

Department for Environmental Protection / Division of Waste Management / Solid Waste Branch
 Quarterly Waste Quantity Report - DEP 7046-Q (Revised 2-05)

Page 1 of 2

WASTE ACTIVITY: CONTAINED LANDFILL

Facility Name: Green Valley Landfill
 County where landfill is located: Greenup County
 Report for the Months of: April, May, June

Permit Number: 045-00012
 Agency Interest Number: 1592
 For the Year of: 2014

Waste Source (County and State)	Type of Waste			** Waste Used as Alternate Daily Cover As Approved (Tons Only)
	*Municipal Solid Waste (Tons Only)	*Industrial Waste (Tons Only)	*Special Waste (Tons Only)	
BOYD COUNTY, KY	2811.02	630.39		
LAWRENCE COUNTY, OH	2797.42	1545.82	378.53	
GREENUP CO, KY	3912.31	2203.12	342.35	
CABELL COUNTY, WV	11153.34	1137.24	1287.15	
CARTER COUNTY, KY	2792.4	15.24	844.39	
WAYNE COUNTY, WV	3791.79	187.45	4169.1	
LAWRENCE COUNTY, KY	125.97	1147.08		
MAGOFFIN COUNTY, KY				
ELLIOTT COUNTY, KY	212.11			
SCIOTO COUNTY, OH	5952.38	1083.2	1535.52	
MASON COUNTY, WV	356.62	2.62		
GALLIA COUNTY, OH	3.57			
JACKSON COUNTY, OH	2.97	5.23		
JOHNSON COUNTY, KY	12.9			
PIKE COUNTY, KY		39.92		
MARTIN COUNTY, KY	1635.47			
KANAWHA COUNTY, WV	2679.63	4260.39	13.33	
Total for this page	38239.9	12257.7	8570.37	0
Grand Total of all pages				

*Grand Total of Municipal, Industrial and Special from all pages

SEE PAGE 2

*Does not include waste used as Alternate Daily Cover.

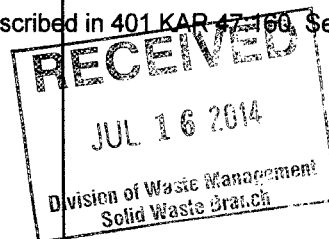
**Indicate the amount of waste used as Alternate Daily Cover. Please note this requires prior approval by the Cabinet.

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 on 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 fine and imprisonment for such violations.

Signature: William L. Chiles Phone Number: 502-403-8908

Name-Please Print William L. Chiles Date: 7-15-14

This certification clause shall be signed by the responsible person(s) described in 401 KAR 47:160, Section 6(1), and/or (2) is required by 401 KAR 47:160, Section 6(4).



Department for Environmental Protection / Division of Waste Management / Solid Waste Branch
 Quarterly Waste Quantity Report - DEP 7046-Q (Revised 2-05)

Page 2 of 2

WASTE ACTIVITY: CONTAINED LANDFILL

Facility Name: Green Valley Landfill

Permit Number: 045-00012

County where landfill is located: Greenup County

Agency Interest Number: 1592

Report for the Months of: _____

For the Year of: _____

Waste Source (County and State)	Type of Waste			** Waste Used as Alternate Daily Cover As Approved (Tons Only)
	*Municipal Solid Waste (Tons Only)	*Industrial Waste (Tons Only)	*Special Waste (Tons Only)	
MONTGOMERY, KY				
PUTNAM CO, WV	1509.54	256.25		
LINCOLN COUNTY, WV	50.64	35.15		
BOONE COUNTY, WV		116.86		
LOGAN COUNTY, WV	148.54	49.08	75.27	
LEWIS COUNTY, KY	43.18			
NICHOLAS, WV		10.87		
WYOMING COUNTY, WV	219.69	126.6		
MINGO COUNTY, WV	52.07	1748.03		
JACKSON CO, WV		7.59		
RALEIGH, WV		108.5		
CALHOUN, WV	0.34			
LOGAN, KY	5.45			
WASHINGTON, OH	9.37			
Total for this page	2038.82	2458.93	75.27	0

Grand Total of all pages	40278.72	14716.63	8645.64	0
---------------------------------	-----------------	-----------------	----------------	----------

*Grand Total of Municipal, Industrial and Special from all pages 63640.99

*Does not include waste used as Alternate Daily Cover.

**Indicate the amount of waste used as Alternate Daily Cover. Please note this requires prior approval by the Cabinet.

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 on 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 fine and imprisonment for such violations.

Signature: *William L. Chubb* Phone Number: 502-403-8908
 Name-Please Print William L. Chubb Date: 7-15-14

This certification clause shall be signed by the responsible person(s) described in 401 KAR 47:160, Section 6(1), and/or (2) is required by 401 KAR 47:160, Section 6(4).

