From: DES: SolidWasteInfo
To: Mills, Austin; Daun, Mary

Subject: FW: NCES Incident Report 11.6.24

Date: Thursday, November 7, 2024 7:52:55 AM

Attachments: Incident Report 11 6 24 Pump Station 3 Primary.pdf

image001.png image003.png image004.png image005.png image006.png image007.png

Good morning from SWInfo, 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 fax: 603.271.2456

*E-mail: nelson.e.ordway@des.nh.gov



Think Green!

This e-mail and any files transmitted with it may be confidential and are intended solely for the use of the individual or entity to whom they are addressed. This communication may contain material protected by law or regulation. If you are not the intended recipient or the person responsible for delivering the e-mail for the intended recipient, be advised that if you have received this e-mail in error that any use, dissemination, forwarding, printing, or copying of this e-mail is strictly prohibited. If you believe that you have received this e-mail in error, please notify me at the Department of Environmental Services at 603.271.2925.

NHDES would greatly appreciate your feedback and wants to hear from you. Please take a moment to fill out our short (5-question) <u>NHDES Customer Service Satisfaction Survey.</u>



Website: <u>des.nh.gov</u> <u>Subscribe to our e-news!</u>











From: Lindsey Menard < lindsey.menard@casella.com>

Sent: Wednesday, November 6, 2024 5:02 PM

To: DES: SolidWasteInfo < SolidWasteInfo@des.nh.gov>

Cc: Kimberly Crosby <Kimberly.Crosby@casella.com>; Bruce Grover <bruce.grover@casella.com>;

Melissa Stevens < melissa.stevens@casella.com>

Subject: NCES Incident Report 11.6.24

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

Lindsey Menard

Environmental Engineer Casella Waste Systems, Inc.

1855 VT Route 100, Hyde Park, VT 05655 p. 802.851.6606 | c. 802.585.0551

CONFIDENTIALITY NOTICE The information contained in this communication is confidential, may constitute inside information, may be attorney-client privileged and is intended only for the use of the named recipient. If the reader of this e-mail message is not the intended recipient, or the employee or agent responsible for delivery of the message to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is prohibited. If you have received this e-mail in error, please notify the sender immediately by telephone at +1 802-851-6606.



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 / | 2. Date of Report Submission to | 3. Name of Person Preparing | | | | |
| Situation: | NHDES: | Report: | | | | |
| 11/6/24 | 11/6/24 | Lindsey Menard | | | | |
| 4. Facility Name: | 5a. Affected Area Within Facility | 5b. Physical Address, Town / City: | | | | |
| North Country Environmental | North Country Environmental | 581 Trudeau Road, Bethlehem, NH | | | | |
| Services | Services | 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 | NCES | | | | | |
| b. | Kim Crosby | Director of Compliance | NCES | | | | | |
| c. | | | | | | | | |
| 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 Pump Station #3.

On Wednesday November 6, 2024 at approximately 10:40a.m. until 10:55 a.m., Pump Station #3 was shut off due to routine sampling. During this time period, the Pump Station #3 Primary sump level reached 52.167 inches.

The pump was promptly turned back on when staff became aware of the issue. Sump levels returned to compliance at 11:05 a.m. on Wednesday November 6.

Kim Crosby, Director of Compliance at Casella, made the required verbal notification to Jaime Colby at NHDES at 11:08 a.m. A voicemail message explaining the incident was provided.

| 11. Measures employed to co | ntain release | es caused by t | the incident or situat | ion: | | |
|--|---|----------------------------|------------------------------|-------------------------------|--|--|
| No release caused by this incid | | s causea by | | | | |
| 12. Assessment of actual or p | otential haza | rds to the en | vironment. safety an | d human health related to the | | |
| incident: | | | | | | |
| Actual or potential hazards to the environment, safety, and human health related to the incident were assessed and determined to be absent. Our assessment indicates that the primary sump level in Pump House 3 exceeded compliance limits for less than a 1/2 hour during routine sampling. The primary leachate systems are functioning properly, and the secondary liner system is doing its job, in that there has been no release of leachate outside the lined area of the landfill, and leachate is being managed in a manner that is fully protective of groundwater and the environment. | | | | | | |
| 13. Measures the permittee hincident or situation: | 13. Measures the permittee has or intends to apply to reduce, eliminate, and prevent a recurrence of the incident or situation: | | | | | |
| The pump was turned back on as soon as staff were notified of the issue. The sump level is back in compliance. Going forward, NCES personnel will be more diligent about monitoring the sump levels when pumps need to be shut off for routine sampling operations. | | | | | | |
| 14. If measures not completed by time of report submission, expected date of completion: | | | | Measures are complete. | | |
| | | | | | | |
| 45 - Daman David D | | Section IV | Signatures | | | |
| 15a. Person Preparing Report Name: | : Title / Af | filiation | | Signature: | | |
| Lindsey Menard | • | ental Analyst | | | | |
| Phone Number: | | Email | Address: | | | |
| 802-585-0551 | | lindsey.menard@casella.com | | | | |
| | | | | | | |
| 15b. Permittee: | | | | | | |
| Name: | Title / Affiliation: | | | Signature: | | |

| 15b. Permittee: | | | | | | |
|-----------------|----------------------|-------|-----------------------------|--|--|--|
| Name: | Title / Affiliation: | | Signature: | | | |
| Director of | | or of | Kim Crosby | | | |
| Kim Crosby | Environmental | | | | | |
| | Compliance | | | | | |
| Phone Number: | | | Email Address: | | | |
| 802-224-0105 | | | kimberly.crosby@casella.com | | | |

Form Submittal Instructions:

Submit the completed report in PDF via email to SolidWasteInfo@des.nh.gov.