

2008 ANNUAL FACILITY REPORT



GENERAL INFORMATION

(Must be completed for each facility on site)

Today's Date: 4/06/09

1. Facility Location

| | |
|----------------------------------|-------------------------------|
| Facility Name TOWN OF SUNAPEE | Street Address 89 AVERY RD |
| Town SUNAPEE | State/ZIP N.H. 03782 |

2. Permittee Information

| | |
|--|---------------------------------|
| Name TOWN OF SUNAPEE | Mailing Address 23 EDMONT RD |
| Town SUNAPEE | State/ZIP N.H. 03782 |
| Email address for distribution of forms: tony@town.sunapee.nh.us | |

3. Operational Status (check one)

- Operated all of 2008
 Did not receive waste in 2008
 Operated part of 2008 only. Stopped/started receiving waste on _____, 2008

4. For Municipal Facilities

Check which collection and recycling options are available to residents of your community. Please list all haulers that operate in your town

| MSW | Recycling | Service Options |
|-------------------------------------|-------------------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Curbside, Municipal Service |
| <input type="checkbox"/> | <input type="checkbox"/> | Curbside, Municipal Contract with Private Hauler |
| <input type="checkbox"/> | <input type="checkbox"/> | Curbside, Individual Contract with Private Hauler |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Residential Drop-off |

| Name of Hauler | Uses transfer station | | Name of Hauler | Uses transfer station | |
|----------------|-----------------------|-------------------------------------|----------------|-------------------------------------|-----------------|
| G.D.S. | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> | Gary's Disposal |
| Naughton | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | Yes |
| | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | Yes |
| | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | Yes |
| | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | Yes |
| | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | Yes |
| | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | Yes |

5. For Municipal Facilities Only - Financing of Facility

What method of financing is used to fund facility?

- Annual User Fees Yes No If yes, how much per household? _____
 Pay As You Throw Yes No If yes, how much per bag? _____

Budget Line Item Yes No If yes, how much per year? 455,491
(If a combination of financing, please indicate all types and amounts.)

6. Hours of Operation

| <i>Normal Hours of Operation</i> | | | |
|------------------------------------|-----------------------------|-----------------|-----------------------------|
| <i>Monday</i> | <u>8:00-4:15</u> | <i>Thursday</i> | <u>8:00-4:15</u> |
| <i>Tuesday</i> | <u>CLOSED</u> | <i>Friday</i> | <u>8:00-4:15</u> |
| <i>Wednesday</i> | <u>CLOSED</u> | <i>Saturday</i> | <u>8:00-4:15</u> |
| | | <i>Sunday</i> | <u>8:00-11:45</u> |
| <i>Seasonal Hours of Operation</i> | | | |
| <i>Monday</i> | <u> </u> | <i>Thursday</i> | <u> </u> |
| <i>Tuesday</i> | <u> </u> | <i>Friday</i> | <u> </u> |
| <i>Wednesday</i> | <u> </u> | <i>Saturday</i> | <u> </u> |
| | | <i>Sunday</i> | <u> </u> |

7. Contact Information

Who should be contacted with waste disposal or recycling related questions?

| | | |
|--|-------------------------------|----------------------------------|
| Name TONY BERGERON | Mailing Address 621 RTE 11 | |
| Town SUNAPEE | State/ZIP N.H. 03782 | Email tony@town.sunapee.nh.us |
| Daytime Telephone Number 603-763-5060 | | |

8. Additional Questions: (Please answer the following questions so that we can update information on your facility)

- | | Yes | No |
|---|-------------------------------------|-------------------------------------|
| 1. Does your town have a mandatory recycling ordinance? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Do you offer electronic waste recycling? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. Do you charge for construction and demolition waste disposal? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4. Do you charge for bulky items like furniture? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 5. Do you charge for white goods disposal? | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 6. Do you have a town/city recycling committee? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 7. Do you accept sharps, needles or medical waste? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 8. Has anyone at your facility been injured by a medical sharps (needle)? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 9. Does your town/city use a special revenue or enterprise fund to account for revenues from recycling, fees and charges, sale of Pay as You Throw Bags, etc. | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

**2008 ANNUAL FACILITY REPORT FOR TRANSFER STATION/
PROCESSING FACILITY**



This form must be completed for the facility types listed below in Question 10. Separate forms must be completed for other types of activities at this location, or for other facilities under your jurisdiction.

Today's Date: 4/6/09

9. Name of Facility: Sunapee Transfer Station

10. Facility Types:

| | | | |
|-------------------------------------|-----------------------------------|--------------------------|----------------------------|
| <input type="checkbox"/> | C&D Processing Facility | <input type="checkbox"/> | Electronics Demanufacturer |
| <input checked="" type="checkbox"/> | Transfer Station/Recycling Center | <input type="checkbox"/> | Recycling Center Only |
| <input type="checkbox"/> | Material Recovery Facility | <input type="checkbox"/> | Composting Facility |

11. Waste Accepted

Please indicate measurement units as follows: T=Tons, CY(L)=Cubic Yards Loose, CY(C)=Cubic Yards Compacted. **Add to the amount of waste the letter E for estimate or the letter A for actual.**

If you prepare a separate calendar year report which provides the information requested below, that report may be submitted instead of completing these questions. **Use a separate sheet for additional entries if necessary.**

| Waste Type | List New Hampshire Towns Using Facility | Amount | List Other States Using Facility | Amount | Disposal Destination |
|---------------------------------|---|----------|----------------------------------|--------|----------------------|
| Residential MSW | SUNAPEE | 1125.7 T | | | NCES |
| | SPRINGFIELD | | | | |
| | | | | | |
| Commercial/ Industrial MSW | | | | | |
| | | | | | |
| | | | | | |
| Construction/ Demolition Debris | SUNAPEE | 787.93 | | | NCES |
| | | | | | |
| | | | | | |
| Other | SUNAPEE | 694.17 | | | |
| | SPRINGFIELD | | | | |

12. Compost

| | | |
|---|-------------|------|
| Amount of leaf and yard waste added to compost pile in 2008 | 85.5 | Tons |
| Amount of food waste added to compost pile in 2008 | 672 (BRUSH) | Tons |

13. Recycling

| Please list tonnages and ultimate destination (market) for recyclable materials. Do you need to convert different weights to tons? See the attached conversion chart. | | |
|---|-------------------------|---------------|
| Material | Quantity (2008) In tons | Destination |
| Single Stream Recycling | | |
| Dual Stream Recycling | | |
| If neither Single or Dual Stream complete the following items as appropriate | | |
| All containers commingled (metals & plastics) | | |
| Cans-Aluminum | 14.36 | NRRA |
| Cans-Commingled (steel & aluminum) | | |
| Cans-Steel | 18.63 | NRRA |
| Corrugated Cardboard | 78.75 | APC |
| Electronics | 12.51 | NRRA |
| Glass (including glass aggregate) | 183.92 | NRRA |
| Mixed Paper (including magazines) | 118.39 | NRRA & APC |
| Newspaper | 66.35 | APC |
| Office Paper | | |
| Plastic-commingled (PETE & HDPE) | | |
| Plastic-HDPE | 10.57 | NRRA |
| Plastic-PETE | 13.54 | NRRA |
| Propane Tanks (skip if already counted in scrap metal) | 279 EACH | NRRA |
| Scrap Metal | 183.92 | NRRA |
| Textiles | 35 EST. | THRIFT & NRRA |
| Other Waste Streams | 14.56 | NRRA |
| Total (in tons): | 694.17 | |
| Do you operate a swap shop? <input checked="" type="checkbox"/> Yes or <input type="checkbox"/> No | | |

14. Equipment Survey

| What equipment does the municipality own? Lease? | | | | | |
|--|-------------------------------------|--------------------------|--------------------|-------------------------------------|--------------------------|
| Item | Own? | Lease? | Item | Own? | Lease? |
| Horizontal baler | <input type="checkbox"/> | <input type="checkbox"/> | Roll off Container | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Vertical baler | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Trailer (Storage) | <input type="checkbox"/> | <input type="checkbox"/> |
| Forklift/Skid Steer | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Plastic granulator | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Scale | <input type="checkbox"/> | <input type="checkbox"/> | Glass crusher | <input type="checkbox"/> | <input type="checkbox"/> |

Complete and return this form by MARCH 31, 2009 to:

Department of Environmental Services
 Waste Management Division - SWTAS
 29 Hazen Drive; PO Box 95
 Concord, NH 03302-0095

Or email to:
donald.maurer@des.nh.gov

**If you have any questions, please call the Solid Waste Technical Assistance Section at (603) 271-3713.
 RETAIN A COPY OF THIS REPORT FOR YOUR RECORDS!**