Annual/Quarterly Report

A. Annual Report for the year of operation from January 1, 2004 to December 31, 2004.
B. Quarterly Report for: ___Quarter 1 ___Quarter 2 ___Quarter 3 _X_Quarter 4

SECTION 1
Owner/Facility Information

Facility Name Chemung County Sanitary Landfill NYSDEC Activity Code # 08S02

Facility Location 4349 County Route 60, Elmira State NY Zip 14901

Facility Contact Lawrence Wolfe Phone # (607) 733 - 2743
Fax # (607) 737 - 7683

Town Chemung County Chemung NYSDEC Region # 8

360 Permit # 8-0 7 2 8-0 0 0 0 4/0 0 0 1 3-0 Issued 02/23/96 Expires 01/17/06

Owner Name Chemung County Solid Waste Management District Phone # (607) 737 - 2980

Mailing Address 1690 Lake Street, Elmira State NY Zip 14901

SECTION 3
Quantity of Solid Waste Disposed

Provide the tonnages of solid waste disposed of:
Tonnages were obtained by: __X__ Scale Weight _____ Truck Count _____ Estimated
_____ Other (Specify: _____)

Type of Solid Waste	January (tons)	February (tons)	March (tons)	April (tons)	May (tons)	June (tons)
Mixed Municipal Solid Waste (Residential, Institutional & Commercial)	4,160.29	3,328.50	4,250.04	4,696.26	4,800.20	5,266.61
Construction & Demolition (C&D) Debris	0	0	0	0	0	0
Asbestos Waste	0	0	0	0	0	0
Industrial Waste (Including Industrial Process Sludges)	1,943.75	1,990.47	2,228.74	2,066.55	2,074.55	2,419.64
Ash (Coal)	0	0	0	0	0	0
Ash (MSW Energy Recovery)	0	0	0	0	0	0
Sewage Treatment Plant Sludge	269.13	320.45	342.7	403.95	408.83	466.40
Petroleum Contaminated Soil	0.00	0.00	700.77	17.14	0.00	0.00
Other (Specify: Wood Chips from C&D *)	468.75	468.75	468.75	468.75	468.75	468.75
Total Tons Disposed	6,842.12	6,108.17	7,991.00	7,625.65	7,752.33	8,621.40

* - Wood chips were not broken down by month for 2004 and an average was used.

SECTION 2 (Cont.)

Quantity of Solid Waste Disposed

Provide the tonnages of solid waste disposed of:
Tonnages were obtained by: __X__ Scale Weight _____ Truck Count _____ Estimated
_____ Other (Specify: _____)

Type of Solid Waste	July (Tons)	August (Tons)	September (Tons)	October (Tons)	November (Tons)	December (Tons)	Total Year (tons)	Daily Avg. (tons)
Mixed Municipal Solid Waste (Residential, Institutional & Commercial)	4,990.42	5,199.22	5,324.68	4,854.53	4,804.76	4,468.75	56,144.26	153.40
Construction & Demolition (C&D) Debris	0	0	0	0	0	0	0	0
Asbestos Waste	0	0	0	0	0	0	0	0
Industrial Waste (Including Industrial Process Sludges)	2,007.56	2,351.15	2,077.37	2,050.39	2,390.51	2,182.49	25,383.17	69.35
Ash (Coal)	0	0	0	0	0	0	0	0
Ash (MSW Energy Recovery)	0	0	0	0	0	0	0	0
Sewage Treatment Plant Sludge	308.74	415.97	369.54	367.57	373.39	388.75	4,515.42	12.34
Petroleum Contaminated Soil	0.00	133.89	0.00	104.01	13.00	0.00	968.81	2.65
Other (Specify: _____)	468.75	468.75	468.75	468.75	468.75	468.75	5,625	15.37
Total Tons Disposed	7,855.47	8,569.18	8,240.34	7,845.25	7,560.41	7,508.74	92,636.66	253.11

Facility's Service Area

Identify the facility's service area by indicating the type of solid waste received, and the (county, state) or (province, country) from where waste received originates.

Transport (check all that apply): _X_ Road __ Rail __ Water __ Other _____

Type of Solid Waste	County or Province	State or Country	Tons
Mixed MSW	Chemung	New York	56,144.26
Industrial Waste	Chemung	New York	25,383.17
Sewage Treatment Sludge	Chemung	New York	4,515.42
Contaminated Soil	Chemung	New York	968.81
Wood Chips	Chemung	New York	5,625.00

SECTION 3
Unauthorized Solid Waste

Has unauthorized solid waste been received at the Landfill during the reporting period?

__X__ Yes _____ No

If yes, give information below for each incident (attach additional sheets if necessary):

Date Received	Type Received	Date Disposed	Disposal Method & Location

SECTION 4
Site Life

1. What is the remaining life of the existing constructed landfill? 4 Years 2 Months At 82,685 C.Y. Per Year

   What is the corresponding capacity? 350,969 Cubic Yards of Airspace

2. What is the estimated landfill capacity utilized for the year? 84,959 Cubic Yards of Airspace

3. What is the estimated in situ waste density? .9085 Tons/Cubic Yard

4. What is the projected life of the entitled undeveloped landfill capacity authorized under a permit? 16 Years 10 Months At 82,685 Tons Per Year

   What is the corresponding capacity? 1,387,685 Cubic Yards of Airspace

5. What is the estimated landfill capacity of any proposed expansion area not authorized under a permit? N/A Cubic Yards of Airspace

Waste in Place

Number of landfill sections: 2

Original* section used (years) from 1974 to 1982
Capped with approved final cover system Yes X No ___

Waste in Place: 783,846 * Cubic Yards
* Estimated, based on 1,300 lb/c.y. average density
Waste Type:

Mixed Municipal Waste	272,216	Tons
Industrial Waste	126,340	Tons
Sewage Treatment Plant Sludge	28,154	Tons
Construction & Demolition Debris	59,039	Tons
Asbestos Waste	0	Tons
Ash	1,608	Tons
Petroleum Contaminated Soil	22,143	Tons

Tonnages are estimates based on total waste in place and recent waste stream wages.

There is no historical data to use for this.

Next* section used (years) from 1983 to 1988 ; Capped Yes X No ___

Waste in Place: 472,658 * Cubic Yards
* Estimated, based on 1,300 lb/c.y. average density
Waste Type:

Mixed Municipal Waste	164,146	Tons
Industrial Waste	76,183	Tons
Sewage Treatment Plant Sludge	16,977	Tons
Construction & Demolition Debris	35,600	Tons
Asbestos Waste	0	Tons
Ash	970	Tons
Petroleum Contaminated Soil	13,352	Tons

Tonnages are estimates based on total waste in place and recent waste stream wages

* If there are additional landfill sections, phases or cells, please attach to form providing above waste in place information.

SECTION 5
Material Recovered

For each type of solid waste recovered from disposal, provide the annual weight in tons and indicate the destination.

Tonnages were obtained by: _____ Scale Weight _____ Truck Count
_____ Estimated _____ Other (Specify: _____)

Type of Solid Waste Recovered	Weight (tons/year)	Final Destination
Aggregate & Concrete	0	
Wood & Wood Chips	0	
Glass	0	
Plastic	0	
Paper	0	
Metal Containers	0	
Bulk Metal	0	
Other (Specify: _____)	0	
Total Recovered	0	

Is the landfill authorized to handle recyclable material? ___ Yes _X_ No

Is the landfill authorized to process construction and demolition (C&D) debris? _X_ Yes ___ No

For each type of waste material that the Department has approved for use as alternate daily cover, intermediate cover, or other landfill material, provide the annual weight in tons and use (i.e., daily cover, intermediate cover, etc.)

Type of Solid Waste	Weight (tons/year)	Use
Aggregate/Concrete/Glass	0	
Wood/Wood Chips *	5,625	Daily Cover & Road Base
MSW/Wood Ash	0	
Compost	0	
Paper Mill Sludge	0	
Contaminated Soil	968.81	Daily Cover
Shredder Fluff	0	
Other (Specify: _____)	0	
Total	6,593.81	

* - Wood chips are quantified by truck count after having determined an average weight of 5 tons per truckload.

SECTION 6
Primary Leachate

Enter the quantity of *primary leachate that was collected and removed for treatment each month:

*Note: for double-lined landfills this should not include the volume of leachate collected from secondary leachate collection and removal systems

	Leachate Collected (Gallons)	Treated On Site (Gallons)	Treated Off Site (Gallons)
January	281,537.23	0	281,537.23
February	706,700.71	0	706,700.71
March	566,764.40	0	566,764.40
April	465,289.19	0	465,289.19
May	488,165.80	0	488,165.80
June	311,863.94	0	311,863.94
July	483,167.41	0	483,167.41
August	760,503.02	0	760,503.02
September	839,443.32	0	839,443.32
October	159,595.45	0	159,595.45
November	313,001.74	0	313,001.74
December	565,553.41	0	565,553.41
ANNUAL	5,941,605.62	0	5,941,605.62

Name of off-site leachate treatment facility(s) utilized: CCESD Milton St. WWTF, CCESD #1 WWTF

Does the facility have a constructed liner and a leachate collection system? X Yes ____ No

Acreage of the lined area from which leachate is collected: 16.6 acre(s)

Submit (attached to this form) a copy of the maintenance logs which document compliance with the Operation and Maintenance Manual's schedule for the routine annual flushing and inspection of the primary leachate collection and removal system. List required submissions that have been attached to this form or the reason for not attaching a required piece of information: This information is included as Appendix E - Maintenance Logs for Leachate System Flushing and Inspection

Submit (attached to this form) a tabulated compilation of the semi-annual primary leachate quality data collected throughout the year including a summary comparing this year's data with the previous year's data and a summary discussion of results. This list should identify sample location(s) and method of analysis. List required submissions that have been attached to this form or the reason for not attaching a required piece of information: This information may be found in the Leachate Pond portion of Appendix B - Friend Laboratory CCSWMD Historical Database and Parameter Exceedances.

SECTION 7
Secondary Leachate

Does landfill have a double liner system with a secondary leachate collection and removal system? X Yes ____ No

If yes, enter the quantity of secondary leachate that was collected and removed for treatment each month:

	Leachate Collected (Gallons)*	Treated On Site (Gallons)	Treated Off Site (Gallons)
January	2,439.29	0	2,439.29
February	1,849.53	0	1,849.53
March	2,616.08	0	2,616.08
April	2,697.33	0	2,697.33
May	3,185.30	0	3,185.30
June	2,546.92	0	2,546.92
July	3,427.94	0	3,427.94
August	4,312.72	0	4,312.72
September	2,476.64	0	2,476.64
October	1,030.40	0	1,030.40
November	1,811.51	0	1,811.51
December	1,599.03	0	1,599.03
ANNUAL	29,992.69	0	29,992.69

Acreage of the lined area from which secondary leachate is collected:

18.28acre(s)

Submit (attached to this form) a tabulated compilation of the semi-annual secondary leachate quality data collected throughout the year including a summary comparing this year's data with the previous year's data and a summary discussion of results. This list should identify sample location(s) and methods of analysis. List required submissions that have been attached to this form or the reason for not attaching a required piece of information: Secondary Leachate is combined with Primary Leachate at Manhole # 1. Leachate is sampled after this point and therefore the analysis is of combined primary and secondary leachate. Leachate quality data may be found in the Leachate Pond portion of Appendix B - Friend Laboratory CCSWMD Historical Database and Parameter Exceedances.

* Secondary leachate collected is calculated by multiplying the average monthly leakage rate (gpad) by the secondary leachate collection area in acres then multiplying this figure by the number of days in the particular month. This volume is not included in the primary leachate volume on the preceding page.

SECTION 8
Tipping Fee/Leachate Treatment Cost

Tipping Fee: 60 $/ton

For each type of waste below, indicate the tipping fee if different:

Mixed Municipal Solid Waste (Residential, Institutional & Commercial)	60 $/ton
Construction and Demolition (C&D) Debris	55 $/ton
Asbestos Waste	N/A $/ton
Industrial Waste (Including Industrial Process Sludges)	60 $/ton
Ash (Coal)	60 $/ton
Ash (MSW Energy Recovery)	60 $/ton
Ash (Incinerator, Sewage Sludge, Other Sludge, Wood & Other)	60 $/ton
Petroleum Contaminated Soil	5.25 $/ton
Other (Specify:)	$/ton

Leachate: Cost (including transportation if appropriate) during the calendar year for leachate treatment: $40,000 * Total quantity treated: 11,906,829.21 gal

* - Leachate treatment cost includes C&D/Area3 and Active MSW Area leachate

SECTION 9
Cost Estimates and Financial Assurance Documents

Submit (attached to this form) any required cost estimates and financial assurance documents for closure, post-closure care, and applicable corrective measures, all reflecting adjustments for inflation to indicate updated dollars for the year of operation for which the Annual Report is made. List submissions (required by this section) that have been attached to this form or the reasons for not attaching a required piece of information: The 2004 Financial Assurance Plan for the Chemung County Solid Waste Management District is currently being prepared and will be submitted separately when it has been completed.

SECTION 10
Changes

Identify any changes from approved reports, plans, specifications, permit conditions and fill progression plan with a justification for each change. List submissions (required by this section) that have been attached to this form or the reasons for not attaching a required piece of information: None

SECTION 11
Summaries of "Comparing Data" and "Discussion of Results"

Submit (attached to this form) a summary of the water quality information presented in Sections 13 and 14 for the year of operation for which the Annual Report is made, noting any changes in water quality which have occurred throughout the year. List submissions (required by this section) that have been attached to this form or the reasons for not attaching a required piece of information: This information is contained in Chapter IV - Section C - Summary of Groundwater Monitoring and Section E - Summary of Groundwater and Surfacewater in the attached Annual Report.

SECTION 12

Analytical Results

Submit (attached to this form) a table showing the sample collection date, the analytical results [including all peaks even if below the Method Detection Limits (MDL)], designation of upgradient wells and location number for each environmental monitoring point sampled, applicable water quality standards, and groundwater protection standards if established, MDL's, and Chemical Abstracts Service (CAS) numbers on all parameters. List submissions (required by this section) that have been attached to this form or the reasons for not attaching a required piece of information: Locations and designations of monitoring points are given in Chapter IV - Environmental Monitoring of the attached Annual Report. Facility-based exceedance values have been developed and are included in Appendix B. CAS numbers are included as Table IV-6.

SECTION 13
Comparing Data

Submit (attached to this form) tables or graphical representations comparing current water quality with existing water quality and with upgradient water quality. These comparisons may include Piper diagrams, Stiff diagrams, tables, or other analyses. List submissions (required by this section) that have been attached to this form or the reasons for not attaching a required piece of information: Appendix B, CCSWMD Historical Database with graphical representations of parameters above Exceedance Values, contains tables comparing analytical values to the overall landfill exceedance values as determined in accordance with 6NYCRR, Part 360, and charts of values which exceed these values.

SECTION 14
Discussion of Results

Submit (attached to this form) a summary of any contraventions of State water quality standards, significant increases in concentrations above existing water quality, any exceedances of groundwater protection standards, and discussion of results, and any proposed modifications to the sampling and analysis schedule necessary to meet the Existing, Operational and Contingency water quality monitoring requirements. List submissions (required by this section) that have been attached to this form or the reasons for not attaching a required piece of information: Tables IV-2 and IV-3 of the report attached to this form list specific exceedances.

SECTION 15
Data Quality Assessment

Submit (attached to this form) any required data quality assessment reports. List submissions (required by this section) that have been attached to this form or the reasons for not attaching a required piece of information: This information is submitted to NYSDEC Region 8 on a quarterly basis.

SECTION 16
Surface Impoundments

Does this landfill have a surface impoundment? __X__ Yes _____ No

If yes, there are separate water quality reporting requirements for surface impoundments. Namely, for each surface impoundment, repeat Sections 12 through 15 above for Quarterly Reports and Section 11 above for Annual Reports. List submissions (required by this section) that have been attached to this form or the reasons for not attaching a required piece of information: This information is contained in Chapter IV, Section D - Surfacewater and Sediment Monitoring and Section F - Summary of Groundwater and Surfacewater of the report attached to this form.

SECTION 17
Permit/Consent Order Reporting Requirements

Are there any additional permit/consent order reporting requirements not covered by the previous sections of this form? _____ Yes __X__ No

If yes, identify the reporting requirements with their respective responses below, attaching additional sheets as necessary. List submissions (required by this section) that have been attached to this form or the reasons for not attaching a required piece of information:

SECTION 18
Landfill Gas

Does the landfill have a landfill gas collection & control system?
Yes __X__ No ____

If Yes: Active ___ Passive __X__

Number of Flares: __5__

Type of Flare: Opened Flare __X__ Enclosed Flare _____

Quantity of Gas collected and treated annually __11.09__ mmcf*

Number of Internal Combustion Engines: __0__

Quantity of Gas collected and treated annually __0__ mmcf*

Does the landfill require a Title V Permit? Yes __X__ No _____

Name of Landfill Gas Recovery Facility: __N/A__

*mmcf (million cubic feet)

SECTION 19
Signature and Date By Owner or Operator

Owner or Operator must sign, date and submit one completed form with an original signature to:

New York State Department of Environmental Conservation
Division of Solid & Hazardous Materials
Bureau of Solid Waste, Reduction & Recycling
625 Broadway, 9th Floor
Albany, New York 12233-7253

and one copy with an original signature to the appropriate Regional Office. (See attachment for Regional Office addresses and Solid Waste Contacts.)

I hereby swear or affirm that information provided on this form and attached statements and exhibits is true to the best of my knowledge and belief.

Signature _____ Date 2-25-05

Gale E. Wolfe
Name (Print or Type)

Director of Environmental Services
Title (Print or Type)

690 Lake Street, P.O. Box 588
Address

Elmira
City

N.Y. 14902-0588
State and Zip

(607) 737 - 2980
Phone Number

ATTACHMENTS: X YES ___ NO
(Please check appropriate line)