



Municipal Solid Waste Landfill Daily Log of Operations Instructions for Completion

Form 1 – Cover Sheet

Form 1 is the cover sheet for the daily log of operations that must be kept in accordance with Ohio Administrative Code (OAC) Rule 3745-27-19(E)(10). Complete this cover sheet for each license year and keep it on file at the beginning of the daily logs for that year. Attach amendments to this form as necessary.

Note: The scale certification date that should be recorded on the cover sheet is the date on which the county auditor or city sealer having jurisdiction where the scale is located inspected, tested and approved the scale. If multiple scales are in use at a facility, please include the certification date for each scale.

Note: List all alternative daily cover (ADC) used during the reporting year. If the ADC is authorized in rule rather than through a director's approval, please note "rule authorization" in the date column.

Form 2a – Incoming Materials Form

Form 2a is the actual record of waste received for disposal for each day of operation. List the facility name and date at the top of each sheet. In addition, there are two boxes on the top line to note the sheet number and the total number of sheets that were completed for that day. Complete a separate row for each individual load of waste received for disposal. Complete all applicable columns for each row. Please use as many pages as necessary to record all loads for the day.

Unique Vehicle ID# (Required)

Complete this column for each load with a unique number that can identify either the vehicle delivering the material to the facility or, if the container holding the waste can be removed from the delivering vehicle, the container. This number could be a license plate number, trailer number, roll-off box number, rail car number, etc. Please include - **R** at the end of the unique vehicle ID number for any load that arrived at the facility by rail.

Hauling Company (Required)

Complete this column for each load with the name of the hauling company that brings waste to the facility for disposal. The operator may use a code in this column to designate specific companies provided a list of the codes can be made available to the local health department, Ohio EPA, or an authorized representative to determine the actual company name of each hauler.

Generator (If applicable)

Complete this column with the name of the generator of the waste for all loads except for those designated as municipal solid waste or if the load has been consolidated at a transfer facility prior to arrival at the landfill.

Waste Type (Required)

Complete this column for each load with one of the following waste type codes:

A (Asbestos) – Use for asbestos-containing waste material as defined in OAC Rule 3745-20-01(B)(5) by facilities authorized to accept such waste.

CDD (Construction and demolition debris) – Use for waste material resulting from the alteration, construction, destruction, rehabilitation, or repair of any physical structure built by humans, and includes particles and dust created during demolition activities, as defined in ORC Section 3714.01(C).

NOTE: Only C&DD that meets the definition of OAC Rule 3745-400-01 may be classified as C&DD. Do not log C&DD as Excluded Waste. Loads of C&DD mixed with solid waste must be logged as MSW.

EW (Excluded waste) – Use for waste materials that include but are not limited to nontoxic fly ash and bottom ash, spent nontoxic foundry sand, and earth or materials from mining. This code is also used for excluded waste used as an approved alternative daily cover.

IMW (Industrial or manufacturing waste) – Use for waste materials that meet the definition set forth in OAC Rule 3745-30-01(I)(1). If applicable, please specify the following type of IMW:

SDW (Shale-drilling waste) – Use for oil and gas drill cuttings that have come into contact with synthetic drilling muds or other sources of contaminants.

MSW (Municipal solid waste) – Use for solid waste generated from community, commercial, and agricultural operations as defined in OAC Rule 3745-27-01. If applicable, please specify the following type of MSW:

MSW-S (Municipal solid waste - sludge) – Use for sludge from municipal, commercial, or industrial wastewater treatment plants, water treatment plants, and air pollution control facilities that is co-disposed with wastes specified in OAC Rule 3745-27-01(M) (5).

SW-ADC (Municipal solid waste used as alternative daily cover) – Use for solid waste that is being placed as an approved alternative daily cover.

NOTE: Only C&DD that meets the definition of OAC Rule 3745-400-11(F) may be classified as C&DD. Material that is not readily identifiable as C&DD may not be logged as C&DD nor logged as Excluded Waste.

Within District/Out of District/Out of State (Required)

Complete just one of these columns for each load. Please record the tonnage in the appropriate column. Record waste that originates from within the solid waste management district that serves the facility in the “Within District” column. Record waste that originates in the state of Ohio, but outside of the solid waste district in the “Out of District” column. Record waste that originates outside of the state of Ohio in the “Out of State” column.

County (Required)

Complete this column for each load with the county where the load originated.

State (Required)

Complete this column for each load with the state where the load originated.

Transfer Facility (If applicable)

Complete this column with the name of the facility for all loads that originates from a transfer facility.

Form 2b – Incoming Materials – Daily Totals

Form 2b is the record of certain daily totals of tonnages received on each day of operation. Attach Form 2b to all the pages of Form 2a for each day.

AMDWR – Waste Received

Complete this line with total tonnage of all waste that is received that will be counted towards the authorized maximum daily waste receipt. Complete all columns as necessary.

Solid Waste

Complete this line with the total tonnage of all waste that is received for which the state solid waste disposal fee is required to be collected and remitted in accordance with Ohio Revised Code (ORC) Chapter 3734.57. Complete all columns as necessary.

Construction & Demolition Debris

Complete this line with the total tonnage of all waste that is received for which the state construction and demolition debris disposal fee is required to be calculated and remitted in accordance with ORC Chapter 3714.07. Complete all columns as necessary.

Form 3 – Daily Operator Inspection Checklist

Form 3 is the record of the required daily inspection of the facility as required by OAC Rule 3745-27-19(E)(11) (a). Complete the form in full for each day of operation including a list of the equipment in operation at the facility and a description of any corrective actions taken to demonstrate compliance with OAC Rule 3745-27. Please note that the leachate sump and tank readings are not required to be completed. If an owner or operator chooses to utilize the tables on page 2, complete each column for each leachate sump and leachate tank at the facility as follows:

Leachate Management – Sump Readings (Optional)

Lines may be added and subtracted as necessary depending on the number of sumps at the facility.

Sump ID

List the identifying name/number for the sump as listed in the facility's permit to install. This column may be pre-filled and duplicated for each day.

Sump Depth

List the depth of the sump in inches as designed and constructed. This column may be pre-filled and duplicated for each day.

Note: One foot or twelve inches in addition to this depth is the threshold for demonstrating compliance with the design of the leachate collection system as required in OAC Rule 3745-27-08(C)(3)(i).

Reading

Complete this column with the real time reading in inches of leachate at the sump.

Time of Reading

Complete this column with the time that the reading was taken at the time of the inspection.

Auto On

Complete this column with a check to record that the sump pump is in the auto on setting. If the sump pump is not on auto, please make note of the reason and the corrective action taken in the additional notes section.

Leachate Management – Tank Readings (Optional)

Lines may be added and subtracted as necessary depending on the number of tanks at the facility.

Tank ID

List the identifying name/number for the tank as listed in the facility's permit to install. This column may be pre-filled and duplicated for each day.

Tank Capacity

List the total capacity of the tank in feet and gallons. These columns may be pre-filled and duplicated for each day.

Reading

Complete the column with the real time reading in feet of leachate in the tank.

Time of Reading

Complete this column with the time the reading was taken at the time of the inspection.

Form 4 – Weekly Sedimentation Structures Inspection Checklist

Form 4 is the record of the required weekly sedimentation pond and pond discharge structures inspection of the facility as required by OAC Rule 3745-27-19(E)(11)(b). Complete the form in full on a weekly basis and describe any corrective actions taken to demonstrate compliance with OAC Rule 3745-27.



**Municipal Solid Waste Landfill
Daily Log of Operations**

Yearly Cover Sheet
Form 1

	License Year	

Facility Name:	
Facility Owner:	
Facility Address:	
Mailing Address:	
Site Manager:	Phone Number:

Waste Measurement

Date of last scale certification:

Permit to Install

Current PTI #:	Date Approved:
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Allowable Maximum Daily Waste Receipt (AMDWR):
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Alternative Daily Cover Authorizations

ADC Type	Date of Approval



**Municipal Solid Waste Landfill
Daily Log of Operations**

Incoming Materials –
Daily Totals
Form 2b

Facility:				Date:
Waste Type	Within District	Out of District	Out of State	Total
	<i>(tons)</i>			
AMDWR - Waste Received				
<hr/>				
Solid Waste				
Construction & Demolition Debris				

Leachate Management - Sump Readings (Optional)

Sump ID	Sump Depth <i>(inches)</i>	Reading <i>(inches)</i>	Time of Reading	Auto On
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

Leachate Management - Tank Readings (Optional)

Tank ID	Tank Capacity		Reading <i>(feet)</i>	Time of Reading
	<i>(feet)</i>	<i>(gallons)</i>		

