



April 19, 2024

Mr. Mike Sullivan, CPM
Iowa Department of Natural Resources
502 East 9th Street Des Moines, IA 50309

RE: Correction to Financial Assurance Update
Metro Waste Authority, Metro Park East Landfill
Permit No. 77-SDP-01-72P

Dear Mr. Sullivan,

On behalf of Metro Waste Authority (MWA), HDR Engineering, Inc. (HDR) is submitting the attached corrected financial assurance report form, DNR Form 542-8090, for the Metro Park East Landfill. There were two errors including an error with the remaining permitted capacity indicated on Page 1 of DNR Form 542-8090 and an error in the projected deposit calculation on page 3 of the same form. The remaining permitted capacity on page 1 has been corrected and the projected deposit calculation has been corrected to the following:

Tonnage remaining: 25,828,649-tons

Projected deposit:

CE = (\$14,620,930 + \$5,566,500 + \$2,911,020 + \$269,170) = \$23,367,620

CB = (\$10,785,005 + \$7,348,370) = \$18,133,375

TR = 837,456-tons

RPC = 25,828,649-tons

(\$23,367,620 - \$18,133,375) x 837,456 Tons / 25,828,649 Tons = \$169,713

The projected deposit amount has been revised from \$160,985 to \$169,713. Attached please find the corrected form to replace the form originally submitted on March 22, 2024. Should the Department have any questions regarding this letter, please do not hesitate to contact me at (402) 392-6980.

Sincerely,

HDR Engineering, Inc.

Katie Kinley, P.E.

Project Manager

cc: Michael McCoy, Metro Waste Authority
Andrew Phillips, Metro Waste Authority
Brian Rath, P.E., IDNR
Chad Stobbe, IDNR
Becky Jolly, IDNR

hdrinc.com

1917 S 67th Street Omaha, NE 68106-2973
(402) 399-1000





Attachment 1

Redlined Form 542-8090





Municipal Solid Waste Sanitary Landfill Financial Assurance Report Form

SECTION 1: FACILITY INFORMATION

(please print or type)

Information Requested

Facility Name: METRO PARK EAST LANDFILL Permit Number: 77-SDP-01-72P

Permitted Agency/Entity: METRO WASTE AUTHORITY

SECTION 2: CLOSURE/POSTCLOSURE OR CORRECTIVE ACTION COST ESTIMATES

Information Requested	Cost Estimate	Date of Cost Estimate
Updated Closure Cost Estimate	\$ 14,620,930	3/8/2024
Updated Postclosure Cost Estimate	\$ 5,566,500 (Phase II)	3/8/2024
	\$ 2,911,020 (Phase I)	
Initial or Updated Corrective Action Cost Estimate	\$ 269,170	3/8/2024

*Attach closure/postclosure cost estimate(s) signed and certified by an Iowa-licensed professional engineer. Cost estimates shall include, at a minimum, each of the cost line items defined in 113.14(3)"c" for closure and 113.14(4)"c" for postclosure. Please provide closure and/or postclosure site area acreage information with the estimates.

Provide a cost estimate for corrective action only if corrective action is required and a corrective action plan has been approved by the Department. Attach the corrective action cost estimate signed and certified by an Iowa-licensed professional engineer. The cost estimate shall account for total costs of the activities described in the approved corrective action plan for the corrective action period.

SECTION 3: FACILITY WASTE TONNAGE INFORMATION

Information Requested	Tons
Remaining permitted capacity as of the beginning of permit holder's current fiscal year	25,367,492 25,828,649
Amount of waste disposed of at the facility during the prior year	837,456

SECTION 4: PROOF OF COMPLIANCE

Publicly Owned Municipal Solid Waste Landfills *(ATTACH AUDIT REPORT)*

Owner's Most Recent Annual Audit Report

Prepared by: DENMAN & COMPANY, LLP

For fiscal year ending: JUNE 30, 2023

Privately Owned Municipal Solid Waste Landfills *(ATTACH AFFIDAVIT)*

Attach owner/operator's affidavit indicating that an annual review has been performed by a certified public accountant to determine whether the privately owned landfill is in compliance with IAC 567 Chapter 113. The affidavit shall state the name of the certified public accountant, the dates and conclusions of the review, and the steps taken to rectify any deficiencies identified by the accountant.

SECTION 5: FINANCIAL ASSURANCE INSTRUMENT

Type and Value of Financial Assurance Instrument(s) (ATTACH INSTRUMENT(S))

Assurance Instrument	Establishment Date	Mechanism Covers	Instrument Value*
Trust Fund 567 IAC 113.14(6)“a”		Closure <input type="checkbox"/> Postclosure <input type="checkbox"/> Corrective Action <input type="checkbox"/>	\$
Surety Bond 567 IAC 113.14(6)“b”		Closure <input type="checkbox"/> Postclosure <input type="checkbox"/> Corrective Action <input type="checkbox"/>	\$
Letter of Credit 567 IAC 113.14(6)“c”		Closure <input type="checkbox"/> Postclosure <input type="checkbox"/> Corrective Action <input type="checkbox"/>	\$
Insurance 567 IAC 113.14(6)“d”		Closure <input type="checkbox"/> Postclosure <input type="checkbox"/> Corrective Action <input type="checkbox"/>	\$
Corporate Financial Test 567 IAC 113.14(6)“e”		Closure <input type="checkbox"/> Postclosure <input type="checkbox"/> Corrective Action <input type="checkbox"/>	\$
Local Gov’t. Financial Test 567 IAC 113.14(6)“f”	OCTOBER 4, 2004	Closure <input checked="" type="checkbox"/> Postclosure <input checked="" type="checkbox"/> Corrective Action <input checked="" type="checkbox"/>	\$ 5,234,245
Corporate Guarantee 567 IAC 113.14(6)“g”		Closure <input type="checkbox"/> Postclosure <input type="checkbox"/> Corrective Action <input type="checkbox"/>	\$
Local Gov’t Guarantee 567 IAC 113.14(6)“h”		Closure <input type="checkbox"/> Postclosure <input type="checkbox"/> Corrective Action <input type="checkbox"/>	\$
Local Gov’t. Dedicated Fund 567 IAC 113.14(6)“i”	JULY 2000	Closure <input checked="" type="checkbox"/> Postclosure <input checked="" type="checkbox"/> Corrective Action <input type="checkbox"/>	\$ 18,133,375

*Pursuant to IAC 567 113.14(9), if account(s) are restricted/reserved to pay for closure, postclosure or corrective action costs, then the amount of the financial assurance instrument may be reduced by the sum of the cash balance of the account(s) established to comply with subrule 113.14(8).

SECTION 6: INITIAL PROOF OF ESTABLISHMENT OF ACCOUNTS

Check Which Applies: New Mechanism Previously Submitted

Pursuant to IAC 567 Chapter 113.14(8)“f”, documentation of the establishment of accounts is to be submitted to the department by April 1, 2003 for currently permitted MSWLFs. Permit holders for MSWLFs permitted after April 1, 2003, shall submit documentation of the establishment of accounts prior to the MSWLF’s initial receipt of waste.

Please attach documentation indicating accounts/fund have been established for closure and postclosure care and if the account(s) are restricted/reserved for closure or postclosure care. Examples of documentation include bank statements for closure/postclosure accounts, letter signed by the chief financial officer, letter from certified public accountant, etc.

Accounts established pursuant to paragraph 113.14(6)"a" for trust funds or paragraph 113.14(6)"i" for local government dedicated funds also satisfies the requirements of this subrule, and the permit holder shall not be required to establish additional closure and postclosure accounts.

SECTION 7: CLOSURE AND POSTCLOSURE ACCOUNTS

Completion of the following closure and postclosure account information complies with the annual financial statement requirements of IAC 567 113.14(3)"a" and 113.14(4)"a" by indicating the current balance(s) of the closure/postclosure account(s) or dedicated/trust fund and the projected amount(s) to be deposited in the account(s).

Under "Beginning Balance", please state the account/fund balance 30 days after the start of the previous fiscal year, for "Ending Balance", indicate the account balance 30 days after the close of the previous fiscal year, and for "Projected Deposit", indicate the amount to be deposited within 30 days of the close of the permit holder's fiscal year.

Information Requested	Beginning Balance	Ending Balance	Projected Deposit
Closure Account Balance <i>(see formula below)</i>	\$ 9,419,364	\$ 10,785,005	\$ 160,985 \$169,713
Postclosure Account Balance <i>(see formula below)</i>	\$ 7,544,550	\$ 7,348,370	\$
Or			
Dedicated Fund Balance <i>(see formula below)</i>	\$	\$	\$
Trust Fund Balance <i>(see formula below)</i>	\$	\$	\$

Formula for Projected Deposits

Closure or Postclosure Account

$$\frac{CE - CB}{RPC} \times TR$$

Where "CE" is the closure or postclosure cost estimate, "CB" is the balance 30 days after close of the previous fiscal year, "RPC" is the remaining permitted capacity in tons, of the landfill from the beginning of the current fiscal year, and "TR" is the total number of tons of solid waste disposed in the prior year.

Dedicated/Trust Fund

$$\frac{CE - CB}{Y}$$

Where "CE" is the closure or postclosure cost estimate, "CB" is the balance 30 days after close of the previous fiscal year, and "Y" is number of years remaining in the pay-in period.

If needed, the space below can be used to show calculations for projected deposits

<p>Closure</p> <p>CE = (\$14,620,930 + \$5,566,500 + \$2,911,020) = \$23,098,450</p> <p>CB = (\$10,785,005 + \$7,348,370) = \$18,133,375</p> <p>TR = 837,456 TONS</p> <p>RPC: 25,828,649 TONS</p> <p>(\$23,098,450 - \$18,133,375) x 837,456 TONS / 25,828,649 TONS = \$ 160,985</p>	<p>Postclosure</p> <p>INCLUDED IN CLOSURE CALCULATIONS</p> <p>Closure</p> <p>CE = (\$14,620,930 + \$5,566,500 + \$2,911,020 + \$269,170) = \$23,367,620</p> <p>CB = (\$10,785,005 + \$7,348,370) = \$18,133,375</p> <p>TR = 837,456-tons</p> <p>RPC = 25,828,649-tons</p> <p>(\$23,367,620 - \$18,133,375) x 837,456 Tons / 25,828,649 Tons = \$169,713</p>
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SECTION 8: PERMIT HOLDER ENDORSEMENT

Submittal of this completed and endorsed form along with all required documentation establishes Notification and Proof of Permit Holder Compliance with IAC 567 Chapter 113.

Name of Official: MICHAEL MCCOY Title: EXECUTIVE DIRECTOR

Agency/Entity: METRO WASTE AUTHORITY

Address: 300 EAST LOCUST, SUITE 100

City: DES MOINES State: IOWA Zip: 50309

Telephone: 515-323-6535 Fax: 515-244-9477

Email Address: mmc@mwatoday.com

Signature of Official:  Date: 3/18/2024

Questions? Contact Bill Blum at (515) 240-6048 or Bill.Blum@dnr.iowa.gov



Attachment 2

Revised Form 542-8090





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Name of Official: MICHAEL MCCOY Title: EXECUTIVE DIRECTOR


Agency/Entity: METRO WASTE AUTHORITY

Address: 300 EAST LOCUST, SUITE 100

City: DES MOINES State: IOWA Zip: 50309

Telephone: 515-323-6535 Fax: 515-244-9477

Email Address: mmc@mwatoday.com

Signature of Official:  Date: 18 April 2024

Questions? Contact Bill Blum at (515) 240-6048 or Bill.Blum@dnr.iowa.gov