



Texas Commission on Environmental Quality

Municipal Solid Waste Facility

Waste-As-Ballast Placement Record

This form is to be completed by the landfill manager or designated representative for all landfilled areas using waste as ballast. One form must be completed for each area, or combination of areas, described by approved liner evaluation reports. This form is to be submitted with the Ballast Evaluation Report (BER) (TCEQ-10072) for the evaluated area and may be referenced by the Professional of Record (POR) to verify that the placement of ballast is compliant with the Soils and Liner Quality Control Plan (SLQCP). The site operator must prepare and sign supporting documentation daily verifying the area of waste placement, the waste material in the first 5 feet of waste was free of brush and large bulky items, daily operation of the pressure relief/dewatering system, and a wheeled trash compactor having a minimum weight of 40,000 pounds was used.

1. General Information

Area documented by this record (provide site grid coordinates of each corner):

Soils and Liner Evaluation Report and Geomembrane Liner Evaluation Report document date(s) and approval date(s) for this area:

Date of initial waste placement: _____

Date of completion of first 5 feet of waste in place over entire area: _____

Total required waste-as-ballast thickness for this area:

Note: Calculations for determining the required thickness of waste as ballast are included with the SLQCP/BER for this area.

Date when minimum required thickness of waste was achieved: _____

2. Waste Equipment Used

Type of compaction equipment was used: _____

Did the compactor have a minimum gross weight of 40,000 pounds? Yes No

Was this compactor used throughout the entire period covered by this record? Yes No

If "no" was selected for either of the two preceding questions, attach documentation of initial and final survey data of the ballasted area and scale house truck weight measurements for the time period covered by the BER used in determining in-place waste density. Documentation already included for the BER does not need to be reattached. Is this documentation provided, complete, and accurate? Yes No

3. First Waste Lift Considerations

Describe type(s) of waste placed in first 5 feet of waste over the top of the liner protective cover:

Does the first 5 feet of waste contain any brush or large bulky waste items which would damage the underlying liner system, or which cannot be compacted to the required density?
Yes No

4. Waste Compaction Methods

Approximate loose waste layer thickness prior to compaction: _____

Minimum number of compactor passes for each waste layer: _____

Maximum slope of compacted waste layers: _____

5. Pressure Relief/Dewatering System

Was the pressure relief/dewatering system operated continuously during the period covered by this record, if required? Yes No

Is the pressure relief/dewatering system presently in operation? Yes No

Signature of Permittee or Operator

The waste overlying the area described in this record has been placed and compacted as described in this record and in accordance with the Soils and Liner Quality Control Plan and Site Operating Plan.

signature

date signed

typed or printed name

title

phone number

company or business name

address, city, state, zip code

Note: This completed form must be submitted with the BER and placed in the Operating Record and be available for review.