2008 ANNUAL FACILITY REPORT

GENERAL INFORMATION

(Must be completed for each facility on site)



Today's Date:

MAR 2 5 2009

	1		· · · · · · · · · · · · · · · · · · ·					
Facility Name Unity Lame	a A.);	Street Address						
	Ur II	mica mine rd						
Town		State/7IP						
clnity		N.H.	03603					
2. Permittee Inforn	nation							
Name	. 0 . 5 1	Mailing A	ddress		····			
Jown of	Town of Unity 13 Center rd #3							
Town Charles	Town of Unity 13 Center rd #3 Town Charlestown State/ZIP N.H. 03603 Email address for distribution of forms: Unity @ Valley. Net							
Email address for dist		[[N-[] ·	@ Dalley Nas	<u></u>	·			
man addition for disc		· whity	e Jamey. We	Y				
3. Operational State	us (check one)							
Operated all of 20	008		Did n	ot receive v	vaste in 20	80		
5 7°		3						
X Operated part of 2	008 only. (Stoppe	ed/started recei	ving waste on 7-31, 200)8				
A. East Maniainal E	11122 E							
4. For Municipal Fa			11.1. 1.1		To 1	1		
		options are ava	ilable to residents of your	r community	y. Please li	ist all		
haulers that operate in	your town							
MSW R	ecycling	Sarvias On	tions					
	ecycling	Service Options Curbside, Municipal Service						
	Curbside, Municipal Contract with Private Hauler							
	Curbside, Individual Contract with Private Hauler							
 <u> </u>	Residential Drop-off							
	\square	Residential	Drop-off		,,			
X	<u> </u>	Residential	Drop-off					
Name of Hauler	Uses tran	Residential	Name of Hauler	Uses tran	nsfer statio	n		
Name of Hauler	Uses tran		-	Uses trar		n		
4		sfer station	-		nsfer statio	n		
Barys	Yes	nsfer station	-	Yes	nsfer statio	n		
Barys	Yes Yes	nsfer station No 🔀 No 🔀	-	Yes Yes	nsfer statio No No	n I		
Barys	Yes Yes Yes	nsfer station No 🔀 No 🛣 No 🖸	-	Yes Yes Yes	nsfer statio No No No	n		
Barys	Yes	No No No No	-	Yes Yes Yes Yes Yes	nsfer statio No No No No No	n I		
Barys	Yes Yes Yes Yes Yes Yes	No N	-	Yes _	nsfer statio No No No No No No			
Barys	Yes	No N	-	Yes Yes Yes Yes Yes Yes Yes	No			
Barys	Yes	No N	Name of Hauler	Yes Yes Yes Yes Yes Yes Yes	No			
Garys GDS 5. For Municipal Fa What method of finance	Yes	No N	Name of Hauler	Yes Yes Yes Yes Yes Yes Yes	No			
Carrys GDS 5. For Municipal Fa	Yes	No N	Name of Hauler	Yes	No			

Budget Line Item Yes X		how much per year?	\$50,000
	of financing, please ind	licate all types and amo	unts.)
6. Hours of Operation			
Mondon	Normal Hours of O	•	
Monday Tugaday		Thursday Eniden	
Tuesday 1 to 5 P	<u> </u>	Friday	
Wednesday 1 to 5 P	<u>- 1 </u>	Saturday Sunday	8AM to 4PM
		Sumay	
	Seasonal Hours of O	peration	
Monday		Thursday	
Tuesday		Friday	
Wednesday		Saturday	
		Sunday	
Name Tammy Down Secret Town Charlestown Daytime Telephone Number G03-543-3102 8. Additional Questions: (P		63603 L	nail lnity @ Valley.n
information on your facili		<u> </u>	
			Yes No
1. Does your town have a manda	2 2 0	e?	
2. Do you offer electronic waste		1' 10	
3. Do you charge for construction		disposal?	
4. Do you charge for white good			
5. Do you charge for white goods6. Do you have a town/city recyc			
7. Do you accept sharps, needles			
8. Has anyone at your facility be		sharps (needle)?	
9. Does your town/city use a spec			
revenues from recycling, fees			
etc.			