9

Annual/Quarterly Report

A. This MSW, Industrial or Ash Landfill Annual Report for the year of operation from January, 2009 to December, 2009.

B. Quarterly Report for: ___Quarter 1 ___Quarter 2 ___Quarter 3 ___Quarter 4

SECTION 1 - Owner/Facility Information

Facility Name Hyland Facility Associates NYSDEC Activity Code # 02S17

Facility Location 6653 Herdman Road , Angelica State NY Zip 14709

Facility Contact Joseph R Boyles Phone # (585) 466-7271

Contact e-mail address joe.boyles@casella.com Fax # (585) 466-3206

Town Angelica County Allegany NYSDEC Region # 9

NYS Planning Unit Allegany County (A list of NYS Planning Units can be found at the end of this report.)

360 Permit # 9-0232-00003/0000-2 Issued 10/10/2007 Expires 05/01/2015

Owner Name Hyland Facility Associates Phone # (585) 466-7271

Mailing Address 6653 Herdman Road Angelica State NY Zip 14709

SECTION 2 - Site Life

1. Landfill Capacity Utilized Last Year (reporting year). **(Based on Survey Dates of December 31, 2008 and October 26, 2009)**

   a. What is the estimated landfill capacity that was utilized during the reporting year?

   ~187,083 Cubic Yards of Airspace

   b. What is the estimated in-situ waste density for the reporting year?

   ~ 0.64 Tons/Cubic Yard

2. Remaining Constructed Capacity

   a. What is the remaining capacity of the landfill that is already constructed?

   ~ 366,209 Cubic Yards of Airspace

   b. What is the estimated remaining life of the constructed capacity?

   ~ 1.0 Years _____ Months

   at 234,000 Tons/Year.*

   * Please note that this tonnage rate must include all materials placed in the landfill, i.e., waste, soil, cover, alternative daily covers, etc.

   c. Is the tonnage rate reported under 2.b. based on (select one):

   _____ Last year's disposal amount?

   x Estimated future disposal?

   _____ Permit limit?

   Other (explain): _____

3. Permitted Capacity Still to be Constructed

a. What is the remaining but not yet constructed landfill capacity that is authorized by a Part 360 permit?

~ 9,863,420 Cubic Yards of Airspace

b. What is the projected life of capacity reported in 3a.?

~ 20.1 Years _____ Months

at 312,000 Tons/Year.*

*Please note that this tonnage rate must include all materials disposed in the landfill, i.e., waste, and soil and alternative daily covers.

c. Is the tonnage rate reported under 3.b. based on (select one):

_____ Last year's disposal amount?

x Estimated future disposal?

_____ Permit limit?

Other (explain):

4. Capacity Proposed in a Part 360 Permit Application

What is the capacity of any expansion proposed in a Part 360 permit application that has been submitted to the Department but not authorized by a permit as of the end of the reporting period?

n/a Cubic Yards of Airspace

5. Estimated Potential Future Capacity Not Permitted or in an Application (optional)

What is the estimated capacity of any potential future expansion at the facility that is not yet authorized by a permit or proposed in a Part 360 permit application that has been submitted to the Department?

n/a Cubic Yards of Airspace

SECTION 3 - Primary Leachate

Name of off-site leachate treatment facility(s) utilized: Wellsville WWTP/Hornell WWTP/ Westfield WWTP.

Does the landfill have a constructed liner and a leachate collection system? X Yes _____No

Enter the quantity of primary leachate that was collected, removed for on-site and off-site treatment, and recirculated each month, and the corresponding Acreage, by Cell: (Note: For double-lined landfills this should not include the volume of leachate collected from secondary leachate collection and removal systems.

	PRIMARY LEACHATE COLLECTED (GALLONS)						PRIMARY/SECONDARY LEACHATE TREATED OFF SITE (GALLONS)					
	Cells Combined 1, 2, and 3 Also See Attachment 2. Below is total Leachate minus 2nd ary						Cells 1, 2, and 3.					
January	588,790			N/A	N/A	N/A	239,144			N/A	N/A	N/A
February	938,253			N/A	N/A	N/A	871,150			N/A	N/A	N/A
March	828,258			N/A	N/A	N/A	983,991			N/A	N/A	N/A
April	1,227,841			N/A	N/A	N/A	566,928			N/A	N/A	N/A
May	353,071			N/A	N/A	N/A	62,541			N/A	N/A	N/A
June	292,296			N/A	N/A	N/A	353,283			N/A	N/A	N/A
July	315,722			N/A	N/A	N/A	401,277			N/A	N/A	N/A
August	580,437			N/A	N/A	N/A	470, 217			N/A	N/A	N/A
September	446,983			N/A	N/A	N/A	569,826			N/A	N/A	N/A
October	483,195			N/A	N/A	N/A	631,113			N/A	N/A	N/A
November	274,303			N/A	N/A	N/A	201,531			N/A	N/A	N/A
December	104,585			N/A	N/A	N/A	215,398			N/A	N/A	N/A
ANNUAL	6,434,364			N/A	N/A	N/A	5,566,399			N/A	N/A	N/A

	PRIMARY/SECONDARY LEACHATE RECIRCULATED (GALLONS)						PRIMARY LEACHATE TREATED ON SITE (GALLONS)					
	Cell 1 & 2 28.82Acres						Cell 1 __Acres	Cell 2 __Acres	Cell 3 __Acres	Cell 4 __Acres	Cell 5 __Acres	Cell 6 __Acres
January	150,000			N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
February	31,500			N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
March	60,000			N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
April	135,000			N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
May	55,000			N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
June	0			N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
July	0			N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
August	0			N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
September	0			N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
October	0			N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
November	54,300			N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
December	6,000			N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
ANNUAL	491,800			N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

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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:

SEE ATTACHMENT 5

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:

SEE ATTACHMENT 12

SECTION 4 - Secondary Leachate

Does landfill have a double liner system with a secondary leachate collection and removal system? ___xx__Yes _____No

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 all previous years' 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:

SEE ATTACHMENT 12

Leachate Cost: (including transportation if appropriate) during the calendar year for leachate treatment: $_200,000_____

Total quantity treated: _5,566,399_____ gal

Enter the quantity of secondary leachate that was collected, removed for on-site and off-site treatment, and recirculated each month, and the corresponding Acreage, by Cell:

	SECONDARY LEACHATE COLLECTED (GALLONS)						SECONDARY LEACHATE TREATED OFF SITE (GALLONS)					
	Cell 1 A/B 9.6_Acres	Cell 1 C/D 7.9_Acres	Cell 2 E/F 6.99Acres	Cell 2 G/H 4.33Acres	Cell 3 9.7_Acres		Combined	With Primary				
January	367	878	0	448	12							
February	481	677	32	555	10							
March	653	585	0	698	0							
April	347	371	245	655	0							
May	572	413	679	909	11							
June	310	304	0	708	344							
July	269	318	0	708	344							
August	368	394	10	1094	0							
September	231	206	1	1057	1773							
October	240	304	0	1617	925							
November	229	265	0	730	1							
December	56	420	0	713	0							
ANNUAL	4123	5135	967	9892	3420							

	SECONDARY LEACHATE RECIRCULATED (GALLONS)						SECONDARY LEACHATE TREATED ON SITE (GALLONS)					
	Combined	With Primary										

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SECTION 5 – Beneficial Use Materials

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	Source* Facility and Location
Aggregate/Concrete			
Contaminated Soil	6,822.55	Daily Cover	Proprietary to our business
Foundry Sand			
Glass			
Industrial Waste (Please specify)			
MSW/Wood Ash	34.73	Daily Cover	Proprietary to our business
Paper Mill Sludge			
Processed C&D	1,088.62 779.59	Road Surface Use Daily Cover	Proprietary to our business
Shredder Fluff	26,824.48	Daily Cover	Proprietary to our business
Tire Chips	135.91	Daily Cover	Proprietary to our business
ɔd/Wood Chips	106.29 115.73	Road Surface Use Daily Cover	Proprietary to our business
Other (Please specify)			
Ceramic Tiles	1,860.10	Road Surface Use	Proprietary to our business
Salt Sludge	173.00	Daily Cover	Proprietary to our business
Total	37,941.00		

* Provide NYS Planning Unit, County and State. If material is from a solid waste facility also provide facility name.

Percent Alternative Daily Cover (ADC)Calculation

ADC Calculations: Total Tons ADC/Total Tons Waste Disposed x 100 = **17.9%**

Please note the calculation **is**:

Tons ADC (from table above)/Tons Solid Waste (from table in Section 6)x 100

and **Not**:

ADC / (Tons Solid Waste + ADC) x 100

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SECTION 6 - Quantity Solid Waste Disposed

A. Quantity Disposed by Month/Year

Provide the tonnages of solid waste disposed. Exclude Beneficial Use Material amounts reported in Section 5 and Materials Recovered amounts reported in Section 7. Specify the methods used to measure the quantities disposed and the percentages measured by each method:

100 % Scale Weight _____% Estimated

_____% Truck Count _____% Other (Specify: _____)

Type of Solid Waste	January (tons)	February (tons)	March (tons)	April (tons)	May (tons)	June (tons)	July (tons)
Asbestos	0	0	0	0	0	0	0
Ash (Coal)	0	0	0	0	0	0	0
Ash (MSW Energy Recovery)	0	0	0	0	0	0	0
Construction & Demolition Debris (mixed)	1,225.07	1,369.73	1,932.70	2,667.76	3,240.22	3,357.26	3,019.05
Industrial Waste (Including Industrial Process Sludges)	424.45	425.60	498.19	469.99	429.36	540.99	542.72
Mixed Municipal Solid Waste (Residential, Institutional & Commercial)	9,530.89	7,995.47	13,653.67	13,989.99	13,365.66	14,526.59	15,071.40
Petroleum Contaminated Soil	0	0	0	0	0	0	0
Sewage Treatment Plant Sludge	1,790.48	1,908.49	1,923.52	2,911.76	1,877.48	2,649.29	2,892.73
Treated Regulated Medical Waste	0	0	0	0	0	0	0
Other (Please specify)	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
Total Tons Disposed	12,970.89	11,699.29	18,008.08	20,0039.50	18,912.72	21,074.13	21,525.90

SECTION 6 - Quantity of Solid Waste Disposed (continued)

A. Quantity Disposed by Month/Year

Type of Solid Waste	Tip Fee ($)	August (tons)	September (tons)	October (tons)	November (tons)	December (tons)	Total Year (tons)	Daily Avg. (tons)
Asbestos		0	0	0	0	0	0	0
Ash (Coal)		0	296.50	0	0	0	296.50	.94
Ash (MSW Energy Recovery)		0	0	0	0	0	0	0
Construction & Demolition Debris (mixed)		3,139.90	2,225.11	1,975.30	1,741.68	1,283.87	27,177.65	86.82
Industrial Waste (Including Industrial Process Sludges)		541.90	2,407.54	465.47	331.56	317.92	7,395.69	23.62
Mixed Municipal Solid Waste (Residential, Institutional & Commercial)		12,357.65	10,657.98	11,732.49	11,643.61	11,371.70	145,897.10	466.12
Petroleum Contaminated Soil		0	0	0	0	0	0	0
Sewage Treatment Plant Sludge		2,577.76	2,743.37	3,260.39	3,288.75	3,602.55	31,426.57	100.40
Treated Regulated Medical Waste		0	0	0	0	0	0	0
Other (Please specify)		0	0	0	0	0	0	0
		0	0	0	0	0	0	0
		0	0	0	0	0	0	0
Total Tons Disposed		18,617.21	18,330.50	17,433.65	17,005.60	16,576.04	212,193.51	677.93

Note: Daily average was based upon the 313 days that the landfill was open.

B. Quantity Disposed Facility's Service Area

Identify the facility's service area by indicating the type of solid waste received, the Solid Waste Management facility (SWMF) from which it was received (i.e. Direct Haul), the corresponding NYS Planning Unit, the County/Province and State/Country and the amount received. **Refer to the list of NYS Planning Units that can be found at the end of this report.** Note: "Direct Haul" means waste hauled directly to your SWMF which did not go through another SWMF. The total amount reported here should equal the total amount reported in Section 6A (Quantity Received by Month/Year). DO NOT REPORT IN CUBIC YARDS!

PLEASE SEE ATTACHMENT #1 FOR FACILITY SERVICE AREA

Specify transport method and percentages of total waste transported by each:

100 % Road _____% Rail

_____% Water _____% Other (specify: _____)

Explain which waste types and service areas below are included in these transport methods _____

_____

B. Quantity Disposed by Facility's Service Area					
Type of Solid Waste	NYS Planning Unit	County or Province	State or Country	Solid Waste Management Facility (Name & Location)	Quantity (tons)
Asbestos					
Ash (Coal)					

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B. Quantity Disposed Facility's Service Area					
Type of Solid Waste	NYS Planning Unit	County or Province	State or Country	Solid Waste Management Facility (Name & Location)	Quantity (tons)
Ash (MSW Energy Recovery)					
Construction & Demolition Debris (mixed)					
Industrial Waste (Including Industrial Process Sludges)					
Mixed Municipal Solid Waste (Residential, Institutional & Commercial)					

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B. Quantity Disposed Facility's Service Area					
Type of Solid Waste	NYS Planning Unit	County or Province	State or Country	Solid Waste Management Facility (Name & Location)	Quantity (tons)
Petroleum Contaminated Soil					
Sewage Treatment Plant Sludge					
Treated Regulated Medical Waste (TRMW)*					
Other (Please specify)					
Total Tons Disposed					

* List generators that provide you Certificates of Treatment forms and quantities of TRMW from each _____

_____

_____

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NEW YORK STATE DEPARTMENT ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & ZARDOUS MATERIALS
SECTION 7 – RECYCLABLES & RECOVERED MATERIALS

Not Applicable to Hyland

FACILITY NAME:	REGISTRATION OR PERMIT #:

MATERIALS QUANTITIES RECOVERED (Report only in tons. A list of conversion factors is included at the end of this Section)
DESTINATIONS (Indicate facilities where recyclables were shipped. Be specific as possible. "Recycled" is NOT a destination)

RECYCLABLE MATERIAL	TONS RECYCLED (out of facility)	DESTINATION FACILITIES (Location & Address)
PAPER:		
Newspaper		
Magazines		
Corrugated Cardboard		
Office Paper		
Junk Mail		
Paperboard / Boxboard		
Other Paper (specify) _____		
TOTAL PAPER RESIDUE (tons): _____		
GLASS:		
Container Glass		
Non – Container Glass (e.g. windows, vases)		
Industrial Scrap Glass		

TOTAL GLA RESIDUE (tons): _____

RECYCLABLES & RECOVERED MATERIALS
(continued)

RECYCLABLE MATERIAL	TONS RECYCLED (out of facility)	DESTINATION FACILITIES (Location & Address)
METAL:		
Tin & Aluminum Containers		
Aluminum Foil / Trays		
Enameled Appliances / White Goods		
Bulk Metal		
Industrial Scrap Metal		
Other Metal (specify) _____		
TOTAL METAL RESIDUE (tons): _____		
PLASTIC:		
PET (plastic #1)		
HDPE (plastic #2)		
Other Rigid Plastics (#3 - #7)		
Plastic Film & Bags		
Industrial Scrap Plastic		
TOTAL PLASTIC RESIDUE (tons): _____		

RECYCLABLES & RECOVERED MATERIALS
(continued)

RECYCLABLE MATERIAL	TONS RECYCLED (out of facility)	DESTINATION FACILITIES (Location & Address)
MISCELLANEOUS:		
Textiles		
Commingled (paper & containers)		
Commingled (containers)		
Electronics		
Other (specify) _____		
Brush, Branches, Trees & Stumps		
Leaves & Grass		
Food Scraps		
TOTAL MISCELLANEOUS RESIDUE (tons): _____		

VOLUME TO WEIGHT CONVERSION FACTORS

MATERIAL	EQUIVALENT		MATERIAL	EQUIVALENT		MATERIAL	EQUIVALENT	
GLASS – whole bottles	1 cubic yard	0.35 tons	GLASS - crushed mechanically	1 cubic yard	0.88 tons	ALUMINUM – cans – whole	1 cubic yard	0.03 tons
GLASS - semi crushed	1 cubic yard	0.70 tons	GLASS - uncrushed manually	55 gallon drum	0.16 tons	ALUMINUM – cans – flattened	1 cubic yard	0.125 tons
PAPER - high grade loose	1 cubic yard	0.18 tons	PLASTIC – PET – whole	1 cubic yard	0.015 tons			
PAPER - high grade baled	1 cubic yard	0.36 tons	PLASTIC – PET - flattened	1 cubic yard	0.04 tons			
PAPER - mixed loose	1 cubic yard	0.15 tons	PLASTIC – PET - baled	1 cubic yard	0.38 tons	WHITE GOODS - uncompacted	1 cubic yard	0.10 tons
NEWSPRINT - loose	1 cubic yard	0.29 tons	PLASTIC - styrofoam	1 cubic yard	0.02 tons	WHITE GOODS - compacted	1 cubic yard	0.5 tons
NEWSPRINT - compacted	1 cubic yard	0.43 tons	PLASTIC – HDPE – whole	1 cubic yard	0.012 tons			
CORRUGATED – loose	1 cubic yard	0.15 tons	PLASTIC – HDPE – flattened 1	1 cubic yard	0.03 tons			
CORRUGATED - baled	1 cubic yard	0.55 tons	PLASTIC – HDPE - baled	1 cubic yard	0.38 tons	FERROUS METAL - cans - whole	1 cubic yard	0.08 tons
			PLASTIC – mixed (e.g. grocery bags)	45 gallon bag	0.01 tons	FERROUS METAL - cans	1 cubic yard	0.43 tons

SECTION 8 - Unauthorized Solid Waste

Has unauthorized solid waste been received at the Landfill during the reporting period? __xx_____ Yes _____ No

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

SEE ATTACHMENT 6

Date Received	Type Received	Date Disposed	Disposal Method & Location

Radiation Monitoring

Does your facility use a fixed radiation monitor? _____ Yes XX_ No

Identify Manufacturer _____ and Model _____ of fixed unit.

Does your facility use a portable radiation monitor? _____ Yes _____ No

Identify Manufacturer _____ and Model _____ of fixed unit.

If the radiation monitors been triggered give information below for each incident:

Incident Number	Received		Hauler	Origin	Truck Number	Reading	Disposal Status	Removed	
	Date	Time						Date	Time

SECTION 9 - Waste in Place

Summary by Waste Type and Year

Include all active and inactive sections of the landfill. Report waste disposed annually by type, if known, in tons per year. Report total waste disposed, if breakdown of types is not available. In the case where more than one landfill section operated in a given year identify each separately, if known. If the annual amount is not available, report the quantities for a range of years. If you include amounts from old, closed landfills then clearly identify them on the table and explain below. In each row, report quantities disposed each year (or group of years if individual years unknown) for each waste type. Report cumulative WIP at bottom (sum of annual quantities disposed). Add additional sheets as necessary.

Year	MSW (tons)	Asbestos Waste (tons)	Ash (tons)	C&D Debris (tons)	Industrial Waste (tons)	Petroleum Contaminated Soil (tons)	Sewage Treatment Plant Sludge (tons)	MSW/C&D Mixed (Tons)	Year(s) Total (tons)	Identify Landfill Section(s) Used
1998 – 2000	151,208	7,271	1,966	51,512	27,869	1,115	707	129,229	370,877	Cell 1
2001	18,805	655	0	6,422	1,956	242	1,781	199,923	229,784	Cell 1
2002	18,437	0	0	6,004	7,560	89	2,037	190,833	224,960	Cell 1
2003	4,951	0	0	2,316	26,299	0	1,741	197,010	232,317	Cell 1 & 2
2004*	170,.313	0	0	17,178	16,402	0	21,939	0	225,832	Cell 1 & 2
2005	201,150	0	0	9,218	13,069	0	7,421	0	230,858	Cell 1 & 2
2006	212,848	0	0	942	4,603	0	12,680	0	231,073	Cell 1 & 2
2007	230,729	0	0	23,240	4,449	0	32,216	0	290,634	Cell 1 & 2
2008	198,674	0	0	43,308	15,276	0	23,937	0	281,195	Cell 1, 2 & 3
2009	145,897	0	297	27,178	7,396	0	31,427	0	212,195	Cell 3
WIP Cumulative Total	1,353,012	7,926	2,263	187,318	124,879	1,446	135,886	716,995	2,529,725	

***MSW and MSW/CD Commingled not reported separately after 2003**

* Other waste could include, but not limited to, yard waste, paper, wood, textiles, or diapers.

Overall in place volume _____~ 3,939,671_____ cubic yards

Method for determining waste composition, if known. ___Scale Tickets_____

Explain if closed landfills are included above _____N/A_____

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Waste Summar Landfill Section

Provide waste in place information for all landfill sections.

Number of landfill sections: _Cells 1, 2 & 3 are contiguous___

Original* section used (years) from _1998____ to _current___

Section Footprint __38.5_____ acres

Capped with approved final cover system Yes _____ No __xx____

Percent capped _____

Waste in Place: _____ Tons _____ Cubic Yards, if known

Next* section used (years) from _____ to _____

Section Footprint _____ acres

Capped with approved final cover system Yes _____ No _____

Percent capped _____

Waste in Place: _____ Tons _____ Cubic Yards, if known

* If there are additional landfill sections, phases or cells, please provide the same waste in place information on additional sheets and attach to form.

SECTION 10 - Landfill Gas

Does the landfill have a landfill gas collection & control system?
Yes __X__ No ____ If Yes: Active _X__ Passive ___

Number of gas wells: __24_____

Total landfill footprint acreage _38____

Total landfill acreage from which gas is collected _28.3____

Landfill sections from which gas is collected __Cells 1 & 2_____

Landfill acreage from which gas is collected for energy recovery _28.3____

Measured Methane Generation Rate*, k _____

Measured Potential Methane Generation Capacity*, L_o _____ m^3/Mg

NMOC Concentration* ____205_____ ppmv as hexane

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

Name of Landfill Gas Recovery (gas to energy or other use) Facility: _Hyland Landfill Gas to Energy Plant_____

* Note: If Concentration NMOC, Lo and k are not known or included, default values will be used to calculate the NMOCs emissions from the Landfill.

Flare

Number of Flares: _1_____

Type of Flare: Opened Flare __1_____ Enclosed Flare _____

Quantity of Gas Collected and Flared Annually ___175,500_____ cubic feet
Flare Hours of Operation per Year __4.5_____ hours/year
Methane Percentage in Landfill Gas before processing __48____ %
Methane Destruction efficiency _98_____ %

Gas To Energy

Number of Internal Combustion Engines: _3_____

Quantity of Gas collected for Internal Combustion Engine Annually 756,865,297 cubic feet
Methane Destruction efficiency _98_____ %

Number of turbine driven generators: __n/a____

Quantity of Gas Collected for Turbine Annually _____ cubic feet
Methane Destruction efficiency _____ %
Methane Percentage in Landfill Gas before processing _____ %
Utility Company Receiving Electricity _____

Gas Processed for Use (Other than gas to electricity)

Quantity of Gas Collected for Processing _____
Methane Percentage in Landfill Gas before processing _____ %
On-site or Off-site User of Gas _____

Landfill Gas Recovery Facility/Landfill Data

Facility Contact ___Joseph Boyles_____ Phone # (585)466-7271

Contact e-mail address _Joesph.Boyles@casella.com____ Fax # (585)466-3206

Operation and maintenance cost for calendar year: $__835,770_____

Does the LGRF experience shut downs: ___X_____Yes _____No

If yes, indicate reasons for shut downs. List required submissions that have been attached to this form or the reasons for not attaching a required piece of information:
___SEE ATTACHMENT 10_____

_____

Year landfill opened: __1998_____ Anticipated landfill closure date: _2031_____

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Results of Condensate Sampling

Submit (attached to this form) condensate quality monitoring results accomplished in accordance with condensate sampling. List submissions (required by this section) that have been attached to this form or the reasons for not attaching a required piece of information:

SEE ATTACHMENT 12

Landfill Gas Utilized For Energy Recovery

Provide the following information for the landfill gas conversion facility. DO NOT INCLUDE FLARED!

	Landfill Gas Collected for Energy Recovery (Cubic Feet)	Steam* Generated (Cubic Feet)	Electricity* Generated (K.W.H.)	Gas Produced for use other than electricity generation (Cubic Feet)	Condensate Generated (Gallons)	Facility Operation (Hours)
January	72,760,273		3,236,080			741
February	66,654,700		2,969,110			663
March	66,450,571		3,421,800			742
April	63,108,538		3,200,330			715
May	73,411,323		3,271,400			733
June	67,324,000		3,152,650			716
July	62,340,438		3,206,030			737
August	60,996,977		3,199,490			727
September	57,936,312		3,018,550			716
October	57,301,459		3,260,520			728
November	53,808,206		3,093,270			720
December	54,772,500		3,238,240			706
ANNUAL TOTAL	**756,865,297**		**38,267,470**			**8644**

* Provide where applicable.

Normal Weekdays of Operation 7 days per week Normal Hours of Operation 24 hours per day

Electricity Generated and used onsite 1,552,190 KWH
Gas Produced and used onsite _____ cubic feet

Describe the collection, storage, treatment and disposal techniques used in managing the condensate: Condensate generated in the horizontal gas collectors drains back into the landfill cell's leachate collection system where it commingles with leachate. Leachate and condensate is then pumped via pipe to a holding lined pond. Condensate generated by the landfill gas collection system and the LFGTE plant is removed by a series of knockout tanks that discharge via pipe to the lined holding pond. Liquid that collects in the holding pond is removed by pumping into a tanker truck and hauling the liquid to a waste water treatment facility.

(REPRINTED 12/09)

SECTION 11 - 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 and any changes to the Closure, Post Closure or Closure Maintenance Plans 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:

SEE ATTACHMENT 7

SECTION 12 - Problems

Identify any problems encountered during the reporting period (e.g., specific occurrences which have led to changes in facility procedures) and methods for resolution of the problems. List submissions (required by this section) that have been attached to this form or the reasons for not attaching a required piece of information:

NOTHING TO REPORT

SECTION 13 - 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:

NOTHING TO REPORT

SECTION 14 - Analytical Results

Submit (attached to this form) tables 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:

SEE ATTACHMENT 12

SECTION 15 - 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:

SEE ATTACHMENT 12

SECTION 16 - 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:

SEE ATTACHMENT 12

SECTION 17 - Summaries of Monitoring Data

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:

SEE ATTACHMENT 12

SECTION 18 - 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:

SEE ATTACHMENT 12

SECTION 19 - Surface Impoundments

Does this landfill have a surface impoundment? _xx___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:

SEE ATTACHMENT 12

(REPRINTED 12/09)

SECTION 20 - Permit/Consent Order Reporting Requirements

Are there any additional permit/consent order reporting requirements not covered by the previous sections of this form? __xx__Yes _____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:

Additional permit requirements for the 4th Quarter of 2009, as specified in Special Conditions #84 & #85:

#84.a. Amounts of waste . . . received from each New York State county on a county by county basis, from the United States on a state by state basis and from outside the country on a nation by nation basis.

Hyland: See Attachment #1

#84.b. Report on the receipt of unauthorized wastes received during the quarter.

Hyland: See Attachment #6

#84.c. The amount of leachate collected and hauled off-site on a daily basis and the disposal location. The daily logs of leachate level in the leachate storage tank shall be provided as well.

Hyland: See Attachment #2

#84.d. The amounts of liquid collected from the secondary collection system on a daily basis.

Hyland: See Attachment #2

#84.e. The monthly Action Leakage Rate for the secondary collection system of each cell or subcell of the landfill.

Hyland: See Attachment #2

#84.f. The date when liquid is detected in any leak location, including the liquid removed from each location. This includes all leak detection locations including but not limited to those identified on the most recent approved weekly leachate inspection log.

Hyland: See Attachment #4

#84.g. The amount of ADC received during the quarter with a breakdown of how much was used, as well as the volume that is stockpiled on site.

Hyland: See Section 5. There was no ADC stockpiled at the end of the quarter i.e. All of it was used

#84.h. Results from the monitoring of the gas monitoring wells around the perimeter of the landfill.

Hyland: See Attachment #12 (in the text there is a chart)

#84.i. The analytical results for any condensate samples collected during the quarter being reported,

Hyland: Please see Attachment #12

#84.j. The amount of condensate collected, the disposal location and the number of gas extraction wells/laterals in operation.

Hyland: Hyland collects condensate into the leachate collection system; the condensate is not metered (in compliance with NYSDEC approved design plans). All condensate is mixed with primary leachate and treated offsite at either the Wellsville, Jamestown or Westfield WWTP or recirculated

See Section 10 for Well and Lateral information

#84.k. The amount of groundwater removed from each groundwater suppression system on a weekly basis. After Cell 5 is constructed, a flow rate shall be determined once per week. Weekly measurements shall occur during the operational life of the landfill and not during post-closure.

Hyland: Hyland does not currently monitor the flow volume from the groundwater suppression system (in compliance with NYSDEC approved design plans).

#84.l. The number of trucks delivering waste and ADC material to the site each day.

Hyland: See Attachment #1

#84.m. The amount of BUD material (drainage/ADC/road) delivered to the site each day, amount of material used and amount stored.

Hyland: See Attachment #3. There were no BUD materials stockpiled at the end of the quarter (or year).

***#85a.* Amounts of waste . . . received from each New York State county on a county by county basis, from the United States on a state by state basis and from outside the country on a nation by nation basis.**

Hyland: See Attachment #1

#85.b. Copies of current and up-to-date contracts with a minimum of 2 wastewater treatment facilities for the disposal of leachate for the up-coming year. In addition, copies of current and up-to-date contracts with the back-up hauler for the upcoming year shall be provided.

Hyland: Annual Requirement – See Attachments 8 & 9

#85.c. Any changes to the Fill Progression Plan or modifications to the landfill.

Hyland: No Changes

#85.d. An updated cost estimate for closure/post-closure activities to reflect inflation and/or any changes that may impact closure or post-closure

***Hyland: Annual Requirement* - See Attachment 7 for Updated Closure & post-Closure Estimates**

#85.e. An updated topographic map (based on Fall conditions) of the site. Included with the topographic map shall be a discussion on the amount of waste received, the remaining volume/life of the site and a soil balance for the site. The soil balance shall include: the amount of soil required for cover, closure and other activities; the amount of soil remaining in the permitted borrow area; and the amount of soil that needs to be imported.

***Hyland: Annual Requirement* – See Attachment 11**

#85.f. Unusual events or accidents at the landfill and response by landfill personnel.

***Hyland: Annual Requirement* – Nothing to Report**

#85.g. Any changes in water quality which have occurred throughout the report year and a summary of the water quality information.

Hyland: Annual Requirement - See Attachments 12

#85.h. Any approved changes from the approved plans, reports and specifications or permit, along with a justification for the change.

Hyland: Annual Requirement – There have been no changes or deviations from approved plans or permits

#85.i. Summary Report for the active gas system including the amount of gas burned and condensate collected.

***Hyland: Annual Requirement* - Please see Section 10**

#85.j. A detailed plan covering the next three years of operation and construction activities. The plan shall indicate which areas will be constructed, operated and/or closed.

Hyland:

Note: All Forcasts are dependent upon volume of waste received

2010 - Hyland plans to construct Cell 3c and operate in Cell 3 (overlayed upon Cell 2)as well as on the slopes of Cells 1&2
2011 - Hyland plans to construct Cell 4a and operate in Cells 3 & 4. Fill will take place on settled slopes as available.

2012 - No construction scheduled. Hyland plans to operate in Cells 3 & 4,

Capping may occur on Cell 1 in 2012 dependent upon rate and volume of settlement on the side slopes.

#85.k. Completed Landfill Gas Recovery Facility Annual Report

Annual Requirement – See Section 10

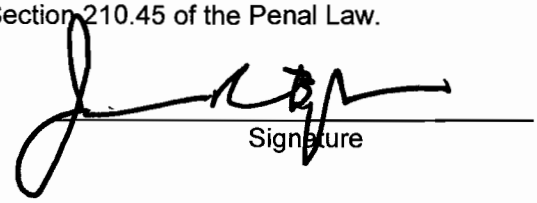
SECTION 21 - Signature and Date By Owner or Operator

Owner or Operator must sign, date and submit one completed form with an original signature to the appropriate Regional Office (See attachment for Regional Office addresses and Solid Waste Contacts.)

The Owner or Operator must also submit one copy by email, fax or mail 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
Fax 518-402-9041
Email address: bwrrfann@gw.dec.state.ny.us

I hereby affirm under penalty of perjury that information provided on this form and attached statements and exhibits was prepared by me or under my supervision and direction and is true to the best of my knowledge and belief, and that I have the authority to sign this report form pursuant to 6 NYCRR Part 360. I am aware that any false statement made herein is punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.



Signature

2/26/10
Date

Joseph R. Boyles
Name (Print or Type)

General Manager
Title (Print or Type)

6653 Herdman Road
Address

Angelica
City

NY 14709
State and Zip

(585) 466 - 7271
Phone Number

ATTACHMENTS: _xx_ YES ____ NO
(Please check appropriate line)

(REPRINTED 12/09)

Annual Landfill Tonnage Report

Section 1 - Owner / Facility Information:

Facility Name:	Hyland Facility Associates
Facility Location:	6653 Herdman Road
Facility State:	NY
Facility Zip Code:	14709
Facility Contact:	Joe Boyles
Phone #:	585-466-7271
Fax #:	585-466-3206
Town:	Angelica
County:	Allegany
NYSDEC / State Region #:	
NYSDEC / State Activity Code #:	
Registered Facility:	
360 Permit #:	
Issued Date:	
Expiration Date:	
Owner Name:	
Owner Phone #:	
Owner Address:	
Owner State:	
Owner Zip Code:	

Permit Conditions:

The Hyland Associates' Landfill is authorized to receive up to 1,200 tons per day, (based on an annual average), 93,600 tons per quarter, or 312,000 tons per year of waste consisting of MSW incinerator ash, MSW, and non-hazardous industrial waste.

Permitted		
Tons / Day	Tons / Qtr	Tons / Yr
1,200	93,600	312,000

Total Tonnage Received This Year (by waste type and county)

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

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

		Wastes										Wastes approved for use as ADC, AIC, or other landfill material (BUD)									
State	County	Mixed MSW	C&D	Asbestos	Industrial Waste (Including Industrial Process Sludge)	Ash (Coal)	Ash (MWS Energy Recovery)	Sewage Treatment Plant Sludge	Petroleum Contaminated Soil	Other (Specify:)	Total Without BUD	Aggregate/Concrete/Glass	Wood / Wood Chips	MSW / Wood Ash	Compost	Paper Mill Sludge	Contaminated Soil	Shredder Fluff	BUD ADC BUD ROAD BASE	Total BUD	Total Tonnage Including BUD
NY	Albany	0.37	34.49	0.00	6.88	0.00	0.00	0.00	0.00	0.00	41.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	42.57	42.57	84.31
	Allegany	130.08	580.91	0.00	19.55	0.00	0.00	0.00	0.00	0.00	730.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.63	3.63	734.17
	Broome	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Bronx	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Brooklyn	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Cattaraugus	30635.27	1855.09	0.00	5354.35	0.00	0.00	1818.50	0.00	0.00	39663.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1958.04	1958.04	41621.25
	Cayuga	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Chautauqua	10.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10.37
	Chemung	35525.82	0.00	0.00	1.21	0.00	0.00	0.00	0.00	0.00	35527.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	35527.03
	Chenango	2394.42	24.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2419.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2419.02
	Clinton	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Columbia	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Cortland	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Delaware	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Dutchess	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1131.10	1131.10	1131.10
	Erie	11.00	14528.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14539.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6107.47	6107.47	20646.48
	Essex	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Franklin	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Fulton	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Genesee	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	173.00	173.00	173.00
	Greene	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Ham	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.0
Herki	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.0
Jefferson	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.0
Lewis	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Livingston	1105.43	320.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1425.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	189.95	189.95	1615.75
Madison	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Monroe	380.37	6701.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7081.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7081.74
Montgomery	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Nassau	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Niagara	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Oneida	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Onondaga	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Ontario	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Orange	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Orleans	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Oswego	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Otsego	0.00	0.00	0.00	0.00	0.00	0.00	922.54	0.00	0.00	922.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	922.54
Putnam	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Rensselaer	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Rockland	18893.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18893.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18893.47
St. Lawrence	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Saratoga	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	305.39	305.39	305.39
Schenectady	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Schoharie	0.00	0.00	0.00	0.00	0.00	0.00	1007.76	0.00	0.00	1007.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1007.76
Schuyler	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Seneca	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Steuben	28025.30	234.37	0.00	44.79	0.00	0.00	0.00	0.00	0.00	28304.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	383.69	383.69	28688.15
Suffolk	119.09	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	119.09	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	119.09
Sullivan	1720.83	635.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2356.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2356.02
Tioga	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	24467.23	2357.25	26824.48	26824.48
Tompkins	12860.82	1665.61	0.00	1912.41	296.50	0.00	0.00	0.00	0.00	16735.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	105.10	105.10	16840.44
Ulster	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Warren	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Washington	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Wayne	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Westchester	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Wyoming	13.10	0.00	0.00	0.00	0.00	0.00	275.38	0.00	0.00	288.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	288.48
Yates	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
New York	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CT	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
MA	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
NJ	6209.24	369.93	0.00	9.35	0.00	0.00	0.00	0.00	0.00	6588.52	0.00	0.00	0.00	0.00	0.00	0.00	0.00	667.63	667.63	7256.15
PA	7830.45	227.71	0.00	47.15	0.00	0.00	0.00	0.00	0.00	8105.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8105.31
Toronto, Canada	0.00	0.00	0.00	0.00	0.00	0.00	22679.70	0.00	0.00	22679.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22679.70
Kings County, NY	31.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	31.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	69.48	69.48	101.15
Queens County, NY	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Richmand, NY	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Canada	0.00	0.00	0.00	0.00	0.00	0.00	2324.68	0.00	0.00	2324.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2324.68
Other 5	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Other 6	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Other 7	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Other 8	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Other 9	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Other 10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total Tonnage:	145,897.10	27,177.65	0.00	7,395.69	296.50	0.00	31,426.57	0.00	0.00	212,193.51	0.00	0.00	0.00	0.00	0.00	0.00	24,467.23	13,494.30	37,961.53	250,155.04