



Annual Operational Report for 2013

Directions: This report must be submitted to Ohio EPA by April 1, 2014. Send 2 copies to the appropriate Ohio EPA District Office and one copy to the appropriate local health department. **If you have any problems with or questions about this form, please contact the appropriate Ohio EPA District Office.** Unless otherwise noted, all responses should represent the 2013 calendar year.

(Date Stamp)

1. FACILITY INFORMATION

Solid Waste Facility Name:		Is this facility government owned?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Core ID:				
Ohio EPA District*:		Ohio Solid Waste Management District:		
Name of entity that operates the facility:				
Address of the Physical Location of the Facility:				
County:	City/township:	Zip: -		

*CDO = Central District; NEDO = Northeast District; NWDO = Northwest District; SEDO = Southeast District; SWDO = Southwest District

2. PERSON COMPLETING THIS REPORT

Name:		Job Title:	
Address:			
City:	State:	Zip: -	
Phone: () -	Fax Phone: () -		
E-Mail Address:			
Business Relationship to the licensee*:			
Signature:		Date:	

***NOTE:** Examples of business relationships to the licensee would be employee, co-owner, consultant, legal counsel, etc.

PLEASE DO NOT WRITE BELOW THIS LINE

<input type="checkbox"/> WF ___ / ___ / ___ <input type="checkbox"/> OOSW ___ / ___ / ___ <input type="checkbox"/> CAP ___ / ___ / ___	For instructions on how to control protections and edit this document, please see Appendix AA	(File) Program _____ County _____ Fac/Entity _____ Subcategory _____
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3. SOLID WASTE FACILITY OPERATIONAL STATUS

Please indicate the status of operation during 2013. Check all that apply.

<input type="checkbox"/>	Check here if facility accepted waste in 2013	<input type="checkbox"/>	Check here if facility permanently ceased taking and disposing waste, Ohio EPA notified in accordance with OAC 3745-27-11(E), 3745-29-11(E), 3745-30-09(E).
Dates operated : From: To:			
<input type="checkbox"/>	Check here if facility was inactive in 2013*	Date facility ceased taking waste: (mm/dd/yyyy):	
Dates facility was inactive From To			

*For purposes of this form, "inactive" means that a facility with remaining approved capacity and/or a current license that has temporarily or permanently ceased receiving waste but has not formally entered into post-closure activities, and may or may not have resumed taking waste.

4. FACILITY USERS AND NON-USERS

- A. Are there any service area restrictions on who may use the facility? YES NO
If YES (above), then in the space below, please specify the service area restrictions:

5. MEASURING WASTE RECEIPTS

Please indicate the method used to measure incoming waste at the gate (check all that apply).

<input type="checkbox"/>	Visually (by volume in cubic yards). Please provide the conversion factor(s):
<input type="checkbox"/>	Scales (by weight in tons)
<input type="checkbox"/>	By capacity of hauling vehicle
<input type="checkbox"/>	By number, count or "Passenger Tire Equivalent" (PTE)

* **Conversion Factor:** All waste receipts must be reported on this report in tons. If your facility measures waste receipts by volume (cubic yards) and then converts this information into tons for purposes of this report, and provide the conversion factor(s) in the space provided.

WASTE FLOW DATA TABLES -- INSTRUCTIONS**General Instructions:**

Convert all waste to TONS and report only tons in this section. If a conversion factor is used to calculate tonnage, please provide the conversion factor(s) where indicated on the previous page.

Definitions:

Origin of Waste - Enter the name of the county of origin. For out-of-state waste, enter the name of the state, territory and the county or province. Enter the country if imported from outside of the U.S.A. See Table AA in Appendix AA for state and country abbreviations and other origin codes. Appendix AA also includes definitions for this section and instructions on how to remove the document protections for editing.

6. WASTE FLOWS

6(A): Subtotal waste received by **in-district county** of origin as directed in table 6.1.

6(B): Subtotal waste received by **out of-district county** of origin as directed in table 6.2

6(C): Subtotal waste received by **out of-state origin** as directed in table 6.3. If the waste originated from outside the United States then report the origin by country. See Appendix AA for origin codes.

6 (A). IN-DISTRICT WASTE RECEIVED: SUBTOTALS**DIRECTIONS:**

Report totals by county for each county in the district, and use one row for each county of origin. If you have any questions, please contact Ohio EPA for assistance.

1. In column 1 enter the counties within your Solid Waste Management District in Column 1
2. In column 2 enter the tons of waste that you received from those counties in Column 2
3. Enter the subtotal of waste received on line (A)

Table 6.1: In-District Waste Received

In-District Ohio County	Waste Received (Tons)
*(A) Total Tons of In-District Waste:	

*If you are using the MS Word version of the form, you can right-click on the total cell and select "Update Field" to total the column.

7. TOTAL SOLID WASTE RECEIVED**DIRECTIONS:**

1. Report the grand totals of waste reported received in Sections 6(A), 6(B), and 6(C)
2. Provide a grand total for all waste received at the facility in 2013 on line 7(T).

Table 7.1 – Grand Total of all Solid Waste Received in 2013

Origin of Waste	Grand Total (tons)
Total In-District Waste reported in 6(A):	
Total Out-of-District Waste reported in 6(B):	
Total Out-of-State-Waste reported in 6(C):	
*7(T) Total tons of wastes received:	

*If you are using the MS Word version of the form, you can right-click on the total cell and select "Update Field" to total the column.

8. DISPOSITION OF WASTE

DIRECTIONS: Report the disposition of waste received as shown in Table 8.1, below.

Table 8.1 – Disposition of Waste received in 2013

	Subtotal*
8(D) Disposed - waste disposed on-site within limits of waste placement	
8(O) Other – waste sent off-site, recycled, reused, converted to energy, etc.	
8(T) Total tons of waste received (sum of D + O above. This value should be equal to amount from line 7(T) above).	

*If you are using the MS Word version of the form, you can right-click on the total cell and select "Update Field" to total the column.

9. SCRAP TIRE MANAGEMENT

Scrap Tire Management Methods – In Table 9 please report on the management of any tires received by this facility. Complete the table below using the following management method codes in the Column labeled: “MM”:

- | | |
|--|--|
| 1 = Transferred to a beneficial use project for reuse | 5 = Transferred to a collection facility for consolidation |
| 2 = Transferred to a monofill or monocell for disposal | 6 = Processed on site by a recovery facility |
| 3 = Transferred to a recovery facility for processing | 7 = Stored on-site |
| 4 = Transferred to a storage facility | |

In Column 2 – List the name of the facility. For Ohio facilities you may use the Core ID (Appendix DD). For beneficial use projects, include the project approval number. Contact Ohio EPA at 614-728-5348 if you require assistance with this section

Table 9.1. Scrap Tire Management Methods

MM	Facility, Project, Location, (City, County, State) or Core ID	No. of PTE's	Tons
*9(T) Totals:			

***If you are using the MS-Word version of the form, you can right -click on the total cell and select “Update Field” to total the column.**

NOTE: This page may be reproduced as necessary.

10. Contract Fees and Local Surcharges

In Table 10 below, please list **local surcharges** (a twenty-five cent-per-ton fee collected in accordance with Ohio Revised Code 3734.57(C)) also known as “Host Community Fees” **and/or** any fee collected through a **contract** between the solid district, solid waste facility and/or the local community (no limit on rate). Please contact Ohio EPA if you have questions about this section.

Check here if this facility did not collect any fees described above

Please note: Do not report state solid waste disposal fees, or solid waste management district generation and disposal fees (ORC 3734.57 (A) and (B)) in this table. Ohio EPA tracks that information separately.

Table 10.1: Contract Fees and Local Surcharges

Type of Fees Collected	Name of Township/Municipality	\$/Ton Fee	Total \$ Collected*
<input type="checkbox"/> ORC 3754.57(C) <input type="checkbox"/> Contractual		/ ton	
<input type="checkbox"/> ORC 3754.57(C) <input type="checkbox"/> Contractual		/ ton	
<input type="checkbox"/> ORC 3754.57(C) <input type="checkbox"/> Contractual		/ ton	
<input type="checkbox"/> ORC 3754.57(C) <input type="checkbox"/> Contractual		/ ton	
<input type="checkbox"/> ORC 3754.57(C) <input type="checkbox"/> Contractual		/ ton	
*10 (T) Total:			

*If you are using the MS-Word version of the form, you can right-click on the total cell and select “Update Field” to total the column.

11. TIPPING FEES

In the table below, please enter the base price for each applicable category for a “typical load” of solid waste disposed. That is, an average price that would apply to the majority of waste accepted at this facility. If you are unable to define a “typical” load, then please report the facility’s posted rates and/or attach a price sheet. **(Please do not include state or local fees, contract fees or surcharges in the prices in this table):**

Table 11.1: Tipping Fees

Tons (as measured with scales)	\$	per ton
Compacted cubic yards	\$	per cubic yard
Uncompacted cubic yards	\$	per cubic yard
By “Passenger Tire Equivalent” (PTE) or other unit (describe units below):	\$	Per unit

12(A). DISPOSAL CAPACITY

NOTE: The information for this section is required in accordance with OAC 3745-27-19(M), 3745-29-19(M), and/or 3745-30-14(M). Please do not use unapproved pending PTI applications and draft PTIs as sources of information for this section. Facilities are encouraged to contact their Ohio EPA district office for assistance with completing this section. Note: Capacities should be listed in cubic yards (Yds³).

Table 12.1 – Remaining Disposal Capacity, Capacity Used, and Daily Use Characteristics

1. New Permitted Capacity in 2013 (see footnote 1) Was any additional capacity <u>permitted</u> at the facility during 2013 ? ⁽¹⁾			
<input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, amount of new capacity permitted in 2013: Yds³	
2. Remaining Capacity			
a. Enter total remaining gross permitted airspace – as of Dec 31, 2013 (This should include the amount from 1 above.)			Yds³
b. Remaining constructed capacity: Enter the amount as of <i>Dec 31, 2013</i> . (This figure should be based upon the practical volume available in all constructed cells that were completed and certified <i>on or before December 31, 2013</i>)			Yds³
c. Projected additional constructed capacity – enter any amount that will result from construction activities that will be performed in and certified in 2014 only. (This figure should <u>not</u> include the volume shown for 2.b above.)			Yds³
3. Remaining Life (in years) - Enter the total remaining life of the facility based upon the total remaining gross airspace in 2.a. above, and rates of waste receipts listed below:			
a. Authorized Maximum Daily Waste Receipts (AMDWR)		Annual receipts at AMDWR tons/yr	
AMDWR: _____ tons/day		Remaining Life _____ years at AMDWR	
b. Actual Recent Waste Receipts		Actual 2013 receipts tons	
Days operated during year: _____	Avg. Tons/day: _____	Remaining Life _____ years at 2013 rate of receipts	
4. Remaining Tons for Waste Placement			
The total amount of waste (in tons) which can be disposed in your facility based upon the total remaining gross airspace (from 2.a above) <u>minus</u> cover material volume:			tons
5. Gross Airspace Used During 2013			
Enter the gross airspace or volume used in 2013 in the space to the right. ⁽²⁾			Yds³
6. Primary Contact for capacity issues			
If the primary contact for questions concerning capacity issues is different than the person completing this report, then please provide the appropriate contact information below.			

1. Use only information from approved PTI's and Findings and Orders. Be sure to account for capacity approved during the report year when calculating gross airspace remaining.
2. If the number of days between flyovers/surveys differs significantly from 365, be sure to apply a correction factor that will adjust the gross airspace used for a 365 day year.

Table 12.1– Remaining Capacity (continued)

7. Capacity Calculations – Please show the calculations used to generate the numbers in categories 3, 4 and 5 above. In addition, identify the values for all variables indicated, as applicable, and any other relevant variables used in the calculations. You may also attach additional sheets of paper as necessary.

Check here if calculations are attached on a separate sheet.

Compaction Ratio(s):

Days between overflights or surveys:

Additional Variables:

Calculations:

12(B). Permits pending or intended and/or other factors that may affect future facility capacity or that resulted in significant changes in waste receipts in 2013:

Why do we ask this? Ohio EPA is required to monitor solid waste disposal capacity in Ohio. This section is intended to assist Ohio EPA in that endeavor. Please assist us by reporting information described below. You need only report information that you are reasonably confident is relevant. You may also use this section to communicate any other factors that you feel may affect this facility's future disposal capacity, including those factors outside of the control of those who own operate and/or manage the facility.

Table 12.2

If there are any pending permits for this facility, or if you applied for any new permits for this facility in 2013 or if you intend to apply for any new permits in 2014, please briefly explain below. This would include any permits that would result in changes in disposal capacity, changes in AMDWR, or changes in the way waste is received at the facility (e.g. new rail infrastructure, ownership changes, contract expiration, etc.) that may affect future capacity. You may also use this section to communicate circumstances that resulted in a significant increase or decrease in waste receipts in 2013.

13. MISCELLANEOUS INFORMATION (Complete the additional information as requested below)

General feedback – Table 13.1

You may use this space to provide any comments that you wish to share concerning the preparation of this report, the data contained in it, Ohio EPA's review of the report, or suggestions for improving the reporting process in the future.

A large, empty rectangular box with a thin black border, intended for providing general feedback. It is positioned below the introductory text and is surrounded by a light green shaded border.

Completing Sections 14 through 19:

Sections 14 through 19 will contain the remainder of the information required under Ohio Administrative Code (OAC) sections 3745-27-19(M). Sections 14 through 19 consist of "cover sheets" with minimal form data to complete. Fill in information requested on the cover sheet and place the required information behind the appropriate cover sheet.

Each cover sheet contains applicable OAC references or rule language, and may contain one or more summary questions that must be answered. However, the report form is not intended to be a substitute for the rules.

Please refer to the actual rules in order to determine the correct requirements under the Ohio Administrative Code. Please refer to OAC section 3745-27-19(M) for municipal solid waste landfills.

14. TOPOGRAPHIC MAP

OAC 3745-27-19(M)(1), 3745-29-19(M)(1), and 3745-30-14(M)(1) require the annual operating report for landfill facilities to include a complete topographic map of all units of the sanitary landfill facility, certified by a professional skilled in the appropriate disciplines, with updated contour lines on the plan drawing containing information specified in rule 3745-27-06 of the Administrative Code. The scale and contour interval shall be consistent with the approved plans. The map must at a minimum include the information listed below that summarizes the previous calendar year's operations.

Note: The annual report is to represent existing topography of all units when the survey is conducted, not just those areas where filling and capping activities occurred. Thus contours determined for a previous year are not to be carried forward to a succeeding year; rather all units are to be resurveyed to determine current contours.

OAC section 3745-27-19(M)(1), which applies to **municipal** solid waste sanitary landfills, states that the annual operational report must include the following information summarizing the previous calendar year's operations:

(1) A topographic map of the unit(s) of the sanitary landfill facility, certified by a professional skilled in the appropriate discipline(s), with updated contour lines on the plan drawing containing information specified in rule 3745-27-06 of the Administrative Code. The scale and contour interval shall be consistent with the approved plans. At a minimum, the owner or operator shall identify the following:

- (a) The calendar year which the submittal represents.*
- (b) The areal extent of each phase of construction.*
- (c) The areal extent of closed areas of unit(s) that have a final cap system or have transitional cover.*
- (d) Areas that have intermediate cover.*
- (e) The current working phase and unit(s).*
- (f) The projected phase(s) and unit(s) for filling in the coming year.*
- (g) Access roads and buildings.*
- (h) On-site borrow areas and cover material stockpiles.*
- (i) A comparison of the actual vertical and horizontal limits of emplaced waste to the vertical and horizontal limits of waste placement authorized in the applicable authorizing document(s), including an approved permit(s) to install, plan approval, or operational report. If emplaced waste exceeds the limits of vertical and horizontal waste placement authorized in the applicable authorizing document(s), this comparison shall include a topographic map which delineates the areal extent of emplaced waste that exceeds approved limits specified in such authorizing documents. In addition, the topographic map shall contain notes that indicate the following information for waste exceeding authorized limits of waste placement: the maximum estimated volume, the maximum depth, and the average depth.*

15. LEACHATE MANAGEMENT

Ohio Administrative Code sections 3745-27-19(M)(4), 3745-29-19(M)(4), and 3745-30-14(M)(3) require the annual operating report for landfill facilities to include information on leachate collection and treatment. **Place the required information behind this coversheet.**

IMPORTANT NOTE: Leachate recirculation is a “treatment” practice. If your facility recirculates leachate, then please include the volume of leachate recirculated annually.

OAC 3745-27-19(M)(4), 3745-29-19(M)(4), and 3745-30-14(M)(3), which apply to **municipal, industrial, and residual** solid waste sanitary landfills respectively, state that the annual operational report must include the following information for the report year:

A summary of the quantity of leachate collected for treatment and disposal on a monthly basis during the year, location of leachate treatment and/or disposal, and verification that the leachate management system is operating in accordance with this rule

Place the required information behind this coversheet.

16. LEACHATE TESTING RESULTS

Ohio Administrative Code sections 3745-27-19(M)(5), 3745-29-19(M)(5), and 3745-30-14(M)(4) require the annual operating report for landfill facilities to include leachate testing results. **Place the required information behind this coversheet.**

OAC 3745-27-19(M)(5), which applies to **municipal** solid waste sanitary landfills, states that the annual operational report must include the following information summarizing the previous calendar year's operations:

Results of analytical testing of an annual grab sample of leachate for the parameters specified in appendix I of rule 3745-27-10 of the Administrative Code and for polychlorinated biphenyls (PCBs). The grab sample shall be obtained from the leachate management system.

[Comment: If PCBs are detected in leachate that will be discharged directly to or transported and discharged to a wastewater treatment plant, then the owner or operator of the sanitary landfill facility generating the leachate should contact Ohio EPA, division of surface water, prior to discharging the leachate. If the wastewater treatment plant is not affiliated with the landfill facility, then the owner or operator should also contact the receiving wastewater treatment plant prior to discharge. The owner or operator of the sanitary landfill facility should inform Ohio EPA, division of surface water, (And the wastewater treatment plant, if applicable,) of the presence and concentration of PCBs detected in the leachate. Depending upon the wastewater treatment plant's permitted discharge limit for PCBs, the owner or operator of the sanitary landfill facility may be required to conduct pretreatment of the leachate to remove PCBs prior to discharging to the wastewater treatment plant.]

17. ITEMIZED CLOSURE COST ESTIMATES

During 2013, your facility should have submitted an update of its financial assurance instrument. Normally this occurs on or before the anniversary date of the original financial assurance instrument. This section pertains to that update.

Ohio Administrative Code sections 3745-27-19(M)(6), 3745-29-19(M)(6), and 3745-30-14(M)(6) require the annual operating report for landfill facilities to include the most recent final closure and post-closure care cost estimates, and corrective measures cost estimate, if applicable. **Complete the check-list at the bottom of this page, and place the itemized required cost estimates behind this coversheet.** NOTE: Do not include the actual financial instrument with this report. The original instrument should be sent directly to Ohio EPA's financial assurance specialist.

The rule references below summarize what information should be included in this section of the annual operational report:

Municipal solid waste landfills: OAC 3745-27-19(M)(6)

The most recent updated final closure cost estimate, post-closure care cost estimate, and, if applicable, corrective measures cost estimate, adjusted for inflation and for any change in final closure cost estimate, post-closure care cost estimate, or corrective measures cost estimate required by rules 3745-27-15, 3745-27-16, and 3745-27-18 of the Administrative Code.

Financial Assurance Check-List:

The check-list below is provided to help ensure that you completed the 2013 financial assurance requirements as required by OAC 3745. The check-list addresses several common errors and omissions and helps to ensure that your financial assurance is reviewed properly. Please complete the checklist and note the associated comments.

1. Are the cost estimates that you submitted with this report itemized?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Please Note: If you answered "No" to #1, then please itemize the estimates and attach them to the back of this page.		
2. Were the cost estimates adjusted for inflation? (applies only facilities with total assurance greater than or equal to \$20,000)	<input type="checkbox"/> Not Applicable	<input type="checkbox"/> Yes <input type="checkbox"/> No
Note: The inflation factor that was used for updating costs in operating year 2013 was 1.7% . This inflation factor would be used on any financial assurance instrument required to be submitted during 2013.		
3. Were the appropriate inflationary increases made to the financial assurance instrument?	<input type="checkbox"/> Not Applicable	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. If any of the cost estimates were DECREASED, did you provide justification for the decreases?	<input type="checkbox"/> Not Applicable	<input type="checkbox"/> Yes <input type="checkbox"/> No
Please Note: If you answered "No" to any of the questions in 2, 3, or 4 above, please contact a financial assurance specialist at Ohio EPA to determine whether or not you need to submit an amended instrument. Attach the <u>original</u> , itemized cost estimates that you have already submitted to the back of this page.		
5. Were any of the cost estimates increased from last year to reflect increases in estimated final closure, post-closure care, or corrective measures costs, <u>beyond adjustments made for inflation</u> ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6. Did you submit an <u>amended</u> , 2013 financial insurance instrument during 2013?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

19. MAINTENANCE

Ohio Administrative Code sections 3745-27-19(M)(7), 3745-29-19(M)(7), and 3745-30-14(M)(7) require the annual operating report for landfill facilities to include information on maintenance performed on various monitoring and control systems at the facility. **Place the required information behind this coversheet.**

OAC 3745-27-19(M)(7), which applies to **municipal** solid waste sanitary landfills, states that the annual operational report must include the following information summarizing the previous calendar year's operations:

A summary of any maintenance performed on the leachate management system, ground water monitoring system, explosive gas monitoring system, and any other monitoring and control system installed at the sanitary landfill facility or performed in response to this rule

19. NOTARIZED CERTIFICATION

I, _____, (title) _____ as a representative of
(print name)

_____solid waste facility, do hereby swear that,
to the best of my knowledge, the information contained in this report is true and accurate.

Signature: _____ Date: _____

Sworn to and subscribed in my presence this _____ day of _____, 2014

Notary Public

My commission expires: ____/____/____

SEAL

2013 Facility Annual Operational Report Form Appendices

(Note: These appendices are for reference purposes only, and should not be submitted with the final report)

Contents:

	Instructions for Completing
Appendix AA	this Form Electronically
Appendix BB	Transfer Facility Core ID's
Appendix CC	MSWLF Facility Core ID's
Appendix DD	Other Solid Waste Facility Core ID's

Instructions for the MS Word version of the Facility Annual Operations Report Form.

The Ohio 2013 Annual Operations Report has been made available in MS Word format. The report form includes form fields that can be easily completed as described below. If you need assistance with filling out this form, please contact the inspector your Ohio EPA District Office.

Before entering data - users must ensure that the form is locked or protected.

Locking /Protecting the form - The form should be locked when you receive it. If the form is not locked or you need to unlock it to make edits, please follow the procedure below.

- **MS Office 2007 users** – In MS Office 2007 the form can be locked and unlocked as follows:

To Unlock the Form:

a. **Developer >> Protect Document >> Restrict Editing and Formatting** (while this seems contradictory, users must first select “restrict editing” in order to open the dialogue box to turn off protections)

b. **Under #2 “Editing Restrictions” uncheck the box that says “Allow only this type of editing in the document”**

To Lock the Form and enter data:

a. **Developer >> Protect Document >> Restrict Editing and Formatting**

b. **Under #2 “Editing Restrictions” Select “Filling in Forms” then check the box that says “Allow only this type of editing in the document”**

d. **Click the button that says “Yes, Start Enforcing Protection.”** There is no password (see note on passwords below).

Important Notes:

- You may need to load the **Developer Tools** onto the **Main Ribbon** and show the **Developer Tab** to edit this form.
- **You DO NOT need to enter a password!** When the password dialogue box appears, you may leave the password blank and simply press “OK” unless you want to protect the form for your own use.
- **Users of MS Word XP and earlier versions of MS Office** – If you are using an earlier version of MS Office, you should be able to edit the file. If you have difficulty, try downloading the plug-in from Microsoft for backward compatibility with earlier versions of Office.
- **Microsoft Word 2003 Users:** Go to the **View** menu and select **Toolbars >> Forms**. The Forms toolbar should appear. Clicking the lock icon on the **Form Toolbar** will lock and unlock the form for entry.

When you receive the form, it should be “locked” (“protected” in Word 2007). This means that you

cannot make changes to the form, but the form fields are activated for data entry. Ensure that the form is locked before you begin entering data. In Word 2003, most of the tools in the Forms Toolbar will appear “grayed-out” when the form is locked. To lock and unlock the form, simply click the lock icon on the Forms Toolbar.

- **Changing the Form:** Changes to the form should not be necessary under most circumstances and the form should be locked for data entry. However, if you find that changes need to be made they can be made as follows:
 - Unlock the form as described above.
 - Once the form is unlocked, changes may be made.
 - **IMPORTANT: Data cannot be entered into form fields when the form is unlocked;** the form field will be deleted and overwritten with text. You will also not be able to tab between fields if the form is unlocked.
 - When finished making changes, **Lock or protect the form before resuming data entry.**
- **Editing Headers:** The Facility ID numbers for all facilities are now listed in the appendices. To enter the Facility ID number into the header follow the instructions below:
 - Review the directions for unlocking the form above. Unlock the form.
 - Click on the header to edit and add the Core ID #. Close the header dialogue box.
 - **IMPORTANT: Remember to re-lock the form before entering data.**

Entering Data

- Ensure that the form is locked or protected as described above. Select the first field in section I of the form with the cursor, and begin entering data.
- The individual(s) entering data can rapidly tab between fields and enter data. Check boxes can be completed in three ways: by clicking on them with the cursor, hitting the space bar, or by typing an “x”.
- **Sum Rows and Columns in a Table** – Some of the tables in the 2013 FAR form will automatically sum values in a row or column. To calculate the sum, right-click on the “total” cell and select “Update Field” from the menu.
- Several fields on the form have “pull-down menus”. To complete these fields, simply click on the arrow at the right of the field and select the appropriate response from the menu.
- Additional tables for sections 6 and 7 have been provided in separate files. Simply complete, print and insert as many of these tables as necessary to complete the report.
- If extra data are provided on (an) additional sheet(s), refer the reader to the attached sheet in the form field provided.

Table AA Waste Origin Codes (out-of-state)

Waste Origin	Abbr.
Alabama	AL
Alaska	AK
Arizona	AZ
Arkansas	AR
California	CA
Colorado	CO
Connecticut	CT
Delaware	DE
Florida	FL
Georgia	GA
Hawaii	HI
Idaho	ID
Illinois	IL
Indiana	IN
Iowa	IA
Kansas	KS
Kentucky	KY
Louisiana	LA
Maine	ME
Maryland	MD
Massachusetts	MA
Michigan	MI
Minnesota	MN
Mississippi	MS
Missouri	MO
Montana	MT
Nebraska	NE
Nevada	NV
New Hampshire	NH

Waste Origin	Abbr.
New Jersey	NJ
New Mexico	NM
New York	NY
North Carolina	NC
North Dakota	ND
Ohio	OH
Oklahoma	OK
Oregon	OR
Pennsylvania	PA
Rhode Island	RI
South Carolina	SC
South Dakota	SD
Tennessee	TN
Texas	TX
Utah	UT
Vermont	VT
Virginia	VA
Washington	WA
West Virginia	WV
Wisconsin	WI
Wyoming	WY
District of Columbia	DC
International origin	
Virgin Islands	VI
Canada	CN
Puerto Rico	PR
Mexico	MX
*Other / Unknown	OX

* Facilities should not be reporting waste of unknown origin waste from domestic states. If you cannot determine the origin of domestic waste, please contact Ohio EPA to determine how to report the waste in this form.

Appendix BB – Table BB.1 – Ohio Transfer Facility Core ID’s (Sorted by County)

NOTE: If you received waste via a rail facility with no Ohio EPA ID number, then please enter “999999”

County	Facility Name	CoreID	County	Facility Name	CoreID
Allen	WM Ohio Lima TF	2286	Franklin	Georgesville Road TF	15062
Allen	Metcalf St. TS	299797	Franklin	Waste Mgt. T&R	15274
Belmont	Apex Energy Inc. Waste TS	3492	Franklin	Morse Road TS	15487
Butler	Hamilton City TF	133783	Franklin	Reynolds Avenue TS	15711
Carroll	J & J Refuse Service TF	5007	Franklin	Jackson Pike TF	233511
Cuyahoga	Harvard Road TS	10687	Fulton	Fulton Co. Solid Waste TF	16500
Cuyahoga	City of Euclid TS	12366	Fulton	Archbold Refuse TF	266628
Cuyahoga	Strongsville Solid Waste TF	11609	Geauga	Universal Disposal	305631
Cuyahoga	Shaker Heights Service Dept. TS	11145	Greene	Waste Mgt. Fairborn TF	17624
Cuyahoga	Waste Management Cleveland T&R	10688	Guernsey	Kimble (Cambridge) T&R Facility	54246
Cuyahoga	Glenwillow Sanitary Landfill	8009	Hamilton	Cincinnati TF Este Ave.	19207
Cuyahoga	Cleveland Heights TS	8705	Hamilton	Evendale Transfer Station	138865
Cuyahoga	Ridge Road TS	8613	Hardin	Hardin Co. Solid Waste TF	21712
Cuyahoga	City of Rocky River TS	11034	Huron	Huron County TF	22910
Cuyahoga	Broadview Heights Recycling Center	8345	Knox	Allied TS, Mt. Vernon	23800
Darke	Rumpke Recycling & TS Greenville	12672	Lawrence	Lawrence Co. TF	262417
Delaware	Delaware County TS	13091	Licking	WM of Ohio 213 Newark Transfer & Hauling Facility	52751
Erie	BFI WS Sandusky Resource Recovery Facility	48225	Marion	Marion County SW TF	29630
Erie	Kelley’s Island TS	13505	Medina	Medina County Material Recovery Facility	30065
Fairfield	Lancaster TS	13723	Medina	Wadsworth Solid Waste TS	30268
Fayette	Fayette County TF	54285	Meigs	Meigs County TS	130927
Franklin	Columbus Transfer & Rec Fields Avenue	274280	Mercer	Maharg Inc.	134351

Abbreviations: TF= “Transfer Facility”; TS = “Transfer Station”; T&R = “Transfer and Recycling”

Table BB.1 (continued) – Ohio Transfer Facility Core ID’s (Sorted by County)

County	Facility Name	CoreID
Miami	Miami Co. Solid Waste & Recycling Facility	30867
Montgomery	Montgomery County North TF	32289
Montgomery	Montgomery County South TF	54245
Morrow	Mid-State Waste TF	283428
Ottawa	Put-in-Bay Township TF	34105
Pickaway	Circleville TS	34655
Portage	Portage County SWMD TF	35192
Richland	Allied Waste Mansfield	36496
Ross	WM of Ohio Chilicothe TF	36739
Ross	RLS Transfer Facility	269135
Sandusky	BFI of Ohio	133784
Shelby	Shelby County TS	37920
Stark	Kimble Transfer & Recovery Facility	38787
Stark	JMW Solid Waste Transfer	38866
Summit	WM Akron Central TS	39741
Summit	Republic Services of Ohio Hauling	140216
Summit	Kimble Twinsburg T&R	249945
Trumbull	Warren Recycling Inc. TF	133962
Van Wert	Young’s Waste Service	43256
Van Wert	Van Wert County Refuse TS	43305

Abbreviations: TF= “Transfer Facility”; TS = “Transfer Station”; T&R = “Transfer and Recycling”

Appendix DD - Other Solid Waste Facilities Core ID's (Sorted by County)

County	Facility	Core ID
Ashtabula	Reserve Environmental Services Inc.	2875
Ashtabula	Millennium Inorganic Chemicals Plant 2 Landfill	231750
Clermont	Zimmer Industrial SW Disposal Landfill	6306
Coshocton	AEP Conesville Residual Waste Landfill	7041
Cuyahoga	Arcelor Mittal, Cleveland Inc. (fka ISG)	8186
Defiance	GM Powertrain Group Defiance Plant Landfill	12895
Erie	Huron Lime Company No. 2 Landfill	13503
Gallia	Gavin Plant Residual Waste Landfill	16700
Gallia	Kyger Creek Station Landfill	270834
Jefferson	Cardinal FAR1 Residual Waste Landfill	272343
Jefferson	FirstEnergy, Hollow Rock Facility Landfill	269130
Licking	Owens Corning Fiberglass Landfill	25536
Lucas	Envirosafe HW & Ind Landfill	27256
Montgomery	Fraser Paper Inc. / West Carrollton Mill Landfill	148712
Ottawa	Graymont Dolime Ohio Inc. Landfill	33916
Ottawa	US Gypsum Company Landfill	33915
Ottawa	Materion Brush Inc. Landfill (fka Brush Wellman)	52732
Paulding	Lafarge N. America, Inc. Landfill	34233
Pike	Pike Tire Monofill	146251
Stark	American Tire Monofill	38047
Stark	Liberty Tire aka C&E Coal Tire Project	54243
Summit	3M Copley, Bldg 42-8E-27	128209
Trumbull	AM Stericycle/BFI Medical Waste, Inc.	41805
Trumbull	RG Steel / Severstal Warren, Inc. Landfill (fka WCI Steel)	42096
Wayne	Rittman Paperboard Packaging Corp. of America Landfill	44595

("fka" = formerly Known as)