

SWIS1

# LANDFILL ANNUAL REPORT

For Calendar year 2012

JAN 11 2013

2013-001225

### Administrative Information (Please enter all the information requested below)

Facility Name: Weber properties LLC

Facility Mailing Address: P.O. Box 12847  
(Number & Street, Box and/or Route)

City: Ogden, UT Zip Code: 84412

County: Weber Permit Number: 9810R1

#### Owner

Name: Weber Properties LLC Phone No.: (801) 731-7882

Owner Mailing Address: P.O. Box 12847  
(Number & Street, Box and/or Route)

City: Ogden State: Utah Zip Code: 84412

Contact Name: Wilbert van der Stappen Contact Title: Registered Agent

Contact's Mailing Address: P.O. Box 12847 Ogden, UT 84412

Phone No.: (801) 731-7882 Contact's Email Address: wil@advancedpaving.net

#### Operator (Complete this section only if the operator is not an employee of the Owner shown above)

Name: Advanced Paving and Construction Phone No.: (801) 731-7882

Owner Mailing Address: P.O. Box 12847  
(Number & Street, Box and/or Route)

City: Ogden State: Utah Zip Code: 84412

Contact Name: Wilbert van der Stappen Contact Title: President

Contact's Mailing Address: P.O. Box 12847

Phone No.: 801 731-7882 Contact's Email Address: wil@advancedpaving.net

### Facility Type and Status

- |                                     |   |                                   |  |
|-------------------------------------|---|-----------------------------------|--|
| <input type="checkbox"/> Class I    | <input type="checkbox"/> Class IIIb           | <input type="checkbox"/> Class V  | <input type="checkbox"/> Facility Closed during the year<br>Date Closed: _____ |
| <input type="checkbox"/> Class II   | <input type="checkbox"/> Class IVa            | <input type="checkbox"/> Class VI |  |
| <input type="checkbox"/> Class IIIa | <input checked="" type="checkbox"/> Class IVb |                                   |  |

### Annual Disposal (Tons received at the facility for disposal)

Waste Type	Waste Origin		Total	Measurement	
	In-State	Out-of-State		Tons	Cubic Yards
Municipal	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
Industrial	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
C/D*	4,850.00	_____	4,850.00	<input type="checkbox"/>	<input checked="" type="checkbox"/>

\*C/D waste includes all waste going to a Class IV or VI landfill cell

### Conversion Factor Used

- None Used     Site Specific     From Rules    List Site Specific Conversion: Load count

**Recycling**

Material Recycled: 3,600.00

Reported in Tons  Cubic Yards

**Utah Disposal Fee**

Disposal fee required to be paid to State Yes  No  (If yes please show fees paid below)

Municipal: \_\_\_\_\_ Industrial: \_\_\_\_\_ C/D: \_\_\_\_\_ Annual: \_\_\_\_\_

Municipal, Industrial and C/D are fees paid by Commercial Facilities. Annual fee is paid by facilities operated by a municipality

**Current Landfill Remaining Capacity**

Tons: \_\_\_\_\_ Cubic Yards: \_\_\_\_\_ Acre: 12.00 Years: 20.00

Acres Currently Open: 12.00 Acres Currently Closed: 0.00

**Financial Assurance**

Current Closure Cost Estimate: \$27,675.00

Current Post-Closure Cost Estimate: \$2,575.00

Current Amount or Balance in Mechanism: \_\_\_\_\_

(If facility permit has been renewed and if balance does not equal or exceed total for closure and post-closure care please contact the Division)

Current Financial Assurance Mechanism: Bond

(ie. Bond, Trust Fund, Corporate or government Test etc.)

Current Financial Assurance Mechanism Holder: Fidelity and Deposit Company of Maryland

(ie. Name of Bond Company, Bank etc. Account number)

**Financial Assurance:** Each facility must recalculate the cost of closure and post-closure care to account for inflation and design changes each year. The inflation factor can be found on the Division web page. Facilities that are using a trust account should include a copy of the most recent account statement.

**Note** Facilities using "Local Government Financial Test" or the "Corporate Financial Test" must provide the information required in R315-309-8(4) or R315-309-9(3) each year.

**Other Reports and Information to be Submitted with Annual Report**

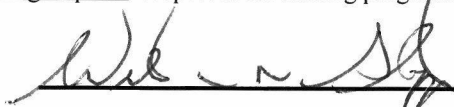
Ground Water Monitoring: Class I and V landfills only. Check if exempt

Explosive Gas Monitoring: Class I, II and V landfills only. Check if exempt

Does the facility have a landfill gas collection system Yes  No

If yes please briefly describe use of gas, e.g., flared or used for electricity generation.

Training Report: A report of all training programs or procedures completed by facility personnel during the year.

Signature: 

Date: 1-11-2013

Signature should be by an executive officer, general partner, proprietor, elected official, or a duly authorized representative. A duly authorized representative must meet the requirements of the solid waste rules (UAC R315-310-2(4)(d)).

Type Name: Wilbert van der Stappen

Title: President