

2.

Texas Commission on Environmental Quality Municipal Solid Waste Facility Waste-As-Ballast Placement Record

This form is to be completed by the landfill manager or designated representative for all landfilled areas utilizing waste as ballast. One form will be developed for each area (or combination of areas) described by approved liner evaluation reports. This form is to be submitted with the Ballast Evaluation Report (BER) for the evaluated area and may be referenced by the Professional of Record (POR) in order to verify that the placement of ballast is in compliance with the Soils and Liner Quality Control Plan (SLQCP). The site operator must prepare and sign supporting documentation on a daily basis verifying the area of waste placement, the waste material in the first 5 feet of waste was free of brush and large bulky items, daily operation of the pressure relief/dewatering system, and a wheeled trash compactor having a minimum weight of 40,000 pounds was used.

1. General Information

| Area documented by this record (provide site grid coordinates of each corner) | | |
|--|--|--|
| | | |
| Soils and Liner Evaluation Report and Geomembrane Liner Evaluation Report document date(s) and approval date(s) for this area | | |
| | | |
| Date of initial waste placement | | |
| Date of completion of first 5 feet of waste in place over entire area | | |
| Total required waste-as-ballast thickness for this area (Note: Calculations for determining the required thickness of waste as ballast are included with the SLQCP/BER for this area.) | | |
| Date when minimum required thickness of waste was achieved | | |
| Waste Equipment Used | | |
| What type of compaction equipment was used? | | |
| Did the compactor have a minimum gross weight of 40,000 pounds? | | |
| Was this compactor used throughout the entire period covered by this record? | | |
| If a minimum 40,000 pound wheeled trash compactor was not used throughout the period covered by this record, attach documentation of initial and final survey data (if not previously provided as part of the BER) of the ballasted area and measurements of truck | | |

| | weights at the scale house for the time period covered by the BER for use in determining place waste density. Is this documentation complete and accurate? | | |
|-----|--|--|--|
| 3. | First Waste Lift Considerations | | |
| | Describe type(s) of waste placed in first 5 feet of waste over the top of the liner protective cover | | |
| | Does the first 5 feet of waste contain any br | rush or large bulky waste items which would ch cannot be compacted to the required density? | |
| 4. | Waste Compaction Methods | | |
| | Approximate loose waste layer thickness prior to compaction | | |
| | Minimum number of compactor passes for each waste layer | | |
| | Maximum slope of compacted waste layers | | |
| 5. | Pressure Relief/Dewatering System | | |
| | Was the pressure relief/dewatering system (if required) operated continuously during the period covered by this record? | | |
| | Is the pressure relief/dewatering system presently in operation? | | |
| Sig | gnature of Permittee or Operator | | |
| des | e waste overlying the area described in this scribed in this record and in accordance with erating Plan | record has been placed and compacted as h the Soils and Liner Quality Control Plan and Site | |
| - | (signature) | (typed or printed name) | |
| - | (title) | (date signed) | |
| - | (phone number) | (fax number | |
| | (company or business name) | | |
| | (address_cit | y, state, zip code) | |

Note: This completed form must be submitted with the BER and placed in the Operating Record and be available for review.