

From: [DES: SolidWasteInfo](#)
To: [Mills, Austin](#)
Subject: FW: Incident report June 18th
Date: Tuesday, June 18, 2024 3:14:00 PM
Attachments: [June 18th.pdf](#)
[image001.png](#)
[image003.png](#)
[image004.png](#)
[image005.png](#)
[image006.png](#)
[image007.png](#)

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 3:03 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 18th

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

Please find attached report regarding levels exceeding 12 inches on primary liner system.

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.

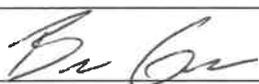
Section I – General Information		
1. Date & Time of Incident / Situation:	2. Date of Report Submission to NHDES:	3. Name of Person Preparing Report:
June 18, 2024	June 18 th , 2024	Bruce Grover
4. Facility Name:	5a. Affected Area Within Facility	5b. Physical Address, Town / City:
North Country Environmental 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

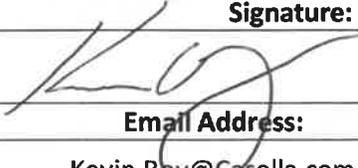
Section II – Parties Involved in Incident / Situation			
9. Persons:			
	Name:	Title:	Affiliation:
a.	Joe Gay	Engineer	Casella
b.	Kevin Roy	General Manager	Casella
c.	Bruce Grover	Operations Manager	Casella
d.			
e.			
f.			

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:
<p>This is regarding 12 inches or more hydraulic head on the primary liner system on June 18th, from 9:20am till roughly 9:40am.</p> <p>During the annual cleaning of the sumps and cleanouts in the pump stations the third party doing the cleaning damaged the transducer on June 17th. When the transducer was replaced the level showed 50 inches in the primary sump, and was pumped down to a normal level within 30 minutes.</p>

11. Measures employed to contain releases caused by the incident or situation:	
No release 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:	
NCES and gates electric has met with the cleaning crew on site and explained how to remove a transducer properly while doing the cleaning, as to reduce potential damage, and replacement of the transducer.	
14. If measures not completed by time of report submission, expected date of completion:	Incident has been resolved

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: