



Christopher J. Phipps, P.E., Director

MEMORANDUM

TO: File OR-O-634

FROM: Timothy Richards, Landfill Manager

SUBJECT: 2016 NPDES SWP3 Annual Report: Southern Recycling Center & Sudley Landfill

DATE: November 28, 2017

This memorandum documents that an Annual Comprehensive SWP3 Compliance Inspection was performed on November 18, 2016 for Southern Recycling Center & Sudley Landfill. However, the inspection was not documented on the SWP3 inspection forms due to changes in staff.

SRC Quarterly Routine Inspection Certification

Location	In Compliance (Yes/No) *
Recycling Center	
Main Gate, Main Haul Road and Paved Surfaces	YES
Convenience Center Area	YES
Oil, Batteries and AntiFreeze Recycling Area	YES
Maintenance Area	
Maintenance Building	YES
Maintenance Yard	YES
Landfill / Borrow Area Post-Closure	YES
Stormwater Management	NO

* For each item not in compliance, complete a Corrective Action Form

CERTIFICATION STATEMENT

"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 gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those 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 knowing violations."

Print Name
and Title:

Mark Morris, Environmental Monitoring Manager

Signature:

Mark Morris

Date:

9-Nov-17

SRC Quarterly Routine Inspection Corrective Action Form

Complete a separate copy of this page for each specific condition identified during the inspection as not in compliance.

Date problem identified: 11/9/2017

Identify the condition(s) triggering the need for this action (Check box):

Unauthorized release or discharge

Control measures inadequate

Control measures not properly operated or maintained

Change in facility operations necessitated change in control measures

Other (describe): _____

Briefly describe the nature of the problem identified:

Rip-rap ditch at southeast corner of haul road requires repair (FY19).

Description of corrective action(s) taken or to be taken to eliminate or further investigate the problem (e.g., describe modifications or repairs to control measures, analyses to be conducted, etc.) or if no modifications are needed, basis for that determination:

Need to add stone chute to eliminate ditch erosion.

Date corrective action to be completed: _____

Name of person responsible: Russell Gartside

Southern Recycling Center Inspection Checklist

Date of Inspection:	Quarter 1		Quarter 2		Quarter 3		Quarter 4	
	SAT	UNSAT	SAT	UNSAT	SAT	UNSAT	SAT	UNSAT
Main Gate, Main Haul Road and Paved Surfaces								
Upper and Lower Area Clean								
Entrance/Exit Roads and Paved Area Clean								
Recycling Area Clean, Dry, and Orderly								
Recycling Center Area								
Spills/Leaks or Containers Leaking	SAT	UNSAT	SAT	UNSAT	SAT	UNSAT	SAT	UNSAT
Trash Cans Empty								
Organic Debris/Mulch Area Clean and Orderly								
Stormdrain Inlet Grates Clean								
Drainage System (Ditches and Stormdrain)								
Oil, Batteries and AntiFreeze Recycling Area								
Check Fluid Levels	SAT	UNSAT	SAT	UNSAT	SAT	UNSAT	SAT	UNSAT
Full Tanks Locked								
Screens Cleaned								
Tanks Cleaned								
Containment Basins Clean								
Sorbent Mats and Material Maintained or Disposed of Properly								
No Leaks/Spills								
Drain Valves Shut								
Batteries Stacked in Containment Tray								
Pavement Clean (Powerwash Needed?)								
Trash Cans Emptied								
Comments: If UNSAT (Unsatisfactory) is checked, list what needs to be done, by whom, and the expected completion date.								

11/9/2017

Comments: If UNSAT (Unsatisfactory) is checked, list what needs to be done, by whom, and the expected completion date.

Southern Recycling Center Maintenance Building and Yard Inspection Checklist

Date of Inspection:	Quarter 1		Quarter 2		Quarter 3		Quarter 4
	SAT	UNSAT	SAT	UNSAT	SAT	UNSAT	11/9/2017 SAT UNSAT
Maintenance Building							
Shop Floor Clean and Free of Debris							
Sorbent Material in Place and Clean, Used Sorbent Disposed of Properly							YES
Drip Pans Under Hanging Nozzles and Equipment Empty							YES
Liquid Storage Room Sorbent Materials in Place and Clean/No Leaks							YES
Materials/Equipment Stored							YES
Storage Room Standing Water/Oil Residue							YES
Maintenance Yard							YES
Police Litter	SAT	UNSAT	SAT	UNSAT	SAT	UNSAT	SAT
Ground Free of Debris							SAT
Latex Paint Dumpster Organized/No Leaks							YES
Mechanical and Vegetative Stabilization Maintained							YES
Storage Area Clean and Organized							YES
300 Gallon Diesel Storage Tank Containment Maintained							YES
Comments: If UNSAT (Unsatisfactory) is checked, list what needs to be done, by whom, and the expected completion date.							YES

Sudley Landfill Significant Rainfall Event Inspection Checklist
 NOT APPLICABLE FOR INSPECTION DATED 11/9/2017

Date: 11/9/2017

Time: 10 a.m. to 1 p.m.

Inspector(s): Mark Morris
EMM

Weather: Partly Sunny

Rainfall Amount: _____

Duration: _____

Required Inspections	Maintenance Required		Date Scheduled	Date Completed
	Yes	No		
A. Final Cover Systems				
1. Erosion				
2. Vegetative Cover (other than erosion)				
3. Access Roads				
4. Sediment Deposition				
B. Drainage Control Systems				
1. Cover Terrace				
2. Borrow Area Drainage Terrace				
3. Riprap Downchutes				
4. Grassed and Riprap Swales				
5. Drainage Layer Toe Drains				
6. Riprap Slope Protection				
7. Earth Dike (Borrow Area Haul Road)				
8. Culvert at Tracey's Creek				
9. Sediment Deposition				
C. Stormwater Management Facilities (SWM #1 thru #5), Berms and Traps				
1. Erosion				
2. Vegetative Cover (other than erosion)				
3. Seepage Through Pond Embankment				
4. Trash Racks				
5. Riprap inlet and Outfall Aprons				
6. Pond Culvert Inlet Structures				
7. Dewatering Devices				
8. Sediment Trap Outlet (Borrow Area Haul Road)				
9. Sediment Deposition				
10. Pond/Discharge Clarity				

Comments (If Maintenance Required is Checked "YES" for any Items, a Comment is Required):

Sudley Landfill/Borrow Area Post-Closure Inspection Checklist

Date: 11/9/2017
 Time: 10 a.m. to 1 p.m.
 Weather: Partly Sunny

Inspector's Name(s): Mark Morris
 Inspector's Title(s): EMM
 Inspector's Contact Info: 443-623-0605

	Maintenance Required		Date Scheduled	Date Completed
	Yes	No		
Required Quarterly Inspections				
A. Final Cover Systems				
1. Erosion		X		
2. Vegetative Cover (other than erosion)		X		
3. Subsidence Areas		X		
4. Leachate Seeps		X		
5. Woody Vegetation		X		
6. Access Roads		X		
7. Borrow Area Haul Road		X		
8. Sediment Deposition		X		
B. Drainage Control Systems				
1. Cover Terrace		X		
2. Borrow Area Drainage Terrace		X		
3. Riprap Downchutes		X		
4. Grassed and Riprap Swales		X		
5. Drainage Layer Toe Drains		X		
6. Riprap Slope Protection		X		
7. Earth Dike (Borrow Area Haul Road)		X		
8. Culvert at Tracey's Creek		X		
9. Sediment Deposition		X		
C. Other Inspections				
1. Security (Perimeter Fence and Locking Gates)		X		
2. Groundwater Monitoring Wells		X		
3. Gas Monitoring Wells		X		

Comments (If Maintenance Required is Checked "YES" for any Items, a Comment is Required):

Note: Any woody vegetation will be removed as part of the routine maintenance occurring in the 4th quarter.

Southern Recycling Center Stormwater Management Inspection Checklist

Date: 11/9/2017
 Time: 10 a.m. to 1 p.m.
 Weather: Partly Sunny

Inspector's Name(s): Mark Morris
 Inspector's Title(s): EMM
 Inspector's Contact Info: 443-623-0605

Structural Stormwater Management Controls	Operating Effectively	Maintenance Required	Date Scheduled	Date Completed
	Y / N	Y / N		
SWM #1 Wet Pond	YES	NO		
SWM #2 Wet Pond	YES	NO		
SWM #3 Sand Filter	YES	NO		
SWM #4 Sand Filter	YES	NO		
SWM #5 Bioretention	YES	NO		

Describe Corrective Actions

SWM Facility	Action Item
_____	Note: Any woody vegetation will be removed as part of the routine maintenance occurring in the 4th quarter.
_____	_____
_____	_____
_____	_____

Inspection Items	Check When Feature Is Inspected		
	SWM #1	SWM #2	
Stormwater Management Ponds			
1. Erosion	X	X	
2. Vegetative Cover (other than erosion)	X	X	
3. Seepage Through Pond Embankment	X	X	
4. Woody Vegetation	X	X	
5. Holes in Embankment (burrowing animals)	X	X	
6. Trash Racks	X	X	
7. Inside Riser and Barrel Structures	X	X	
8. Riprap Inlet and Outfall Aprons	X	X	
9. Pond Culvert Inlet Structures	X	X	
10. Dewatering Devices	X	X	
11. Sediment Deposition	X	X	
12. Pond/Discharge Clarity	X	X	
Sand Filters / Bioretention			
1. Erosion	X	X	X
2. Vegetative Cover (other than erosion)	X	X	X
3. Seepage Through Pond Embankment	X	X	X
4. Woody Vegetation	X	X	X
5. Holes in Embankment (burrowing animals)	X	X	X
6. Trash Racks	X	X	X
7. Inside Riser and Barrel Structures	X	X	X
8. Riprap Inlet and Outfall Aprons	X	X	X
9. Pond Culvert Inlet Structures	X	X	X
10. Dewatering Devices	X	X	X
11. Sediment Deposition	X	X	X
12. Pre-Treatment Devices	X	X	X
13. Cleanouts and Underdrains	X	X	X

Southern Recycling Center Quarterly Visual Monitoring Form
Fill out a separate form for each outfall sampled.
NOT APPLICABLE FOR INSPECTION DATED 11/9/2017

Sample Location _____
 Outfall ID: _____

 Collector's Name and Title _____
 Examiner's Name and Title _____

 Quarter / Year: _____
 Date & Time Sample Collected: _____
 Date & Time Sample Examined: _____
 Runoff Source: _____
 Rainfall Snowmelt

Previous Storm Ended > 72 hours before
 start of this storm? * (circle) No Yes
 Qualifying Storm Event (> 1/2")? No Yes

Inspection Parameters (circle)

Color	None	Yellow	Brown	Red	Gray
	Other (describe) _____				
Clarity	Clear	Suspended Solids	Milky / Cloudy	Opaque	
	Other (describe) _____				
Oil Sheen	None	Rainbow sheet	Floating oil	Slick	
	Other (describe) _____				
Odor	None	Chemical	Musty	Rotten Eggs	Sewage
	Oil / Petroleum		Other (describe)		Sour Milk
Floating Solids	None	Suds	Oily Film	Garbage	Sewage
	Waterfowl Excrement		Other (describe)		_____
Suspended Solids	No	Yes	Describe	_____	

LEAVE SAMPLE UNDISTURBED FOR 30 MINUTES

Settled Solids **	No	Yes	Describe	_____
Foam (gently shake sample)	No	Yes	Describe	_____
Other Obvious Indicators of Stormwater Pollution	No	Yes	Describe	_____

Detail any concerns, additional comments, descriptions of pictures taken, and any corrective actions taken below.
 (attach additional sheets as necessary)

Stormwater Collector's Signature and Date: _____

Stormwater Examiner's Signature and Date: _____

INSPECTION
COMPLETED
6/30/17

**Appendix H:
Completed Quarterly Compliance Worksheets**

SRC Quarterly Routine Inspection Certification

Location	In Compliance (Yes/No) *
Recycling Center	
Main Gate, Main Haul Road and Paved Surfaces	YES
Convenience Center Area	YES
Oil, Batteries and AntiFreeze Recycling Area	YES
Maintenance Area	
Maintenance Building	YES
Maintenance Yard	YES
Landfill / Borrow Area Post-Closure	YES
Stormwater Management	YES

* For each item not in compliance, complete a Corrective Action Form

CERTIFICATION STATEMENT

"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 gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those 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 knowing violations."

Print Name and Title: Mark Morris, Environmental Monitoring Manager

Signature:  Date: 30-Jun-17

SRC Quarterly Routine Inspection Corrective Action Form

Complete a separate copy of this page for each specific condition identified during the inspection as not in compliance.

Date problem identified: _____

Identify the condition(s) triggering the need for this action (Check box):

Unauthorized release or discharge

Control measures inadequate

Control measures not properly operated or maintained

Change in facility operations necessitated change in control measures

Other (describe): _____

Briefly describe the nature of the problem identified:

Description of corrective action(s) taken or to be taken to eliminate or further investigate the problem (e.g., describe modifications or repairs to control measures, analyses to be conducted, etc.) or if no modifications are needed, basis for that determination:

Date corrective action to be completed: _____

Name of person responsible: _____

Southern Recycling Center Maintenance Building and Yard Inspection Checklist

Date of Inspection:	Quarter 1		Quarter 2		Quarter 3		Quarter 4	
	SAT	UNSAT	SAT	UNSAT	SAT	UNSAT	SAT	UNSAT
					6/30/2017			
Maintenance Building								
Shop Floor Clean and Free of Debris								
Sorbent Material in Place and Clean, Used Sorbent Disposed of Properly					YES			
Drip Pans Under Hanging Nozzles and Equipment Empty					YES			
Liquid Storage Room Sorbent Materials in Place and Clean/No Leaks					YES			
Materials/Equipment Stored					YES			
Storage Room Standing Water/Oil Residue					YES			
Maintenance Yard								
Police Litter	SAT	UNSAT	SAT	UNSAT	SAT	UNSAT	SAT	UNSAT
Ground Free of Debris					YES			
Latex Paint Dumpster Organized/No Leaks					YES			
Mechanical and Vegetative Stabilization Maintained					YES			
Storage Area Clean and Organized					YES			
300 Gallon Diesel Storage Tank Containment Maintained					YES			

Comments: If UNSAT (Unsatisfactory) is checked, list what needs to be done, by whom, and the expected completion date.

Sudley Landfill Significant Rainfall Event Inspection Checklist
NOT APPLICABLE FOR INSPECTION DATED 6/30/2017

Date: _____
 Time: _____
 Inspector(s): _____

Weather: _____
 Rainfall Amount: _____
 Duration: _____

Required Inspections	Maintenance Required		Date Scheduled	Date Completed
	Yes	No		
A. Final Cover Systems				
1. Erosion				
2. Vegetative Cover (other than erosion)				
3. Access Roads				
4. Sediment Deposition				
B. Drainage Control Systems				
1. Cover Terrace				
2. Borrow Area Drainage Terrace				
3. Riprap Downchutes				
4. Grassed and Riprap Swales				
5. Drainage Layer Toe Drains				
6. Riprap Slope Protection				
7. Earth Dike (Borrow Area Haul Road)				
8. Culvert at Tracey's Creek				
9. Sediment Deposition				
C. Stormwater Management Facilities (SWM #1 thru #5), Berms and Traps				
1. Erosion				
2. Vegetative Cover (other than erosion)				
3. Seepage Through Pond Embankment				
4. Trash Racks				
5. Riprap inlet and Outfall Aprons				
6. Pond Culvert Inlet Structures				
7. Dewatering Devices				
8. Sediment Trap Outlet (Borrow Area Haul Road)				
9. Sediment Deposition				
10. Pond/Discharge Clarity				

Comments (If Maintenance Required is Checked "YES" for any Items, a Comment is Required):

Sudley Landfill/Borrow Area Post-Closure Inspection Checklist

Date: 6/30/2017
 Time: 9:30 a.m. to noon
 Weather: Clear

Inspector's Name(s): Mark Morris

Inspector's Title(s): EMM

Inspector's Contact Info: 443-623-0605

	Maintenance Required		Date Scheduled	Date Completed
	Yes	No		
Required Quarterly Inspections				
A. Final Cover Systems				
1. Erosion		X		
2. Vegetative Cover (other than erosion)		X		
3. Subsidence Areas		X		
4. Leachate Seeps		X		
5. Woody Vegetation		X		
6. Access Roads		X		
7. Borrow Area Haul Road		X		
8. Sediment Deposition		X		
B. Drainage Control Systems				
1. Cover Terrace		X		
2. Borrow Area Drainage Terrace		X		
3. Riprap Downchutes		X		
4. Grassed and Riprap Swales		X		
5. Drainage Layer Toe Drains		X		
6. Riprap Slope Protection		X		
7. Earth Dike (Borrow Area Haul Road)		X		
8. Culvert at Tracey's Creek		X		
9. Sediment Deposition		X		
C. Other Inspections				
1. Security (Perimeter Fence and Locking Gates)		X		
2. Groundwater Monitoring Wells		X		
3. Gas Monitoring Wells		X		

Comments (If Maintenance Required is Checked "YES" for any Items, a Comment is Required):

Note: Any woody vegetation will be removed as part of the routine maintenance occurring in the 4th quarter.

Southern Recycling Center Stormwater Management Inspection Checklist

Date: 6/30/2017
 Time: 9:30 a.m. to noon
 Weather: Clear

Inspector's Name(s): Mark Morris
 Inspector's Title(s): EMM
 Inspector's Contact Info: 443-623-0605

Structural Stormwater Management Controls	Operating Effectively	Maintenance Required	Date Scheduled	Date Completed
	Y / N	Y / N		
SWM #1 Wet Pond	YES	NO		
SWM #2 Wet Pond	YES	NO		
SWM #3 Sand Filter	YES	NO		
SWM #4 Sand Filter	YES	NO		
SWM #5 Bioretention	YES	NO		
Describe Corrective Actions				
SWM Facility	Action Item			
_____	_____			
_____	_____			
_____	_____			
_____	_____			

Inspection Items	Check When Feature Is Inspected		
	SWM #1	SWM #2	
Stormwater Management Ponds			
1. Erosion	X	X	
2. Vegetative Cover (other than erosion)	X	X	
3. Seepage Through Pond Embankment	X	X	
4. Woody Vegetation	X	X	
5. Holes in Embankment (burrowing animals)	X	X	
6. Trash Racks	X	X	
7. Inside Riser and Barrel Structures	X	X	
8. Riprap Inlet and Outfall Aprons	X	X	
9. Pond Culvert Inlet Structures	X	X	
10. Dewatering Devices	X	X	
11. Sediment Deposition	X	X	
12. Pond/Discharge Clarity	X	X	
Sand Filters / Bioretention			
1. Erosion	X	X	X
2. Vegetative Cover (other than erosion)	X	X	X
3. Seepage Through Pond Embankment	X	X	X
4. Woody Vegetation	X	X	X
5. Holes in Embankment (burrowing animals)	X	X	X
6. Trash Racks	X	X	X
7. Inside Riser and Barrel Structures	X	X	X
8. Riprap Inlet and Outfall Aprons	X	X	X
9. Pond Culvert Inlet Structures	X	X	X
10. Dewatering Devices	X	X	X
11. Sediment Deposition	X	X	X
12. Pre-Treatment Devices	X	X	X
13. Cleanouts and Underdrains	X	X	X

Southern Recycling Center Quarterly Visual Monitoring Form

Fill out a separate form for each outfall sampled.

NOT APPLICABLE FOR INSPECTION DATED 6/30/2017

Sample Location _____
 Outfall ID: _____

 Collector's Name and Title _____
 Examiner's Name and Title _____

 Quarter / Year: _____
 Date & Time Sample Collected: _____
 Date & Time Sample Examined: _____
 Runoff Source: _____
 Rainfall Snowmelt

Previous Storm Ended > 72 hours before
 start of this storm? * (circle) No Yes
 Qualifying Storm Event (> 1/2")? No Yes

Inspection Parameters (circle)

Color	None	Yellow	Brown	Red	Gray
	Other (describe) _____				
Clarity	Clear	Suspended Solids	Milky / Cloudy		Opaque
	Other (describe) _____				
Oil Sheen	None	Rainbow sheet	Floating oil	Slick	
	Other (describe) _____				
Odor	None	Chemical	Musty	Rotten Eggs	Sewage
	Oil / Petroleum		Other (describe)		Sour Milk

Floating Solids	None	Suds	Oily Film	Garbage	Sewage
	Waterfowl Excrement		Other (describe)		_____
Suspended Solids	No	Yes	Describe _____		

LEAVE SAMPLE UNDISTURBED FOR 30 MINUTES

Settled Solids **	No	Yes	Describe _____
Foam (gently shake sample)	No	Yes	Describe _____
Other Obvious Indicators of Stormwater Pollution	No	Yes	Describe _____

Detail any concerns, additional comments, descriptions of pictures taken, and any corrective actions taken below.
 (attach additional sheets as necessary)

Stormwater Collector's Signature and Date: _____

Stormwater Examiner's Signature and Date: _____