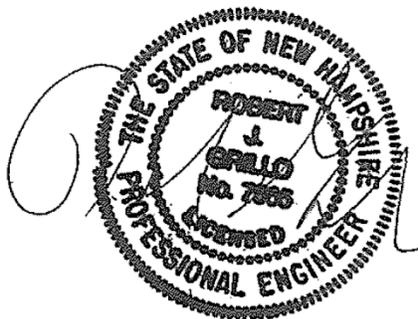


**DES Waste Management Division
29 Hazen Drive; PO Box 95
Concord, NH 03302-0095**

**Stage VI Phase I Landfill Expansion
Notice of Intent to Operate
North Country Environmental Services Landfill
581 Trudeau Road
Bethlehem, NH 03574**

**NHDES Site #: 198704033
Project Type: SW-LNDFILL
Project Number: 0021939**

Prepared For:
North Country Environmental Services
1855 VT Route 100
Hyde Park, VT 05655
Phone Number (802) 651-5454
RP Contact Name: John Gay
RP Contact Email: john.gay@casella.com



Prepared By:
CMA Engineers, Inc.
35 Bow Street
Portsmouth, NH 03801
Phone Number: (603) 431-6196
Contact Name: Robert J. Grillo, P.E.
Contact Email: rgrillo@cmaengineers.com

Date of Application: February 10, 2021



February 10, 2021

Ms. Jaime M. Colby, P.E.
Solid Waste Management Bureau
New Hampshire Department of Environmental Services
29 Hazen Drive, P.O. Box 95
Concord, New Hampshire 03302-0095

35 Bow Street
Portsmouth
New Hampshire
03801-3819

P: 603|431|6196
www.cmaengineers.com

**RE: North Country Environmental Services, Inc.
Notice of Intent to Operate for a Solid Waste Management Facility
Stage VI Phase I Landfill Expansion
DES-SW-SP 03-002
CMA #1063**

Dear Ms. Colby:

On behalf of North Country Environmental Services, Inc., CMA Engineers, Inc. is submitting to you two executed copies of the Notice of Intent to Operate for the Stage VI Phase I landfill expansion of the NCES Landfill in Bethlehem. Construction of the landfill expansion was finalized in December 2020. Also included with this submittal is a list of certified facility operators required by Section V of the form and Section Env-Sw 1105.02(a)(7) of the Solid Waste Rules.

Being submitted to your attention concurrently and under separate cover from this Notice is the construction certification report for the project. Other information and documents requested by the permit conditions was submitted to your attention on January 7, 2021.

If you have any questions, please do not hesitate to ask.

Very truly yours,
CMA ENGINEERS, INC.

A handwritten signature in black ink, appearing to read "Adam Sandahl", is written over the typed name.

Adam Sandahl, P.E.
Project Manager

AJS/kao

Enclosures:

List of Certified Facility Operators

cc: Kevin Roy, NCES (via email only)
Joe Gay, Casella Waste Systems (via email only)
Town Clerk, Town of Bethlehem, NH
Gabe Boisseau, Town of Bethlehem, Board of Selectmen Chair
NHDES OneStop



Solid Waste Management Facility Notice of Intent to Operate

Waste Management Division, SWMB



RSA/Rule: RSA 149-M and Env-Sw 1105

For NHDES Use Only	
Date of receipt.	
WMD Log #:	
<input type="checkbox"/>	Approval to commence operations is granted pursuant to Env-Sw 1105.03. This stamped copy of the Notice of Intent to Operate (NOIO) shall constitute approval to commence operations in accordance with this notice, the approved operating plan, the facility permit, the Solid Waste Rules, and RSA 149-M. If the information provided herein is false, misleading or incomplete, this approval may be revoked or suspended pursuant to Env-Sw 306. Issue date is the date the NOIO is returned.
<input type="checkbox"/>	Approval to commence operations can NOT be granted because all of the prerequisites listed in Env-Sw 1105.01 have not been met. Please call (603) 271-2925 for assistance.
<input type="checkbox"/>	Approval to commence operations can NOT be granted because the form is not complete. Please call (603) 271-2925 for assistance.

SECTION I. FACILITY IDENTIFICATION & CONTACT INFORMATION

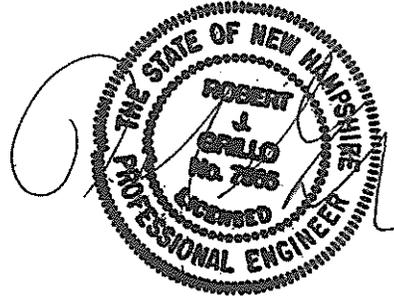
1. Facility name: North Country Environmental Services Landfill
2. Location by street address and municipality: 581 Trudeau Road, Bethlehem, NH 03574
3. Permit number: DES-SW-SP-03-002
4. Permittee: North Country Environmental Services, Inc.
5. Email address or mailing address (for returning operating approval): john.gay@casella.com
6. Identify the facility manager or other individual designated by the permittee as being the individual NHDES should contact regarding operation of the facility:
 - a. Name: John Gay
 - b. Title: Region Engineer
 - c. Mailing address: 1855 VT Route 100, Hyde Park, VT 05655
 - d. Telephone number: (802) 651-5454
 - e. Email: john.gay@casella.com

SECTION II. OPERATING SCHEDULE

1. Intended starting date of operations: February 15, 2021
2. Facility operating hours: 6AM to 6PM

SECTION III. CONSTRUCTION CERTIFICATION FOR PROJECTS SUBJECT TO ENV-SW 1104.06

To the best of my knowledge, the facility has been constructed in accordance with the approved plans and specifications, the facility's permit, the New Hampshire Solid Waste Rules and RSA 149-M, and is fit for operation in accordance therewith as affirmed by affixing my seal and signature hereon pursuant to Env-Sw 1103.05(d) and RSA 310-A:18.



Robert Grillo, P.E.

Project Engineer Name (Print Name)

Robert Grillo

Vice President

Title/Affiliation

2/10/2021

Date

SECTION IV. OPERATING AND FINANCIAL ASSURANCE PLANS

1. For facilities with a standard permit, emergency permit or research and development permit, provide the document log # and approval date for the following:

	Document Log #	Approval Date
Approved Operating Plan	2020-47865-01 through 2020-47865-06	October 9, 2020
Approved Financial Assurance Plan	Same as Above	Same as Above

2. For a permit-by-notification facility, initial below to affirm each of the following statements.

- A written operating plan meeting the requirements of Env-Sw 1105.11 is available at the facility for use by the facility operator(s) and for inspection by NHDES pursuant to Env-Sw 2000. _____
- I have financial responsibility for facility closure pursuant to Env-Sw 1005.08(b). _____

SECTION V. CERTIFIED FACILITY OPERATORS

List all certified facility operators including name and certificate number. Check here if attached .

SECTION VI. PERMITTEE SIGNATURE

- To the best of my knowledge and belief, the material and information submitted in this notice is correct and complete.
- I understand that approval to commence operations, if granted, is subject to revocation or suspension if the information provided in this notice is false or incomplete.
- I hereby affirm that all prerequisites for operations, as specified in Env-Sw 1105.01, have been satisfied for the proposed operations.
- I hereby affirm that I have provided a copy of this notice to the host municipality (i.e., Board of Selectmen/Council, Mayor and Clerk) and host solid waste district at the following email or mailing address(es): Town of Bethlehem, 2155 Main Street, PO Box 189, Bethlehem, NH 03574

Signature

John Gay

JOHN GAY
Authorized Individual Signing for Permittee
(Print Name)

Date

12/1/20

ENGINEER
Title of Authorized Individual or
Affiliation to Permittee

SECTION VII. FACILITY OWNER SIGNATURE

Same as Permittee (Go to Section VIII)

OR

- I am the owner of the facility named in this notice.
- I hereby affirm that the permittee has the legal right to operate the facility for the purposes specified in this notice.
- I hereby affirm that I shall grant access to the facility for closure and post-closure monitoring as required by the New Hampshire Solid Waste Rules and RSA 149-M.

Facility Owner Signature

Date

Authorized Individual Signing for Facility Owner
(Print Name)

Title of Authorized Individual or
Affiliation to Facility Owner

SECTION VIII. LAND OWNER SIGNATURE

Same as Permittee

OR

- I am the owner of the parcel of land on which the facility named in this notice is located.
- I hereby affirm the permittee has the legal right to occupy and use the land on which the facility is located for the purposes specified in this notice.
- I hereby affirm that I shall grant access to the land for closure and post-closure monitoring of the facility as required by the New Hampshire Solid Waste Rules and RSA 149-M.

Land Owner Signature

Date

Authorized Individual Signing for Land Owner
(Print Name)

Title of Authorized Individual or
Affiliation to Land Owner

Application Submittal Instructions:

Please submit the completed application through NHDES' [OneStop Data Provider](#) website using site code "123456789." If you are not registered as a Data Provider, please complete a [registration form](#) to request a username, pin and password.

Facility Name: NORTH COUNTRY ENVIRONMENTAL SERVICES, INC.

2019 ANNUAL FACILITY REPORT

6. Operator Information (Env-Sw 1105.13 (c)

Name:	Certification #:	Expiration Date:	Still Working at Facility as of Dec. 31st?
Stephen Allen	003076	5/10/2020	<input checked="" type="checkbox"/> No
Don Dunn	000513	3/15/2021	<input checked="" type="checkbox"/> Yes
John Gay	004082	9/4/2020	<input checked="" type="checkbox"/> Yes
Bruce Grover	005278	1/20/2021	<input checked="" type="checkbox"/> Yes
Linda Holley	005990	5/3/2021	<input checked="" type="checkbox"/> Yes
Nathan Huntington	004554	1/11/2021	<input checked="" type="checkbox"/> Yes
Thomas Jeffries	003060	10/3/2021	<input checked="" type="checkbox"/> Yes
Sherri Lincoln	005059	4/19/2020	<input checked="" type="checkbox"/> No
Annette L Marquis	003489	11/30/2021	<input checked="" type="checkbox"/> Yes
Rebecca Metcalf	006230	10/22/2021	<input checked="" type="checkbox"/> Yes
Paul J Moroney	002944	11/16/2021	<input checked="" type="checkbox"/> Yes
Jonathan Reed	005982	8/8/2021	<input checked="" type="checkbox"/> Yes
Kevin A Roy	002543	6/2/2021	<input checked="" type="checkbox"/> Yes
Daniel Smith	005283	1/29/2021	<input checked="" type="checkbox"/> Yes
Scott Stevenson	005966	5/3/2021	<input checked="" type="checkbox"/> Yes
Elise M. Thompson	6279.00	10/22/2021	<input checked="" type="checkbox"/> Yes
Aldis Wright	004949	12/14/2020	<input checked="" type="checkbox"/> Yes
Terence Wright	004699	9/29/2020	<input checked="" type="checkbox"/> No