

March 20, 2025

Mary Klemesrud  
Program Planner  
Iowa Department of Natural Resources  
6200 Park Avenue Suite 200  
Des Moines, Iowa 50321



**RE: 2025 FINANCIAL ASSURANCE  
IOWA COUNTY SANITARY LANDFILL  
IDNR PERMIT #48-SDP-02-79P  
HLW PN 6005-24A.360**

Dear Ms Klemesrud:

Included with this letter is financial assurance documentation for 2025 for the Iowa County Sanitary Landfill. Documentation provided with this letter includes a certified copy of the Closure/Postclosure Cost Estimate and the signed "Municipal Solid Waste Sanitary Landfill Financial Assurance Report Form".

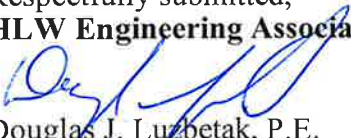
The remaining landfill capacity has been updated due to the completion of the Phase B-1 Expansion project in 2024.

The audit for the Regional Environmental Improvement Commission has been filed with the State Auditor and is available on the State Auditor's website.

Note that cost estimates have been calculated using actual costs; therefore, adjustments for inflation were determined not to be applicable to the 2025 Closure/Postclosure Cost Estimate.

Please let me know if you have any questions.

Respectfully submitted,  
**HLW Engineering Associates, Inc.**

  
Douglas J. Luzbetak, P.E.  
Project Manager

cc: David Randall, Environmental Director, REIC (electronic copy)  
Adam Rabe, Treasurer, REIC (electronic copy)

**Authority**

The following calculations are based on rules published in 567 IAC Chapter 113.14, "Municipal solid waste landfill financial assurance". This analysis is based on assuming a worst case scenario regarding closure of the landfill and assuming all work associated with closure/postclosure is performed by a third party (i.e., not by landfill staff), as per Regulations.

**Note that costs are based on actual costs and therefore adjustments for inflation were determined not to be applicable in this closure/postclosure cost estimate.**

**Landfill Areas**

The Iowa County SLF is divided into two primary areas:

|                                |            |
|--------------------------------|------------|
| Vertical Expansion Area (VE)   | 18.6 acres |
| Horizontal Expansion Area (HE) |            |
| Phases A-1 and A-2             | 6.4 acres  |
| Phases A-3 and A-4             | 5.7 acres  |
| Phase B-1                      | 4.2 acres  |

**Note Phase A-1 and a portion of Phase A-2 (total area of approximately 4.2 acres) were closed in 2021.**

Closure of the Vertical Expansion Area in accordance with the approved Closure/Postclosure Plan (CPCP) was completed in 2008.

**Closure Cost Estimate**

Phases A-1 and A-2 have been constructed with EPA Subtitle D compliant alternative liners. The remainder of Phase A-2 will be closed with a 4 foot soil cap with a geonet drainage layer as per the CPCP. Phases A-3 and A-4 have been constructed with EPA Subtitle D composite liners. Phases A-3 and A-4 will be closed with a composite cap as per the CPCP.

***Closure Costs - Soil Cap***

Closure costs for the Subtitle D compliant Alternative Lined Phase A-2 (2.2 acres remaining to be closed) include constructing the compacted clay infiltration layer, geonet drainage layer, erosion layer, any erosion control structures, and seeding. Estimated quantities and prices for the closure of the alternative lined areas are:

|                            |                        |                         |                  |
|----------------------------|------------------------|-------------------------|------------------|
| Infiltration Layer         | 7,100 yd <sup>3</sup>  | \$4.00 /yd <sup>3</sup> | \$28,400         |
| Geonet Drainage Layer      | 10,600 yd <sup>2</sup> | \$6.30 /yd <sup>2</sup> | \$66,800         |
| Erosion Layer              | 7,100 yd <sup>3</sup>  | \$3.50 /yd <sup>3</sup> | \$24,900         |
| Seeding and Mulching       | 2.2 acre               | \$2,500 /acre           | \$5,500          |
| Erosion Control Structures | 2.2 acre               | \$1,000 /acre           | \$2,200          |
|                            |                        | Construction Cost       | <u>\$127,800</u> |

**Closure Costs - Composite Cap**

Closure costs for the Subtitle D compliant Composite Lined Phases A-3, A-4, and B-1 (9.9 acres) include constructing the composite FML cap, erosion control structures, and seeding. Estimated quantities and prices for the closure of the composite lined areas are:

|   |           |                   |                    |
|---|-----------|-------------------|--------------------|
| Composite Cap   | 9.9 acres | \$134,700 /acre   | \$1,333,500        |
| (for derivation of cost, see Attachment A)                      |           |                   |                    |
| Seeding and Mulching  | 9.9 acres | \$2,500 /acre     | \$24,800           |
| Erosion Control Structures                                      | 9.9 acres | \$1,000 /acre     | \$9,900            |
|   |           | Construction Cost | <u>\$1,368,200</u> |
| Total Construction Cost - Alternative and Composite Cap         |           |                   | <u>\$1,496,000</u> |
| Add 10% based on construction cost for mobilization/contingency |           |                   | \$149,600          |
| Engineering fees for design, bid process, and administration    |           |                   | \$59,800           |
| Engineering fees for staking, inspection, and testing           |           |                   | <u>\$74,800</u>    |
| Total Closure Cost  |           |                   | <u>\$1,780,200</u> |

**Postclosure Cost Estimate**

Postclosure costs include any costs anticipated during the 30-year postclosure period, based upon current landfill operations and current IDNR regulations. All of the waste deposition areas previously mentioned will require postclosure care and are included in this analysis. The area needing postclosure care in the Vertical Expansion Area is approximately 18.6 acres. The area needing postclosure care in the Horizontal Expansion Area is approximately 16.3 acres. Total area is 34.9 acres. The soil cap, FML cap, erosion control structures, vegetation, etc. must be maintained during the postclosure period. Costs associated with this maintenance are:

|                                 |            |               |                |
|---------------------------------|------------|---------------|----------------|
| Maintenance/Repair Soil Cap     | 25.0 acres | \$50 /acre    | \$1,250        |
| Maintenance/Repair FML Cap      | 9.9 acres  | \$100 /acre   | \$990          |
| Reseeding (2% of area annually) | 0.7 acres  | \$1,200 /acre | \$600          |
| Maintenance of Erosion Control  | 34.9 acres | \$50 /acre    | \$1,700        |
| Mowing                          |            |               | <u>\$1,000</u> |
|                                 |            |               | <u>\$5,500</u> |

Based on the ratio of the Vertical Expansion Area to the Horizontal Expansion Area, and the difference in cap repair costs for soil vs. FML caps, attribute these costs as follows:

|    |                |
|----|----------------|
| VE | <u>\$2,800</u> |
| HE | <u>\$2,700</u> |

Reporting, monitoring well sampling, and monitoring well testing will be continued throughout the postclosure period. Assume these will be similar to the requirements under current regulations. Costs associated with reporting, monitoring well sampling, and monitoring well testing are:

An Annual Water Quality Report and Semi Annual Water Quality Notification are required

|   |    |                |
|---|----|----------------|
| Semi-Annual and Annual Reporting - (combined) |    | <u>\$4,800</u> |
|   | VE | <u>\$2,400</u> |
|   | HE | <u>\$2,400</u> |

Explosive gas monitoring is required quarterly.

|                |            |            |                |
|----------------|------------|------------|----------------|
| Gas monitoring | \$500 each | 4 per year | \$2,000        |
|                |            | VE         | <u>\$1,000</u> |
|                |            | HE         | <u>\$1,000</u> |

Monitoring Well Sampling and Testing

Assume monitoring well sampling will be as per the SDP Permit and applicable Permit amendments. The monitoring well system is approximately split between the Vertical Expansion Area and the Horizontal Expansion Area. Estimated testing costs are as follows:

|          |           |             |         |
|----------|-----------|-------------|---------|
| June     | 22 tests* | \$300 /test | \$6,600 |
| December | 22 tests* | \$300 /test | \$6,600 |

\* Includes Corrective Action monitoring points

Sampling costs are:

|          |                |                |
|----------|----------------|----------------|
| June     | \$2,600        |                |
| December | <u>\$2,600</u> |                |
|          | \$18,400       |                |
|          | VE             | <u>\$9,200</u> |
|          | HE             | <u>\$9,200</u> |

Postclosure costs and an Audit must be completed annually as a basis for Financial Assurance.

|                                   |                |                |
|-----------------------------------|----------------|----------------|
| Financial Assurance documentation | <u>\$3,000</u> |                |
|                                   | VE             | <u>\$1,500</u> |
|                                   | HE             | <u>\$1,500</u> |

Leachate was previously collected by three methods: leachate extraction wells in the Vertical Expansion Area, leachate collection pipes in the Vertical Expansion Area, and leachate collection pipes in the Horizontal Expansion Area. Note on July 25, 2022, IDNR approved conditionally stopping leachate collection using the Extraction Wells. Leachate is conveyed to the on-site leachate treatment aerated lagoon system for treatment/disposal. If the extraction well system is turned back on costs will be adjusted - typical estimated leachate system costs are as follows:

Electricity cost to run aerators, pump station, and breakpoint chlorination: \$3,800  
 system

Leachate from the lagoon system must be sampled and tested as per the NPDES permit. Assume leachate sampling and testing costs for the lagoon system are approximately \$4,800 in a typical year.

Testing/Sampling \$4,800

Anticipated costs for maintaining the leachate system during the postclosure period include repairs for the lagoon liners, maintenance and supplies for the breakpoint chlorination system, and maintenance on the aerators and pump station.

Annual maintenance (\$450/month \* 12 months) \$5,400

Total yearly cost of leachate system:

|                  |                        |
|------------------|------------------------|
| Electricity      | \$3,800                |
| Testing/sampling | \$4,800                |
| Maintenance      | <u>\$5,400</u>         |
|                  | <u><u>\$14,000</u></u> |

Assume that the amount of leachate generated (and therefore associated costs) at the site is reduced by 60% during the postclosure period. The Vertical Expansion Area was constructed without a base liner; however, tiles and three extraction wells (since turned off) have been installed in the Vertical Expansion Area to collect leachate. Construction in the Horizontal Expansion Area consists of an EPA Subtitle D compliant liner system with drainage layer and leachate collection piping installed on the landfill base. Assume that 50% of the leachate generated (and 50% of the cost) during postclosure comes from the Vertical Expansion Area and 50% of the leachate generated (and 50% of the cost) comes from the Horizontal Expansion Area.

Adjusted yearly cost of leachate system:

|                           |                       |
|---------------------------|-----------------------|
| Vertical Expansion Area   | <u>\$2,800</u>        |
| Horizontal Expansion Area | <u><u>\$2,800</u></u> |

As per IDNR regulations, the leachate collection system is to be cleaned once every three years. Estimated cost of cleaning leachate collection system is \$4,200 every three years. This cost is associated with the Horizontal Expansion Area only.

|         |                           |                       |
|---------|---------------------------|-----------------------|
| \$4,200 | Annual Equivalent Cost is | <u><u>\$1,400</u></u> |
|---------|---------------------------|-----------------------|

**Financial Assurance Calculations**

**Closure**

**TOTAL** \$1,780,200

**Postclosure -Vertical Expansion Area (annual)**

|  |                 |
|--|-----------------|
| Maintenance of cap, erosion control, etc.      | \$2,800         |
| Annual and Semi-Annual Water Quality Reporting | \$2,400         |
| Explosive Gas Monitoring                       | \$1,000         |
| Monitoring Well Sampling and Testing           | \$9,200         |
| Financial Assurance Documentation              | \$1,500         |
| Leachate Treatment, Testing, etc.              | \$2,800         |
|  | <u>\$19,700</u> |

Construction of the soil cap on the Vertical Expansion Area was completed in 2008. Therefore, assume the 30 year postclosure period began in 2008. For 2025 calculations, use a remaining postclosure period of 13 years to calculate required postclosure costs and payment into the postclosure fund.

Estimated Postclosure Costs - Vertical Expansion Area

\$19,700 /year                      13 years                      \$ 256,100

**Postclosure -Horizontal Expansion Area (annual)**

|  |                 |
|--|-----------------|
| Maintenance of cap, erosion control, etc.      | \$2,700         |
| Annual and Semi-Annual Water Quality Reporting | \$2,400         |
| Explosive Gas Monitoring                       | \$1,000         |
| Monitoring Well Sampling and Testing           | \$9,200         |
| Financial Assurance Documentation              | \$1,500         |
| Leachate Treatment, Testing, etc.              | \$2,800         |
| Cleaning Collection System (annual cost)       | \$1,400         |
|  | <u>\$21,000</u> |

Estimated Postclosure Costs - Horizontal Expansion Area

\$21,000 /year                      30 years                      \$ 630,000



## ATTACHMENT A

OPINION OF PROBABLE COST  
 IOWA COUNTY SLF  
 FML COMPOSITE CAP, cost per acre  
 HLW PN 6005-24A.360  
 February 25, 2025

| <b>Item</b>                         | <b>Quantity</b> | <b>Unit</b> | <b>Unit Price</b> | <b>Amount</b> |
|-------------------------------------|-----------------|-------------|-------------------|---------------|
| Surface Preparation                 | 4,840           | Sq. Yd.     | \$0.50            | \$2,420.00    |
| Gas Collection Layer                | 1,400           | Tons        | \$15.00           | \$21,000.00   |
| 4" Perforated Gas Collection Piping | 600             | Lin. Ft.    | \$15.00           | \$9,000.00    |
| Gas Vents                           | 1               | Each        | \$3,500.00        | \$3,500.00    |
| Geotextile Separation Layer (3)     | 14,520          | Sq. Yd.     | \$1.50            | \$21,780.00   |
| Compacted Clay Cap (1.5' thick)     | 2,420           | Cu. Yd.     | \$4.00            | \$9,680.00    |
| Flexible Membrane Liner             | 4,840           | Sq. Yd.     | \$6.30            | \$30,492.00   |
| Drainage Layer/Biotic Barrier       | 1,700           | Tons        | \$15.00           | \$25,500.00   |
| Vegetative Layer (2' thick)         | 3,230           | Cu. Yd.     | \$3.50            | \$11,305.00   |
| Total Construction Cost             |                 |             |                   | \$134,677.00  |



initialed



## Municipal Solid Waste Sanitary Landfill Financial Assurance Report Form

### SECTION 1: FACILITY INFORMATION

(please print or type)

#### Information Requested

Facility Name: Iowa County Sanitary Landfill Permit Number: 48-SDP-02-79PPermitted Agency/Entity: Regional Environmental Improvement Commission

### SECTION 2: CLOSURE/POSTCLOSURE OR CORRECTIVE ACTION COST ESTIMATES

| Information Requested                              | Cost Estimate   | Date of Cost Estimate |
|--|---|-----------------------|
| Updated Closure Cost Estimate                      | \$0 (Vertical Expansion)<br>\$1,780,200 (Horiz. Exp.) | February 25, 2025     |
| Updated Postclosure Cost Estimate                  | \$256,100 (Vert. Exp.)<br>\$630,000 (Horiz. Exp.)     | February 25, 2025     |
| Initial or Updated Corrective Action Cost Estimate | Not Applicable  | Not Applicable        |

\*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 | 61,214* |
| Amount of waste disposed of at the facility during the prior year                       | 9,635   |

\*Airspace analysis updated due to completion of Phase B-1 in 2024

### SECTION 4: PROOF OF COMPLIANCE

#### Publicly Owned Municipal Solid Waste Landfills

(ATTACH AUDIT REPORT)

Owner's Most Recent Annual Audit Report

Prepared by: Roof, Gerdes, Erlbacher PLCFor fiscal year ending: June 30, 2024

#### 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<br>567 IAC 113.14(6)“a”                  | April 27, 1995     | Closure <input checked="" type="checkbox"/><br>Postclosure <input checked="" type="checkbox"/><br>Corrective Action <input checked="" type="checkbox"/> | \$ 1,948,859      |
| Surety Bond<br>567 IAC 113.14(6)“b”                 |                    | Closure <input type="checkbox"/><br>Postclosure <input type="checkbox"/><br>Corrective Action <input type="checkbox"/>                                  | \$                |
| Letter of Credit<br>567 IAC 113.14(6)“c”            |                    | Closure <input type="checkbox"/><br>Postclosure <input type="checkbox"/><br>Corrective Action <input type="checkbox"/>                                  | \$                |
| Insurance<br>567 IAC 113.14(6)“d”                   |                    | Closure <input type="checkbox"/><br>Postclosure <input type="checkbox"/><br>Corrective Action <input type="checkbox"/>                                  | \$                |
| Corporate Financial Test<br>567 IAC 113.14(6)“e”    |                    | Closure <input type="checkbox"/><br>Postclosure <input type="checkbox"/><br>Corrective Action <input type="checkbox"/>                                  | \$                |
| Local Gov’t. Financial Test<br>567 IAC 113.14(6)“f” |                    | Closure <input type="checkbox"/><br>Postclosure <input type="checkbox"/><br>Corrective Action <input type="checkbox"/>                                  | \$                |
| Corporate Guarantee<br>567 IAC 113.14(6)“g”         |                    | Closure <input type="checkbox"/><br>Postclosure <input type="checkbox"/><br>Corrective Action <input type="checkbox"/>                                  | \$                |
| Local Gov’t Guarantee<br>567 IAC 113.14(6)“h”       |                    | Closure <input type="checkbox"/><br>Postclosure <input type="checkbox"/><br>Corrective Action <input type="checkbox"/>                                  | \$                |
| Local Gov’t. Dedicated Fund<br>567 IAC 113.14(6)“i” |                    | Closure <input type="checkbox"/><br>Postclosure <input type="checkbox"/><br>Corrective Action <input type="checkbox"/>                                  | \$                |

\*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<br><i>(see formula below)</i>     | \$                | \$             | \$                |
| Postclosure Account Balance<br><i>(see formula below)</i> | \$                | \$             | \$                |
| <b>Or</b>   |                   |                |                   |
| Dedicated Fund Balance<br><i>(see formula below)</i>      |                   |                |                   |
| Trust Fund Balance<br><i>(see formula below)</i>          | \$ 1,836,153      | \$ 1,948,859   | \$ 112,100        |

**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

*Combine balance of dedicated fund and trust fund for these calculations*

VERTICAL EXPANSION:

CE = \$256,100

CB = \$256,100

Fund is fully funded for Vertical Expansion

HORIZONTAL EXPANSION AREA:

CE = \$2,410,200

CB = (\$1,948,859 - \$256,100) = \$1,692,759

Y = 6.4 YEARS (Phase B-1 approved for waste disposal in 2024 which reset 10 year pay in period; however, in this case Y calculated as: 61,214 tons capacity remaining divided by 9,635 tons of waste received during FY 24 = 6.4 years).

Projected Deposit

=( \$2,410,200 - \$1,692,759 ) / 6.4 years

= \$112,100

**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: John Gahring Title: Chair

Agency/Entity: Regional Environmental Improvement Commission

Address: 3369 Highway 6 Trail

City: Homestead State: IA Zip: 52236

Telephone: 319-828-4943 Fax: 319-828-4943

Email Address: reiclandfill@southslope.net

Signature of Official: *John L. Gahring* Date: March 19, 2025

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