respond "Y" if the sample was split and analyzed by separate laboratories.

4Chemical Abstracts Service Registry Number or unique identifier number assigned by agency.

5"T" = Total; "D" = Dissolved

6 "<"? indicates a non-detect; do not use "ND" or "BDL". Value then shown is Practical Quantification Limit.

STANDARD FLAGS:

J = Estimated value

B = Analyte found in blank

A = Average value

N = Presumptive ID

D = Concentration from analysis

of a secondary dilution factor

Division of Waste Management
Solid Waste Branch
14 Reilly Road
Frankfort, KY 40601 (502) 564-6716

RESIDENTIAL/CONTAINED-QUARTERLY

Facility:
Permit Number:

FINDS/UNIT:

LAB ID:

For Official Use Only

GROUNDWATER SAMPLE ANALYSES

AKGWA NUMBER1, Facility Well/Spring Number						8000-2932		8005-7101		8005-7102		8005-7103	
Facility's Local Well or Spring Number (e.g. MW-1, MW-2, etc.)						MW-1B		MW-28C		MW-28D		MW-28E	
Sample Sequence #						1		1		1		1	
If sample is a Blank, specify Type (F)ield, (T)rip, (M)ethod, or (E)quipment						NA		NA		NA		NA	
Sample Date and Time (Month/Day/Year hour:minutes)						01/07/2015	10:50	01/07/2015	14:42	01/07/2015	12:50	01/07/2015	13:15
Duplicate ("Y" or "N")2						N		N		N		N	
Split ("Y" or "N")3						N		N		N		N	
Facility Sample ID Number (if applicable)						MW-1B		MW-28C		MW-28D		MW-28E	
Laboratory Sample ID Number (if applicable)						50110352003		50110352007		50110352005		50110352006	
Date of Analysis (Month/Day/Year)						01/09/15 - 01/15/15		01/09/15 - 01/15/15		01/09/15 - 01/15/15		01/09/15 - 01/15/15	
Gradient with respect to Monitored Unit (UP, DOWN, SIDE, UNKNOWN)						SIDE		DOWN		DOWN		DOWN	
CAS RN4		CONSTITUENT	T D5	UNIT OF MEASURE	METHOD	DETECTED VALUE OR PQL6	F L A G S	DETECTED VALUE OR PQL6	F L A G S	DETECTED VALUE OR PQL6	F L A G S	DETECTED VALUE OR PQL6	F L A G S
S0906	0	Static Water Level Elevation	T										
S0907	0	Temperature	T	deg C		11.28		6.54		8.22		9.31	
16887-00-6	2	Chloride(s)	T	mg/L	EPA 9056	37.5		22.6		26.4		1.7	
S0130	0	Chemical Oxygen Demand	T	mg/L	HACH 8000	<10.0	U	<10.0	U	<10.0	U	<10.0	U
S0266	0	Total Dissolved Solids	T	mg/L	SM 2540C	383		364		460		177	
S0268	1	Total Organic Carbon	T	mg/L	SM 5310C	<1.0	U	<1.0	U	<1.0	U	<1.0	U
S0145	1	Specific Conductance Field	T	umhos/cm		693		474		602		205	

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of a secondary dilution factor

Division of Waste Management
 Solid Waste Branch
 14 Reilly Road
 Frankfort, KY 40601 (502) 564-6716

RESIDENTIAL/CONTAINED-QUARTERLY

Facility:
 Permit Number:

FINDS/UNIT: _____

LAB ID: _____

For Official Use Only

GROUNDWATER SAMPLE ANALYSES

AKGWA NUMBER1, Facility Well/Spring Number				8000-8085										
Facility's Local Well or Spring Number (e.g. MW-1, MW-2, etc.)				MW-3										
Sample Sequence #				1										
If sample is a Blank, specify Type (F)ield, (T)rip, (M)ethod, or (E)quipment				NA										
Sample Date and Time (Month/Day/Year hour:minutes)				01/07/2015	11:40									
Duplicate ("Y" or "N") ²				N										
Split ("Y" or "N") ³				N										
Facility Sample ID Number (If applicable)				MW-3										
Laboratory Sample ID Number (if applicable)				50110352004										
Date of Analysis (Month/Day/Year)				01/09/15 - 01/15/15										
Gradient with respect to Monitored Unit (UP, DOWN, SIDE, UNKNOWN)				DOWN										
CAS RN4		CONSTITUENT	T D5	UNIT OF MEASURE	METHOD	DETECTED VALUE OR PQL6	F L A G S	DETECTED VALUE OR PQL6	F L A G S	DETECTED VALUE OR PQL6	F L A G S	DETECTED VALUE OR PQL6	F L A G S	
S0906	0	Static Water Level Elevation	T											
S0907	0	Temperature	T	deg C		10.38								
16887-00-6	2	Chloride(s)	T	mg/L	EPA 9056	28.7								
S0130	0	Chemical Oxygen Demand	T	mg/L	HACH 8000	<10.0	U							
S0266	0	Total Dissolved Solids	T	mg/L	SM 2540C	385								
S0268	1	Total Organic Carbon	T	mg/L	SM 5310C	<1.0	U							
S0145	1	Specific Conductance Field	T	umhos/cm		595								

1AKGWA # is 0000-0000 for any type of blank.

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3Respond "Y" if the sample was split and analyzed by separate laboratories.

4Chemical Abstracts Service Registry Number or unique identifier number assigned by agency.

5"T" = Total; "D" = Dissolved

6 "<"? indicates a non-detect; do not use "ND" or "BDL". Value then shown is Practical Quantification Limit.

STANDARD FLAGS:

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B = Analyte found in blank

A = Average value

N = Presumptive ID

D = Concentration from analysis

of a secondary dilution factor

00110352



KENVIRONS, INC. CHAIN OF CUSTODY RECORD

452 Versailles Road; Frankfort, KY 40601

www.kenvirons.com (502) 695-4357 Fax: (502) 695-4363

Customer Name: Kenvirons				Submitter No. 9795				Send Report To: Bill Knorr									
Project Number: 20070010								Address: Kenvirons, Inc.									
Client: Green Valley LF								E-mail:									
Sampled By: BFK III / KDG								Standard: <input checked="" type="checkbox"/> Sample Turn Around Time Rush Date: _____ <small>(Accelerated TAT subject to Additional Charge) (Date must be Accepted and Approved by Lab)</small>									
Date Sampled	Time Sampled	Contp	Grab	Sample ID and/or Location	Sample type (Select: DW, GW, WW, Soil, Sludge, Other)	Number of Containers	Flow (Gal/Min)	Field Turbidity	Field pH	Field Conductance	Field Temperature	Field Dissolved Oxygen	ORP	Z Quote number	Lab use only No.	Sample No.	
1/7/15	0940	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	MW-1	GW	5	—	61.1	7.39	79	8.79	8.08	-57.7			001	
1/7/15	1010	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	MW-1A	GW	5	—	77.9	7.53	397	11.06	5.46	-69.7			002	
1/7/15	1050	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	MW-1B	GW	5	—	9.9	7.99	693	11.28	0.81	-95.1			003	
1/7/15	1140	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	MW-3	GW	5	—	31.1	5.89	595	10.38	6.11	10.6			004	
1/7/15	1250	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	MW-28D	GW	5	—	76.8	5.86	602	8.22	4.84	11.8			005	
1/7/15	1315	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	MW-28E	GW	5	—	15.3	6.94	205	9.31	5.40	-40.9			006	
1/7/15	1442	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	MW-28C	GW	5	—	34.5	5.56	474	6.54	2.08	26.1			007	
1/7/15	1035	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	FB	—	5	—	—	—	—	—	—	—			008	
1/7/15		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Dup	GW	5	—	—	—	—	—	—	—			009	
Retrieved by: (Signature) <i>B. Knorr</i> Date/Time 1/7/15 11800				Received by: (Signature) <i>Sent via UPS</i>				Laboratory Use Only				YES		NO		Comments:	
Retrieved by: (Signature)				Received by: (Signature)				Custody seals present/intact?								Run: TDS 160.1, IC, COD, Metals, TOX, TOC All GW Samples are Quarterly!	
Retrieved by: (Signature)				Received by: (Signature)				Broken containers?									
Retrieved by: (Signature)				Received by: (Signature)				COC agree with sample labels?									
Retrieved by: (Signature)				Received by: (Signature)				Correct containers for testing?									
Retrieved by: (Signature)				Received by: (Signature)				Headspace issues acceptable?									
Received for Lab by: (Signature) <i>John Kelly</i>				Date 1-8-15		Temp 0940		-0.3 °C		Holding time(s) acceptable?							
								ROI? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Preservative pH's acceptable?							
								Was pH left unadjusted?									

White - Kenvirons Laboratory
Yellow - Third Party Laboratory
Pink - Sampler

FACILITY INFORMATION SHEET

Sampling Date: 01/07/2015 County: Greenup Permit No. 045-00012

Facility Name Green Valley Landfill

(As officially shown on DWM Permit Face)

Site Address: 100 Addington Road Ashland, Kentucky 41102
Street City Zip

Phone No.: (606) 928-0239 Latitude 38° 23' 00" Longitude 82° 48' 58"

OWNER INFORMATION

Facility Owner: Green Valley Environmental Corporation Phone No.: 606-928-0239

Contact Person: Bill Chlebowy, P.E. Phone No.: 502-209-3816

Contact Person Title: Environmental Manager

Mailing Address: 2157 Highway 151 Frankfort, KY 40601
Street City Zip

SAMPLING PERSONNEL

(IF OTHER THAN LANDFILL OR LABORATORY)

Company: Kenvirons, Inc.

Contact Person: Bill Knarr Phone No.: (502) 695-4357

Mailing Address: 452 Versailles Road Frankfort, KY 40601
Street City Zip

LABORATORY RECORD #1

Laboratory: Pace Analytical Services, Inc. Lab ID No.: _____

Contact Person: Chris Boyle Phone No.: (317) 228-3134

Mailing Address: 7726 Moller Road Indianapolis, IN 46268
Street City Zip

LABORATORY RECORD #2

Laboratory: _____ Lab ID No.: _____

Contact Person: _____ Phone No.: ()

Mailing Address: _____
Street City Zip

Division of Waste Management
 Solid Waste Branch
 14 Reilly Road
 Frankfort, KY 40601 (502)564-6716

Facility: Green Valley Landfill
 Permit Number: 045-00012

FINDS/UNIT: _____ / 1
 LAB ID: _____
 For Official Use Only

SURFACE WATER SAMPLE ANALYSIS (W)

Monitoring Point (KPDES Discharge Number, or "UPSTREAM", or "DOWNSTREAM")				Downgradient	Upgradient	Downgradient	Upgradient						
Sample Sequence #				SW-1	SW-2	SW-3	SW-4						
If sample is a Blank, specify Type: (F)ield, (T)rip, (M)ethod, or (E)quipment													
Sample Date and Time (Month/Day/Year hour:minutes)						1/7/2015 @ 7:35	1/7/2015 @ 8:00						
Duplicate ("Y" or "N") ¹						N	N						
Split ("Y" or "N") ²						N	N						
Facility Sample ID Number (if applicable)													
Laboratory Sample ID Number (if applicable)						50110349001	50110349002						
Date of Analysis (Month/Day/Year)						1/16/2015	1/16/2015						
CAS RN ⁴		CONSTITUENT	TD ⁵	UNIT OF MEASURE	METHOD	DETECTED VALUE OR PQL ⁶	FLAGS	DETECTED VALUE OR PQL ⁶	FLAGS	DETECTED VALUE OR PQL ⁶	FLAGS	DETECTED VALUE OR PQL ⁶	FLAGS
A200-00-0	0	Flow	T	Gal./Min.		No Flow		No Flow		30		25	
16887-00-6	2	Chloride(s)	T	MG/L	4500-Cl ⁻			8.7		6.8			
14808-79-8	0	Sulfate	T	MG/L	4500-SO4			301		570			
7439-89-6	0	Iron	T	MG/L	3111			0.25		0.48			
7440-23-5	0	Sodium	T	MG/L	3111			8.5		7.9			
S0268--	0	Organic Carbon ⁶	T	MG/L	5310			1.3		1.2			
S0097--	0	BOD ⁶	T	MG/L									
S0130--	0	Chemical Oxygen Demand	T	MG/L	5220C			<10.0		<10.0			

STANDARD FLAGS:

J = Estimated Value
 B = Analyte found in blank
 A = Average value
 N = Presumptive ID
 D = Concentration from analysis of a secondary dilution factor

¹ Respond "Y" if the sample was a duplicate of another sample in this report.

² Respond "Y" if the sample was split and analyzed by separate laboratories.

³ Chemical Abstracts Service Registry Number or unique identifier number assigned by agency.

⁴ "T" = Total; "D" = Dissolved

⁵ "<" indicates a non-detect; do not use "ND" or "BDL". Value then shown is Practical Quantification Limit

⁶ Facility has either/or option on Organic Carbon and (BOD) Biochemical Oxygen Demand - both are not required

Facility: Green Valley Landfill
 Permit Number: 045-00012

FINDS/UNIT: _____ / 1
 LAB ID: _____
 For official Use only

SURFACE WATER SAMPLE ANALYSIS - (Cont.)

Monitoring Point (KPDES Discharge Number, or "UPSTREAM" or "DOWNSTREAM")						SW-1		SW-2		SW-3		SW-4	
CAS RN ⁴		CONSTITUENT	TD ⁵	UNIT OF MEASURE	METHOD	DETECTED VALUE OR PQL ⁶	FLAG ⁶	DETECTED VALUE OR PQL ⁶	FLAG ⁶	DETECTED VALUE OR PQL ⁶	FLAG ⁶	DETECTED VALUE OR PQL ⁶	FLAG ⁶
S0145 - -	1	Specific Conductance	T	UHMS/CM	2520					671		1066	
S0270 - -	0	Total Suspended Solids	T	MG/L	2540D					<5.0		5	
S0266 - -	0	Total Dissolved Solids	T	MG/L	2540D					437		852	
S0269 - -	0	Total Solids	T	MG/L	2540B					468		877	
S0296 - -	0	pH	T	Units	4500-H+					7.59		7.51	

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² Respond "Y" if the sample was split and analyzed by separate laboratories.
³ Chemical Abstracts Service Registry Number or unique identifier number assigned by agency.
⁴ "T" = Total; "D" = Dissolved
⁵ "<" indicates a non-detect; do not use "ND" or "BDL". Value then shown is Practical Quantification Limit
⁶ Facility has either/or option on Organic Carbon and (BOD) Biochemical Oxygen Demand - both are not required

STANDARD FLAGS:
 STANDARD FLAGS:
 J = Estimated Value
 B = Analyte found in blank
 A = Average value
 N = Presumptive ID
 D = Concentration from analysis of a secondary dilution factor

Division of Waste Management

Solid Waste Branch

14 Reilly Road

Frankfort, KY 40601 (502)564-6716

Facility: Green Valley LandfillPermit Number: 045-00012

FINDS/UNIT: _____ / 1

LAB ID: _____
For Official Use Only**SURFACE WATER SAMPLE ANALYSIS (W)**

Monitoring Point (KPDES Discharge Number, or "UPSTREAM", or "DOWNSTREAM")				Upgradient	Downgradient								
Sample Sequence #				SW-5	SW-6								
If sample is a Blank, specify Type: (F)ield, (T)rip, (M)ethod, or (E)quipment													
Sample Date and Time (Month/Day/Year hour:minutes)				1/7/2015 @ 8:20									
Duplicate ("Y" or "N") ¹				N									
Split ("Y" or "N") ²				N									
Facility Sample ID Number (if applicable)													
Laboratory Sample ID Number (if applicable)				50110349003									
Date of Analysis (Month/Day/Year)				1/16/2015									
CAS RN ⁴		CONSTITUENT	TD ⁵	UNIT OF MEASURE	METHOD	DETECTED VALUE OR PQL ⁶	FLAGS	DETECTED VALUE OR PQL ⁶	FLAGS	DETECTED VALUE OR PQL ⁶	FLAGS	DETECTED VALUE OR PQL ⁶	FLAGS
A200-00-0	0	Flow	T	Gal./Min.		15		No Flow					
16887-00-6	2	Chloride(s)	T	MG/L	4500-Cl ⁻	4.0							
14808-79-8	0	Sulfate	T	MG/L	4500-SO4	174							
7439-89-6	0	Iron	T	MG/L	3111	0.40							
7440-23-5	0	Sodium	T	MG/L	3111	6.2							
S0268--	0	Organic Carbon ⁶	T	MG/L	5310	2.6							
S0097--	0	BOD ⁶	T	MG/L									
S0130--	0	Chemical Oxygen Demand	T	MG/L	5220C	16.5							

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STANDARD FLAGS:

J = Estimated Value

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N = Presumptive ID

D = Concentration from
analysis of a secondary
dilution factor

Comments:

1. No flow was reported for SW-1, SW-2 or SW-6 on the current date of sampling (01/07/2015).

KENVIRONS, INC.
 452 Versailles Road
 Frankfort, KY 40601
 502-695-4357
 502-695-4363 (fax)



Green Valley Landfill -ALLIED - Greenup Co., KY Project No. 2011033

Sample Point	Z#	Date	Flow (Sampled)		No Flow	Preceding Precipitation Event Within 24 Hr. Period	
			YES	NO	YES	YES	NO
SW-1A	_____	1/7/15	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
SW-2	_____	1/7/15	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
SW-3	_____	1/7/15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
SW-4	_____	1/7/15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
SW-5	_____	1/7/15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
SW-6	_____	1/7/15	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Notes:

TECHNICIAN Bill F. Knarr, III

DATE 1/7/15