

**DEPARTMENT FOR ENVIRONMENTAL PROTECTION
DIVISION OF WASTE MANAGEMENT
SOLID WASTE BRANCH**

300 Sower Boulevard, Second Floor

**FRANKFORT, KENTUCKY 40601
(502) 564-6716**

**ANNUAL REPORT FOR A
SOLID WASTE COMPOSTING FACILITY**

DEP 7108 (November 2016)

Any person who knowingly provides false information in any document filed or required to be maintained under KRS Chapter 224 shall be guilty of a Class D felony and upon conviction thereof shall be punished by a fine not to exceed twenty-five thousand dollars (\$25,000), or by imprisonment for a term of not less than one year and not more than five years, or by both fine and imprisonment.

- Before beginning, make additional blank copies for future use.
- Type or print your responses legibly in indelible ink.
- This report shall be received by the Cabinet no later than January 31 following the report year. Please complete all information before submitting your report to this office for review.
- Submit the original and one copy of this report to the Solid Waste Branch.

ANNUAL COMPOST REPORT continued

Volume of Reject Material (plastic, metal, glass, etc.) Disposed: _____ Tons

Landfill _____ Tons

Recycled _____ Tons

Other _____ Tons (specify method) _____

15. Volume of Non-Marketable Compost Disposed: _____ Tons

Landfill _____ Tons

Other _____ Tons (specify method) _____

16. Compost Analytical Information: Insert the average of all analyses conducted in the reporting year.

	Wet Weight	Dry Weight
pH	_____ SU	
Total Solids Content	_____ %	
Volatile Solids Content	_____ %	
Total Phosphorous	_____ ppm	_____ ppm
Total Potassium	_____ ppm	_____ ppm
Total Kjeldahl Nitrogen (TKN)	_____ ppm	_____ ppm
Ammonium Nitrogen (NH ₄ -N)	_____ ppm	_____ ppm
Cadmium	_____ mg/L	_____ mg/kg
Copper	_____ mg/L	_____ mg/kg
Lead	_____ mg/L	_____ mg/kg
Nickel	_____ mg/L	_____ mg/kg
Zinc	_____ mg/L	_____ mg/kg

NOTE: The results reported above should be the average of analyses taken during the reporting year, in accordance with the sampling schedule below. Waste should be analyzed as collected. **Do not conduct a separate analysis of a dried sample for the dry weight values.** Dry weight values (mg/kg) are derived using the following equation: $\text{mg/L} \div (\% \text{ Solids}) = \text{mg/kg dry weight}$.

100

Required number of samples based on annual volume of finished compost.	
Attach a copy of each analysis.	
<u>Tons of Compost</u>	<u>Samples Per Year</u>
500	1
501 – 5,000	2
5,001 – 50,000	4
More than 50,000	12

Temperature Monitoring Record

To be completed by all composting facilities for which pathogen reduction is met by compost residence time and temperature.

Windrow, pile, or cell number _____ Date constructed _____

Ingredients and comments _____

recorded by windrow, pile, or cell

Date	Time	Temperature (°F)			
		Distance from end of pile			
		_____ feet	_____ feet	_____ feet	_____ feet
		°F	°F	°F	°F
		°F	°F	°F	°F
		°F	°F	°F	°F
		°F	°F	°F	°F
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		°F	°F	°F	°F

CERTIFICATION STATEMENT

Year Ending December 31, _____

Permit Number _____

Facility Name _____

Pursuant to 401 KAR 47:160, Section 6(4), "I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for such violations."

SIGNATURE

DATE

This certification clause shall be signed by the responsible person(s) described in 401 KAR 47:160, Section 6(1), and/or (2) and is required by 401 KAR 47:160, Section 6(4). This clause may be incorporated into a cover letter and attached to this submission. This clause shall accompany every report/application submitted to this office.