



**Municipal Waste Landfill and Resource Recovery
 Quarterly Operations and Recycling Fee Report**

Report generated On : 10/10/2023 08:40:39AM

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A. General Information

1. Permit No. : 400592
2. Quarter : July-September
3. Year : 2023
4. Facility Information Change Indicator : No
5. Facility Name : LCSWMA RESOURCE FACILITY
6. Facility Mailing Address : 1299 Harrisburg Pike, , Lancaster, PA 17603
7. Host Municipality :
8. County : LANCASTER
9. Facility Contact Name : Aaron Cutarelli
10. Phone No. : 717-874-4435

B. Recycling Fee Computation (check payable to Recycling Fund) Express all weights in tons rounded to the nearest ONE-TENTH ton, (1, 3 Cu. Yd. = 1 Ton, 1 Ton = 2,000 pounds.

Line No.	Month	Municipal Waste Weight (tons)	Residual Waste Weight (tons)	Sludge Weight (tons)	Sewage Infectious Weight (tons)	Processed Construction Weight (tons)	Demolition Weight (tons)	Ash Weight (tons)	ASBESTOS Weight (tons)	Total Weight (tons)	
1	July	23,740.0	7,117.4	0.0	0.0		32.4	0.0	0.0	30,889.8	
2	August	24,395.1	7,399.0	0.0	0.0		45.6	0.0	0.0	31,839.7	
3	September	19,641.5	7,164.9	0.0	0.0		16.1	0.0	0.0	26,822.5	
4	Total	67,776.6	21,681.3	0.0	0.0		94.1	0.0	0.0	89,552.0	
5	Nonprocessable Waste (Resource Recovery Facilities); Process Residue or ADC (Landfills) (Tons)										65.2
6	Net Waste (Tons)										89,486.8
7	Fee Calculation @\$2.00/Ton (\$2.00* Line 6)										178,973.60
8	Discount for Timely Payment (1.00% Discount if paid before the Due Date) (0.01 * Line 7)										1,789.74
9	Penalty for Late payment (5.00% Penalty for each month or part of month late) (0.05 * line 7 * Mos.)										0.00
10	Credit from Previous Overpayment (attach documentation to paper submission)										0.00
11	Net Fee Due (Payment MUST be enclosed with report to avoid penalty for late payment.)										177,183.86

C. Environmental Stewardship Fee Computation (landfills only; check payable to Environmental Stewardship Fund)

N/A Tons (from Line 4 TOTAL) * \$ 0.25/ton = \$ N/A due.

D. Disposal Fee Computation (landfills only; check payable to Environmental Stewardship Fund)

N/A Tons (from Line 4 TOTAL) , minus N/A Tons ash and nonprocessable waste from RRF used as ADC, minus N/A Tons hazardous waste converted to nonhazardous * \$4.00/ton = \$ N/A due.

E. Certification

This is to certify that I have personally examined and am familiar with the information in this and any attached documents. To the best of my knowledge, information and belief, the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information.

Daniel G. Youngs
 Name of Authorized Representative (Print)

Signature of Authorized Representative

10/16/23
 Date (mm/dd/yy)



**Municipal Waste Landfill and Resource Recovery
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A. General Information

1. Permit No. : 400592
2. Month : July
3. Year : 2023
4. Page : 3
5. Number of Days of Operation : 22

B. Monthly Operations Report

Complete at least one worksheet for each month in quarter. Complete one line for each county within Pennsylvania from which you received waste and one line for each state from which you received waste. Continue on additional sheets as necessary. All weights must be expressed in tons rounded to the nearest tenth (0.1), 3 Cu. Yd. = 1 Ton, 1 Ton = 2,000 Pounds.

Line No.	PA County Code or State Abbrev. If Out of State	Municipal Waste Weight (tons)	Residual Waste Weight (tons)	Sewage Sludge Weight (tons)	Processed Infectious Weight (tons)	Demolition/Construction Weight (tons)	Ash Weight (tons)	Asbestos Weight (tons)	Total Weight (tons)
1	67	0.0	56.0	0.0	0.0	0.0	0.0	0.0	56.0
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13	Monthly Total	23,740.0	7,117.4	0.0	0.0	32.4	0.0	0.0	30,889.8



**Municipal Waste Landfill and Resource Recovery
 Quarterly Operations and Recycling Fee Report**

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A. General Information

- 1. Permit No. : 400592
- 2. Month : August
- 3. Year : 2023
- 4. Page : 6
- 5. Number of Days of Operation : 24

B. Monthly Operations Report

Complete at least one worksheet for each month in quarter. Complete one line for each county within Pennsylvania from which you received waste and one line for each state from which you received waste. Continue on additional sheets as necessary. All weights must be expressed in tons rounded to the nearest tenth (0.1), 3 Cu. Yd. = 1 Ton, 1 Ton = 2,000 Pounds.

Line No.	PA County Code or State Abbrev. If Out of State	Municipal Waste Weight (tons)	Residual Waste Weight (tons)	Sewage Sludge Weight (tons)	Processed Infectious Weight (tons)	Demolition/Construction Weight (tons)	Ash Weight (tons)	Asbestos Weight (tons)	Total Weight (tons)
1	61	0.0	5.2	0.0	0.0	0.0	0.0	0.0	5.2
2	65	0.0	16.7	0.0	0.0	0.0	0.0	0.0	16.7
3	66	0.0	630.2	0.0	0.0	0.0	0.0	0.0	630.2
4	67	0.0	26.3	0.0	0.0	0.0	0.0	0.0	26.3
5									
6									
7									
8									
9									
10									
11									
12									
13	Monthly Total	24,395.1	7,399.0	0.0	0.0	45.6	0.0	0.0	31,839.7



**Municipal Waste Landfill and Resource Recovery
 Quarterly Operations and Recycling Fee Report**

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A. General Information

1. Permit No. : 400592
2. Month : September
3. Year : 2023
4. Page : 9
5. Number of Days of Operation : 21

B. Monthly Operations Report

Complete at least one worksheet for each month in quarter. Complete one line for each county within Pennsylvania from which you received waste and one line for each state from which you received waste. Continue on additional sheets as necessary. All weights must be expressed in tons rounded to the nearest tenth (0.1), 3 Cu. Yd. = 1 Ton, 1 Ton = 2,000 Pounds.

Line No.	PA County Code or State Abbrev. If Out of State	Municipal Waste Weight (tons)	Residual Waste Weight (tons)	Sewage Sludge Weight (tons)	Processed Infectious Weight (tons)	Demolition/Construction Weight (tons)	Ash Weight (tons)	Asbestos Weight (tons)	Total Weight (tons)
1	67	0.0	8.9	0.0	0.0	0.0	0.0	0.0	8.9
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13	Monthly Total	19,641.5	7,164.9	0.0	0.0	16.1	0.0	0.0	26,822.5



Act 101, The Municipal Waste Planning, Recycling, and Waste Reduction Act

QUARTERLY HOST MUNICIPALITY BENEFIT FEE REPORT

A. General Information

1. Permit No.

4	0	0	5	9	2
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2. January-March April-June July-September October-December

2	0	2	3
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Year

3. Facility Name Lancaster County Solid Waste Management Authority

4. Facility Address Resource Recovery Facility
Route #441 – South Side
Marietta, PA 17547

5. Location Conoy Township Borough City
(Name of Municipality)

6. County Lancaster

7. Contact Name Daniel Youngs

8. Contact Title CFO 9. Contact Phone No. 717-735-0164

10. Operator Name Lancaster County Solid Waste Management Authority

11. Operator Address 1299 Harrisburg Pike
Lancaster, PA 17603

B. Fee Computation

All weights must be expressed in tons rounded to the nearest 1/10 ton. 3 Cu. Yd. = 1 Ton, 1 Ton = 2,000 Pounds

Line No.	Month	Municipal Waste	Residual Waste	Sewage Sludge	Processed Infectious	Demolition/ Construction	Ash	Asbestos	TOTAL
1	July	23740.0	7117.4	0.0	0.0	32.4	0.0	0.0	30889.8
2	August	24395.1	7399.0	0.0	0.0	45.6	0.0	0.0	31839.7
3	September	19641.5	7164.9	0.0	0.0	16.1	0.0	0.0	26822.5
4	Total Waste	67776.6	21681.3	0.0	0.0	94.1	0.0	0.0	89552.0
5	Fee Calculation @ \$1.98 Ton Per Host Community Agreement								\$177,312.96
6	Preexisting Agreement Credit								\$177,311.59
7	Net Fee (Small Variance Due to Rounding)								\$-1.37
8	Discount for Timely Payment (1% Discount if paid before the Due Date) (0.01 x Line 7)							\$	
9	Penalty for Late Payment (5% Penalty for each month or part of month late) (0.05 x Line 7 x Mos.)							\$	
10	Net Fee Due (Payment MUST be enclosed with report to avoid penalty for late payment.)								\$

C. Certification

This is to certify that I have personally examined and am familiar with the information in this and any attached documents. I am aware of the Department of Environmental Protection's requirements for this report. To the best of my knowledge, information and belief, the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information.

Daniel Youngs
Name of Operator / Contact

Signature of Operator / Contact

1	0	1	6	2	3
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Date (mm/dd/yy)