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UNITED STATES ENVIRONMENTAL PROTECTION AGENCY WASHINGTON, DC 20460

Annual Reporting Form

A. GENERAL INFORMATION	
1. Facility Name: NORTHERN RECYCILNG CENTER	
2. NPDES Permit Tracking No.: REGISTRATION # 12SW0298 NPDES # MDR000298	
3. Facility Physical Address: 100 Dover Road, Glen Burnie, Maryland 21600	
a. Street: Dover Road	
b. City: Glen Burnie	c. State: MD d. Zip Code: 21600
4. Lead Inspectors Name: Mark Morris	Title: Environmental Monitoring Manager
Additional Inspectors Name(s): Steve Krajcsik, Mike Lunghi	
5. Contact Person: Mark Morris	Title: Environmental Monitoring Manager
Phone: 410-222-6108	aacounty.org
6. Inspection Date: November 21, 2019 10:30 a.m. to 1:30 p.m.	
B. GENERAL INSPECTION FINDINGS	
As part of this comprehensive site inspection, did you inspect all potential pollutant sou X YES □ NO	rces, including areas where industrial activity may be exposed to stormwater?
If NO, describe why not:	
NOTE : Complete Section C of this form for each industrial activity area inspected and inc may be exposed to stormwater.	luded in your SWPPP or as newly identified in B.2 or B.3 below where pollutants
2. Did this inspection identify any stormwater or non-stormwater outfalls not previously ide	entified in your SWPPP? YES X NO
If YES, for each location, describe the sources of those stormwater and no	n-stormwater discharges and any associated control measures in place:

NPDES Permit Tracking No.:
3. Did this inspection identify any sources of stormwater or non-stormwater discharges not previously identified in your SWPPP? YES X NO
If YES, describe these sources of stormwater or non-stormwater pollutants expected to be present in these discharges, and any control measures in place:
4. Did you review stormwater monitoring data as part of this inspection to identify potential pollutant hot spots?
If YES, summarize the findings of that review and describe any additional inspection activities resulting from this review:
5. Describe any evidence of pollutants entering the drainage system or discharging to surface waters, and the condition of and around outfalls, including flow dissipation measures to prevent scouring: None observed and condition of and around outfalls were in good condition.
None observed and condition of and around outraits were in good condition.
6. Have you taken or do you plan to take any corrective actions, as specified in Part IV of the permit, since your last annual report submission (or since you received
authorization to discharge under this permit if this is your first annual report), including any corrective actions identified as a result of this annual comprehensive site inspection? X YES NO
If YES, how many conditions requiring review for correction action as specified in Parts IV.A and IV.B were addressed by these corrective actions? See attached 4th Quarter Routine Inspection for additional details.
NOTE: Complete the attached Corrective Action Form (Section D) for each condition identified, including any conditions identified as a result of this comprehensive stormwater inspection.

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C. INDUSTRIAL ACTIVITY AREA SPECIFIC FINDINGS		
Complete one block for each industrial activity area where pollutants may	be expose	d to stormwater. Copy this page for additional industrial activity areas.
In reviewing each area, you should consider: Industrial materials, residue, or trash that may have or could come in Leaks or spills from industrial equipment, drums, tanks, and other composition of tracking of industrial or waste materials from areas of no expension of the composition of the comp	ontainers; osure to exp	posed areas; and
INDUSTRIAL ACTIVITY AREA: Recycling Center		
Brief Description: Recycling Center allows citizens to drop off recyclables in state of the	specific con	tainers.
Are any control measures in need of maintenance or repair?	☐ YES	X NO
Have any control measures failed and require replacement?	☐ YES	X NO
Are any additional/revised control measures necessary in this area?	☐ YES	X NO
If YES to any of these three questions, provide a description of the problem: Corrective Action Form):	: (Any nece	ssary corrective actions should be described on the attached
INDUSTRIAL ACTIVITY AREA: Operations and Maintenance Area		
Brief Description: Operations and maintenance area is a typical administrative	e office and	mechanic shop. No discharges are allowed to leave this area.
2. Are any control measures in need of maintenance or repair?	X YES	□NO
3. Have any control measures failed and require replacement?	☐ YES	XNO
Are any additional/revised c necessary in this area?	☐ YES	XNO
If YES to any of these three questions, provide a description of the problem: Corrective Action Form)	(Any nece	ssary corrective actions should be described on the attached
Structure #4 next to the maintenance area does not appear to be draining prope See attached 4th Quarter Routine Inspection for additional details.	rly.	
INDUSTRIAL ACTIVITY AREA: Landfill Closed Cells		
Brief Description:		
NRC has two (2) closed cells, as per the consent agreement with MDE during the	e late 1990	s.
2. Are any control measures in need of maintenance or repair?	☐ YES	XNO
3. Have any control measures failed and require replacement?	☐ YES	XNO
4. Are any additional/revised BMPs necessary in this area?	☐ YES	XNO
If YES to any of these three questions, provide a description of the problem: Corrective Action Form)	(Any neces	ssary corrective actions should be described on the attached

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		NOTE: Copy this page and attach additional pages as necessary
INDUSTRIAL ACTIVITY AREA:		
1. Brief Description:		
Are any control measures in need of maintenance or repair?	☐ YES	□NO
Have any control measures failed and require replacement?	YES	□ NO
Are any additional/revised BMPs necessary in this area?	YES	□ NO
		(Any necessary corrective actions should be described on the attached
Corrective Action Form)	ie problem.	(Any necessary corrective actions should be described on the attached
INDUSTRIAL ACTIVITY AREA:		
Brief Description:		
2. Are any control measures in need of maintenance or repair?	☐ YES	□NO
3. Have any control measures failed and require replacement?	☐ YES	□NO
4. Are any additional/revised BMPs necessary in this area?	☐ YES	□NO
If YES to any of these three questions, provide a description of th	e problem:	(Any necessary corrective actions should be described on the attached
Corrective Action Form)		
		'
INDUSTRIAL ACTIVITY AREA:		
Brief Description:		
	_	
Are any control measures in need of maintenance or repair?	☐ YES	□ NO
Have any control measures failed and require replacement?	☐ YES	□ NO
4. Are any additional/revised BMPs necessary in this area?	☐ YES	□NO
If YES to any of these three questions, provide a description of th Corrective Action Form)	e problem:	(Any necessary corrective actions should be described on the attached

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D. CORRECTIVE ACTIONS
Complete this page for each specific condition requiring a corrective action or a review determining that no corrective action is needed. Copy this page for additional corrective actions or reviews.
Include both corrective actions that have been initiated or completed since the last annual report, and future corrective actions needed to address problems identified in this comprehensive stormwater inspection. Include an update on any outstanding corrective actions that had not been completed at the time of your previous annual report.
1. Corrective Action # 1 of 1 for this reporting period. See attached 4th Quarter Routine Inspection for additional details.
2. Is this corrective action:
☐ An update on a corrective action from a previous annual report; or
X A new corrective action?
3. Identify the condition(s) triggering the need for this review:
☐ Unauthorized release or discharge
☐ Numeric effluent limitation exceedance
☐ Control measures inadequate to meet applicable water quality standards
☐ Control measures inadequate to meet non-numeric effluent limitations
X Control measures not properly operated or maintained
☐ Change in facility operations necessitated change in control measures
☐ Average benchmark value exceedance
☐ Other (describe):
4. Briefly describe the nature of the problem identified: See attached 4th Quarter Inspection for details on all corrective actions.
Structure #4 next to the maintenance area does not appear to be draining properly. See attached 4th Quarter Routine Inspection for additional details.
See attached 4 Quarter (Youthe hispection for additional details).
5. Date problem identified: See attached 4th Quarter Routine Inspection for additional details.
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See attached 4th Quarter Routine Inspection for additional details.
See attached 4 th Quarter Routine Inspection for additional details. 6. How problem was identified:
See attached 4 th Quarter Routine Inspection for additional details. 6. How problem was identified: Comprehensive site inspection
See attached 4 th Quarter Routine Inspection for additional details. 6. How problem was identified: Comprehensive site inspection Quarterly visual assessment
See attached 4 th Quarter Routine Inspection for additional details. 6. How problem was identified: Comprehensive site inspection Quarterly visual assessment X Routine facility inspection
See attached 4 th Quarter Routine Inspection for additional details. 6. How problem was identified: Comprehensive site inspection Quarterly visual assessment X Routine facility inspection Benchmark monitoring
See attached 4 th Quarter Routine Inspection for additional details. 6. How problem was identified: Comprehensive site inspection Quarterly visual assessment X Routine facility inspection Benchmark monitoring Notification by EPA or State or local authorities
See attached 4 th Quarter Routine Inspection for additional details. 6. How problem was identified: Comprehensive site inspection Quarterly visual assessment X Routine facility inspection Benchmark monitoring Notification by EPA or State or local authorities Other (describe): 7. 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: Inspect and if necessary perform maintenance to Structure #4 per the as-built drawings to improve infiltration.
See attached 4 th Quarter Routine Inspection for additional details. 6. How problem was identified: Comprehensive site inspection Quarterly visual assessment X Routine facility inspection Benchmark monitoring Notification by EPA or State or local authorities Other (describe): 7. 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:
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D. CORRECTIVE ACTIONS
Complete this page for each specific condition requiring a corrective action or a review determining that no corrective action is needed. Copy this page for additional corrective actions or reviews.
Include both corrective actions that have been initiated or completed since the last annual report, and future corrective actions needed to address problems identified in this comprehensive stormwater inspection. Include an update on any outstanding corrective actions that had not been completed at the time of your previous annual report.
1. Corrective Action # of for this reporting period.
2. Is this corrective action:
☐ An update on a corrective action from a previous annual report; or
☐ A new corrective action?
3. Identify the condition(s) triggering the need for this review:
☐ Unauthorized release or discharge
☐ Numeric effluent limitation exceedance
☐ Control measures inadequate to meet applicable water quality standards
☐ Control measures inadequate to meet non-numeric effluent limitations
☐ Control measures not properly operated or maintained
☐ Change in facility operations necessitated change in control measures
Average benchmark value exceedance
Other (describe):
4. Briefly describe the nature of the problem identified:
5. Date problem identified:
6. How problem was identified:
☐ Comprehensive site inspection
☐ Quarterly visual assessment
☐ Routine facility inspection
☐ Benchmark monitoring
☐ Notification by EPA or State or local authorities
Other (describe):
7. 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:
8. Did/will this corrective action require modification of your SWPPP?
9. Date corrective action initiated:
10. Date correction action completed:/ completed://
11. If corrective action not yet completed, provide the status of corrective action at the time of the comprehensive site inspection and describe any remaining steps (including timeframes associated with each step) necessary to complete corrective action:

E. ANNUAL REPORT CERTIFICATION
1. Compliance Certification
Do you certify that your annual inspection has met the requirements of Part 4.2 of the permit, and that, based upon the results of this inspection, to the best of your knowledge, you are in compliance with the permit? X YES NO
If NO, summarize why you are not in compliance with the permit:
· ·
2. Annual Report Certification
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.

Authorized Representative Printed Name: NPDES Permit Tracking No.:

Title: $\begin{bmatrix} E & N & V & I & R. \end{bmatrix} \begin{bmatrix} M & O & N & I & T. \end{bmatrix} \begin{bmatrix} M & A & N & A & G & E & R \end{bmatrix}$

NRC Quarterly Routine Inspection Certification (4th Quarter 2019)

	In Compliance	
Location	(Yes/No) *	
Recycling Center		
Main Gate, Main Haul Road and Paved		
Surfaces	YES	
Recycling Center Area	YES	
Oil, Batteries and AntiFreeze Recycling		
Area	YES	
Maintenance Area		
Operations and Maintenance Area	YES	
Recycling Yard	YES	
Post Closure Inspection	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 Manage	er		
Signature:	Mark Mont	Date:	11/21/2019	

Note: This routine inspection was completed on a cool sunny Fall day.

NRC Quarterly Routine Inspection Corrective Action Form
TAC 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: 11/21/2019
Identify the condition(s) triggering the need for this action (Check box):
Unauthorized release or discharge
Control measures inadequate
X 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:
No litter fencing (approx. 75 feet) along north side (along road) of Structure #6 (lower area of
Recycling Center), which is allowing debris to blow into Structure #6. Completed
South side of South Mound has vertical rills from erosion. Completed
South Mound has bare spot next to ring road above Structure #5. Completed
4. North Mound both access roads at turn from ring road to Dover Road have deep ruts. Completed
5. Structure #4 does not appear to be draining properly.
6. Outfall #9 is eroding under culvert discharge pipe. Completed
7. Access roads and ring road on South/North Mounds is eroding with deep ruts and washouts. Completed
8. Poor drainage to Structure #4 and #5 from grass swales. Completed
9. Stormwater Management Structure #3 is eroding in upper southwest corner of structure. Completed Output Description:
10. Windblown litter is slowly becoming an issue at all facilities except SRC. Completed
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:
Item #1. Install new litter fencing (approx. 75 feet) along north side (along road) of Structure #6
(Lower Area of Recycling Center) in FY2018/2019. 6/2019
Item #2. Fill, grade and seed vertical rills with straw cover in FY2019/2020. 10/2019
Item #3. Fill bare spot with top soil and reseed with straw cover in FY2019. 5/2019
Item #4. Fill ruts with millings at both turns from ring road to access road going to Dover Road in
FY 2019. 6/2019
Item #5. Inspect and if necessary perform maintenance to Structure #4 per the as-built drawings
to improve infiltration in FY2019/FY2020.
Item #6. Repair Outfall #9 to stop washout and erosion under discharge pipe in FY2019. 2/2019
Item #7. Fill, grade and roll all roads and have contractor propose options for preventing erosion and
washouts on steep portions of access roads to ring road in FY2019/2020. (See note below). 10/2019
Item #8. Install stone rip rap in ditches to Structures #4 and #5 in FY2019/2020. 5/2019
Item #9. Fill-in void with #2 stone over filter fabric to stablize area in FY2020. 10/2019
Item #10: Pickup litter from around site and from stormwater management structures in FY2020. 10/2019
Date corrective action to be completed: FY2020

Name of person responsible: Items #5: Michael Porath

Note: Consider adding portland cement to asphalt millings on steep portions of road to prevent washout and to buildup flat portions of access road where washouts repeatly occur.

Northern Recycling Center Inspection Checklist								
	Quarter	ter 1	Quarter	ter 2	Qua	Quarter 3	Quarter 4	ter 4
Date of Inspection:							11/21/2019	2019
Main Gate, Main Haul Road and Paved Surfaces	SAT	UNSAT	SAT	UNSAT	SAT	UNSAT	SAT	UNSAT
Upper and Lower Area Clean							×	
Entrance/Exit Roads and Paved Area Clean							×	
Recycling Area Clean, Dry, and Orderly							×	
Recycling Center Area	SAT	UNSAT	SAT	UNSAT	SAT	UNSAT	SAT	UNSAT
Attendant on Duty							×	
Stormdrain Inlet Grates Clean							×	
Signs in Place							×	
Spills/Leaks or Containers Leaking							×	
Trash Cans Empty							×	
HazMat Locker Secure/Clean							×	
Latex Paint Dumpster Organized/No Leaks							×	
Oil, Batteries and AntiFreeze Recycling Area	SAT	UNSAT	SAT	UNSAT	SAT	UNSAT	SAT	UNSAT
Check Fluid Levels							×	
Full Tanks Locked							×	
Screens Cleaned							×	
Tanks Cleaned							×	
Containment Basins Clean							X	
Sorbent Mats and Material Maintained or Disposed of Properly							×	
No Leaks/Spills							×	
Drain Valves Shut							×	
Batteries Stored in Metal Locker							×	
Pavement Clean (Powerwash Needed?)							×	
Trash Cans Emptied							X	

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

Note: Windblown litter is slowly becoming an issue at Recycling Centers except SRC. See Item #10 on Corrective Action Page. Completed

Northern Recycling Center Operations and Maintenance Area/Recycling Yard Inspection Checklist	ea/Recycling	g Yard Inspec	tion Check	list				
	Qua	Quarter 1	Qua	Quarter 2	Qua	Quarter 3	Quarter 4	ter 4
Date of Inspection:							11/21	11/21/2019
Operations and Maintenance Area	SAT	UNSAT	SAT	UNSAT	SAT	UNSAT	SAT	UNSAT
Shop Floor Clean and Free of Debris							×	
Sorbent Material in Place and Clean, Used Sorbent Disposed of								
Properly	7.7						×	
Drip Pans Under Equipment Empty							×	
No Leaks/Spills in Maintenance Building or adjacent Parking								
Areas							×	
Materials/Equipment Stored All Drums have Lids							×	
Adjacent Parking Areas Clean							×	
Shed Area Clean							×	
Recycling Yard	SAT	UNSAT	SAT	UNSAT	SAT	UNSAT	SAT	UNSAT
Organic Debris Area Clean and Orderly - Police Litter							×	
Asphalt Shingles, Tires, Rubble Areas Clean and Orderly							×	
Signs in Place							×	
Drainage System Stable (Erosion)							×	
Sediment Deposition in Perimeter Swales							×	

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

Glen Burnie Landfill Post-Closure Inspection Checklist

Inspector's T	itle(s)	Mark Morris EMM 443-623-0605	
Maintenanc	e Required	Date	Date
Yes	No	Scheduled	Completed
			•
T	X	I	
	X		
	X		
	X		
	X		
	X		
			L
	X		
	X		
	Х		
	X		
	X		
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	X		
	X		
	X		
			:
	Inspector's C Maintenance Yes S" for any Items	Maintenance Required Yes No X X X X X X X X X X X X X X X X X X	Inspector's Title(s) Inspector's Contact Info Maintenance Required Yes No Scheduled X X X X X X X X X X X X X

Northern Recycling Center Stormwater Management Inspection Checklist

Date: Time:	11/21/2019 10:30 a.m. to 1:30 p	m	Inspe	pector's Name(s): Mark Morris			
Weather:	Sunny/Cool		Inspector's Title(s) EMM				
			Inena	ctor's Contact	Info	443-623-0605	
			mspe	ctor's contact	1110	443-023-0003	
				Operating	Maintenance		
				Effectively	Required	Date	Date
				Y/N	Y/N	Scheduled	Completed
Structural S	tormwater Managem	ent Controls					
	Detention Pond			YES	NO		
	Detention Pond			YES	NO		
	Detention Pond			YES	NO		
	Bioretention/Infiltratio	n		NO	YES	FY2019/20	
	Detention Pond			YES	NO		
	Detention Pond			YES	NO		
Describe Co	rrective Actions						
	SWM Facility	Action Item					
	#4 & #5	Grass swale to stone					s swale with
		stone rip rap as part					
	#4	Structure #4 does no					
	#9	Outfall #9 is eroding					
*	#3	Structure #3 is eroding					
	Note:	Unwanted vegetation	will be	removed as part	of routine mainter	nance occurring in	the 4th quarter.
Inspection It	tems				eature Is Inspe		
	Management Ponds			Structure#1	Structure#2	Structure#3	Structure#4
1. Erosion	- Carray (ath an than an	- In and		X	X	X	X
	e Cover (other than er			X	X	X	X
	Through Pond Emban	kment		X	X	X	X
4. Woody Ve	egetation Embankment (burrowin	a animala)		X	X	X	X
6. Trash Rad		g animais)			X	X	X
	er and Barrel Structure	20		X	X	X	X
	et and Outfall Aprons	28		×	×	X	X
	(SWM) Culvert Inlet St	ruoturos		×	×	X	X
10. Dewater		ructures		×	×	×	X
11. Sedimen				x	x	x	X
	tment Devices			x	x	x	X
	scharge Clarity			X	X	X	X
10. 1 0110/010	onargo olarity				Λ		
Stormwater	Management Ponds			Structure#5	Structure#6		
1. Erosion	3			X	X		
	e Cover (other than ero	osion)		X	X		
	Through Pond Emban			X	X		
4. Woody Ve				X	X		
	mbankment (burrowin	g animals)		X	X		
6. Trash Rad				X	X		
	er and Barrel Structure	es	0.0000	X	X		*****
	et and Outfall Aprons			X	X		
	(SWM) Culvert Inlet St	ructures		X	X		
10. Dewater				X	X		
11. Sedimen				X	X		
12. Pre-Trea	tment Devices			X	X		
13 Cleanous	te and Underdraine				~		