

From: [DES: SolidWasteInfo](#)
To: [Mills, Austin](#)
Subject: FW: Incident Report June 9-June 15
Date: Tuesday, June 18, 2024 3:13:10 PM
Attachments: [june 9-june 15 incident report.pdf](#)
[image001.png](#)
[image003.png](#)
[image004.png](#)
[image005.png](#)
[image006.png](#)
[image007.png](#)

Good afternoon Austin, fyi, ty neo

Nelson E. Ordway, Executive Secretary
New Hampshire Department of Environmental Services,
Waste Management Division, Solid Waste Management Bureau
29 Hazen Drive, PO Box 95
Concord, NH 03302-0095
phone: 603.271.2925
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Think Green!

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From: Bruce Grover <bruce.grover@casella.com>
Sent: Tuesday, June 18, 2024 3:00 PM
To: DES: SolidWasteInfo <solidwasteinfo@des.nh.gov>; Colby, Jaime <Jaime.Colby@des.nh.gov>;
Daun, Mary <Mary.F.Daun@des.nh.gov>
Subject: Incident Report June 9-June 15

EXTERNAL: Do not open attachments or click on links unless you recognize and trust the sender.

Please find the attached incident report regarding secondary flows from June 9 thru June 15. Thank you

Bruce Grover

OPERATIONS MANAGER

North Country Environmental Services

Bethlehem Landfill

581 Trudeau Road, Bethlehem N.H. 03574

C. 603.728.8391 | P. 603.869.3366 |

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**Incident Report Form for
Solid Waste Management Facilities –
Permitted and Permit-Exempt Facilities**
Waste Management Division, SWMB



RSA/Rule: Env-Sw 1005.09(c)

Instructions: Complete form in its entirety, utilizing additional pages, as necessary. Maps and diagrams are recommended for clarity. A written report is due within 5 working days of the incident / situation date. Form meets the requirements of Env-Sw 1005.09(c) for "written report" if completed in its entirety and submitted in accordance with submission timeframe requirements.

Section I – General Information		
1. Date & Time of Incident / Situation:	2. Date of Report Submission to NHDES:	3. Name of Person Preparing Report:
6/9/24-6/15/24		Bruce Grover
4. Facility Name:	5a. Affected Area Within Facility	5b. Physical Address, Town / City:
North Country Environmental Services	North Country Environmental Services	581 Trudeau Road, Bethlehem, NH 03574
6. NHDES SW Permit Number:	7. Permittee Name on Permit:	8. Mailing Address:
DES-SW-SP-03-002	North Country Environmental Services	P.O. Box 9 Bethlehem, NH 03574

Section II – Parties Involved in Incident / Situation			
9. Persons:			
	Name:	Title:	Affiliation:
a.	Bruce Grover	Operations Manager	Casella
b.	Joe Gay	Engineer	Casella
c.	Kevin Roy	General Manager	Casella
d.			
e.			
f.			

Section III – Details
10. The quantity and types of wastes and material(s) involved in the incident or situation and in the clean-up activities:
This matter involves stage IV phase I (pump station #2)
Pump station #2 secondary for the reporting period of June 9 th thru June 15 th is reported as 51 gallons per acre per day.

11. Measures employed to contain releases caused by the incident or situation:	
No releases caused by this incident.	
12. Assessment of actual or potential hazards to the environment, safety and human health related to the incident:	
There was no hazards to the environment, human health and safety related to this matter.	
13. Measures the permittee has or intends to apply to reduce, eliminate, and prevent a recurrence of the incident or situation:	
<p>NCES believes that the cause of the elevated flows in pump station #2 is related to construction of stage VI phase II and the connections to pump station#2.</p> <p>NCES is scheduled to have primary and secondary piping at the site cleaned the week of June 17. When pump station #2 secondary is cleaned we will be introducing clean water for the cleaning. Once cleaning is complete we anticipate increased generation in the secondary system based on this additional water in the system and our reporting will reflect that temporary increase.</p>	
14. If measures not completed by time of report submission, expected date of completion:	In process and to be determined

Section IV – Signatures

15a. Person Preparing Report:		
Name:	Title / Affiliation:	Signature:
Bruce Grover	Operations Manager, Casella	
Phone Number:	Email Address:	
603-728-8391	Bruce.Grover@Casella.com	

15b. Permittee:		
Name:	Title / Affiliation:	Signature:
Kevin Roy	General Manager, Casella	
Phone Number:	Email Address:	
603-361-6477	Kevin.Roy@Casella.com	

Form Submittal Instructions: