

I. General Information Form

Facility Information	Permit/Registration # 122
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County: <u>Bernalillo</u>	Check One: <input checked="" type="checkbox"/> Open Facility	Phone <u>505-269-6131</u>	<input type="checkbox"/> Closed Facility
Facility Name <u>University of New Mexico</u>	E-mail Address <u>lindamcc@unm.edu</u>		
Contact Person <u>Linda McCormick</u>	Street Address <u>1 University of New Mexico, MSC07-4100</u>		
City: <u>Albuquerque</u>	State <u>NM</u>	87131	
Physical Location of Facility (City/County Road) <u>1642 University Blvd. NE, Albuquerque, NM 87131</u>			

Facility Operator <u>UNM Recycling Department</u>	Phone <u>505-277-1681</u>		
Contact Person <u>Linda McCormick</u>	E-mail Address <u>lindamcc@unm.edu</u>		
Street Address <u>1 University of New Mexico, MSC07-4100</u>			
City <u>Albuquerque</u>	State <u>NM</u>	87131	

Facility Owner <u>University of New Mexico</u>	Phone <u>505-277-4620</u>		
Contact Person <u>Kim Murphy</u>	E-mail Address <u>kmurphy@unm.edu</u>		
Street Address <u>1 University of New Mexico, MSC05-3430</u>			
City <u>Albuquerque</u>	State <u>NM</u>	87131	

Land Owner _____	Phone _____		
Contact Person _____	E-mail Address _____		
Street Address _____			
City _____	State _____		

Financial Assurance		Questions? Call 505-827-0197, 505-827-2775 or 505-476-3561
<input checked="" type="checkbox"/>	Check One Box	
<input type="checkbox"/>	Updated Financial Assurance Attached	
<input type="checkbox"/>	Financial Assurance required but not Attached (Explain on Comment Sheet)	
<input checked="" type="checkbox"/>	Financial Assurance not required (Explain on Comment Sheet)	

Landfills Only

Check One: Open Landfill Closed Landfill

Capacity Information for Open Landfills <i>(If not provided explain on Comment Sheet)</i>	
Provide Landfill Capacity Used during 2006 _____	(Cubic Yards)
Provide Remaining Landfill Capacity _____	(Cubic Yards) (See <u>V. Capacity Worksheet.</u>)
Provide Remaining Landfill Life _____	(Years) (See <u>V. Capacity Worksheet.</u>)

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Number of acres at current site, not permitted, that could be used for disposal in the future _____	
Were there any changes in operations that reduced the active life of the landfill by 25% or more? <input type="checkbox"/> No <input type="checkbox"/> Yes (Attach Notification)	
Monitoring Results for Open Landfills (and Closed Landfill in Post-Closure Care)	
<input type="checkbox"/> No <input type="checkbox"/> Yes	Summary of Landfill Gas Monitoring Results Enclosed (if not explain on Comment Sheet)
<input type="checkbox"/> No <input type="checkbox"/> Yes	Summary of Landfill Ground Water Monitoring Results Enclosed (if not explain on Comment Sheet)
<input type="checkbox"/> No <input type="checkbox"/> Yes	Summary of Leachate Generated & Treated or Disposed Enclosed (if not explain on Comment Sheet)
Closure and Post-Closure Activity	
Total Acreage Used for Disposal (as of 12/31/06) _____	Date of Closure _____ (Acres)
Intermediate Cover _____ (Acres)	Area Seeded _____ (Acres)
Total Acreage with Final Cover Installed (per Closure Plan) _____	_____ (Acres)