

**Notice:** This form and any information attached to it are "Public Records" as defined in NC General Statute 132-1. As such, these documents are available for inspection and examination by any person upon request (NC General Statute 132-6).

**Instructions:**

- **Prepare one form for each individually monitored unit.**
- **Please type or print legibly.**
- Attach a notification table with values that attain or exceed applicable groundwater protection standards.
- Send the original signed and sealed form, any tables, and Electronic Data Deliverable to: Compliance Unit, NCDEQ-DWM, Solid Waste Section, 1646 Mail Service Center, Raleigh, NC 27699-1646.

**Solid Waste Monitoring Data Submittal Information**

**Name of entity submitting data (laboratory, consultant, facility owner):**

**Contact for questions about data formatting. Include data preparer's name, telephone number and E-mail address:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
E-mail: \_\_\_\_\_

Facility name: <div style="border: 1px solid black; height: 50px; width: 100%;"></div>	Facility Address: <div style="border: 1px solid black; height: 50px; width: 100%;"></div>	Facility Permit # <div style="border: 1px solid black; height: 50px; width: 100%;"></div>	Actual sampling dates (e.g., October 20-24, 2006) <div style="border: 1px solid black; height: 50px; width: 100%;"></div>
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**Environmental Status: (Check all that apply)**

- Initial/Background Monitoring     Detection Monitoring     Assessment Monitoring     Corrective Action

**Additional Information:**

- A notification of values exceeding a groundwater protection standard as defined in 15A NCAC 13B .1634(g)(h) is attached. It includes a list of groundwater monitoring points, dates, analytical values, NC 2L groundwater standard, NC Solid Waste GWPS and preliminary analysis of the cause and significance of any concentration.
- A re-sampling event was conducted to confirm the exceedances.
- Alternate Source Demonstration(s) have been approved for the following constituents with report date: \_\_\_\_\_

**Certification**

**To the best of my knowledge, the information reported and statements made on this data submittal and attachments are true and correct. Furthermore, I have attached complete notification of any sampling values meeting or exceeding groundwater standards or explosive gas levels, and a preliminary analysis of the cause and significance of concentrations exceeding groundwater standards. I am aware that there are significant penalties for making any false statement, representation, or certification including the possibility of a fine and imprisonment.**

Facility Representative Name (Print) \_\_\_\_\_ Title \_\_\_\_\_ (Area Code) Telephone Number \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_ Affix NC Licensed/Professional Geologist or Professional Engineer Seal

Facility Representative Address \_\_\_\_\_

NC PG/PE Firm License Number (if applicable effective May 1, 2009) \_\_\_\_\_