



Klemesrud, Mary <mary.klemesrud@dnr.iowa.gov>

2025 Financial Assurance: Cherokee County Solid Waste Commission: Follow Up Questions

6 messages

Klemesrud, Mary <mary.klemesrud@dnr.iowa.gov>

Mon, Jul 14, 2025 at 4:37 PM

To: "jploughlinlaw@gmail.com" <jploughlinlaw@gmail.com>

Cc: "tbuelow@scsengineers.com" <tbuelow@scsengineers.com>

Good Afternoon Mr. Loughlin,

My name is Mary Klemesrud. I am the staff person at DNR responsible for Landfill Financial Assurance. I am currently reviewing Cherokee County Sanitary Landfill's 2025 Financial Assurance Report. I agree with the total projected deposit calculation of \$23,009 for the 2025 reporting year, but did have some questions/suggested revisions on two of the forms for your review.

Specifically, it is my understanding that Cherokee County Landfill is using a Local Government Guarantee to assure closure, post closure and corrective action costs beyond those funds in closure and post closure restricted accounts. The form for a Local Government Financial Test was submitted with the 2025 report and needs to be changed. I have attached a revised Local Government Guarantee Form for Cherokee County Landfill with the following suggested revisions:

On page 1 of the form, I revised the amount of the Local Government Guarantee. To calculate this cost, current closure and post closure cost estimates are subtracted from the closure and post closure account balances of the local government dedicated fund. The balances for these accounts are noted on page 23 of the Cherokee County Solid Waste Commission's audit. With this information,

- Closure costs are calculated as: Current closure cost estimate = \$2,864,313 minus closure account balance \$555,888 = \$2,308,425.
- Post Closure Costs are calculated as: Current post closure cost estimate = \$1,792,240 minus post closure account balance \$562,966 = \$1,229,274.
- Corrective Action Cost estimate = \$48,355. This amount is also included in the amount assured under the Local Government Guarantee
- The revised total costs to be assured under the Local Government Guarantee = \$3,586,054.

On page 3 of the form, the closure and post closure costs have been updated as calculated above.

I have also included a revised Alternative I of the Financial Test (page 4), to reflect this updated amount. I did make an update to Total Expenditures for the past two years to reflect capital outlays. Capital outlays may be subtracted from Total Expenditures as part of the financial test if the County would like to proceed in the manner. I noted and subtracted Capital Projects from page 18 of the Cherokee County 24 Audit from Total Expenditures. I made a separate calculation for FY23 costs also.

Changes are also needed on DNR Form 542-8090. I have attached a revised DNR Form 542-8090 for Cherokee County Landfill with the following suggested revisions:

- In Section 5 of form 542-8090 Financial Assurance Instruments, The Local Government Guarantee needs is revised with the assured amount of \$3,586,054.
- In Section 7: Closure and Post closure Accounts, account balances have been revised. The revised Beginning Balance is the end balance of last year's report which is \$515,460 for the closure account and \$526,598 for the post closure account. The Ending Balance for this year's report is \$555,888 for closing costs and \$562,966 for post closure costs. Again, this reflects the account balances from the FY24 Cherokee County Solid Waste Commission's audit.
- In addition, the projected deposit for closure costs should reflect the \$15,014 figure as noted in the calculation for projected deposits.

I realize I have proposed several changes and I would be happy to discuss my comments by telephone if that would be easier. Please review the attached revised forms and the above recommended revisions. If you are agreeable with the

recommended changes and my calculations are correct, please submit the signed revised forms to my attention.

Again, I agree with the projected deposit for the 2025 reporting year, I just need forms revised if agreeable. Once this information is received, I will be able to approve the Cherokee Landfill 2025 Financial Assurance Report. Thank you and I appreciate your attention to my request.

Sincerely,
Mary Klemesrud

--

Mary Klemesrud
Program Planner
Land Quality Bureau
Iowa Department of Natural Resources
6200 Park Avenue, Suite 200
Des Moines, IA 50321
515-802-8835
mary.klemesrud@dnr.iowa.gov
www.iowadnr.gov



2 attachments

Cherokee CO. SLF - Revised Local Government Guarantee.doc
58K

Cherokee Co. SLF - REVISED 25 Financial Assurnace.doc
138K

John P. Loughlin <jploughlinlaw@gmail.com>
To: "Klemesrud, Mary" <mary.klemesrud@dnr.iowa.gov>

Mon, Jul 14, 2025 at 4:56 PM

Thank you. I will get the revisions completed, approved and submitted. And also confirm the annual deposit is made.

John P. Loughlin
Attorney at Law

Loughlin Law Firm
231 West Maple
Cherokee, Iowa
Phone: 712-225-2514
Fax: 712-225-2515

[Quoted text hidden]

Klemesrud, Mary <mary.klemesrud@dnr.iowa.gov>
To: "John P. Loughlin" <jploughlinlaw@gmail.com>

Mon, Jul 14, 2025 at 4:59 PM

Thank you so much John. I really appreciate it.

Mary Klemesrud

[Quoted text hidden]

John P. Loughlin <jploughlinlaw@gmail.com>
To: "Klemesrud, Mary" <mary.klemesrud@dnr.iowa.gov>

Wed, Jul 30, 2025 at 10:49 AM

Hello


I have reviewed what you kindly provided. I have no problem with any of your suggestions. Accordingly, I have presented the documents you prepared to both the Cherokee County Auditor and the Chairman of the CCSWC. Their signed documents are attached. If you have any questions, or need any additional information please let me know. Thank you

John Loughlin
Attorney for CCSWC

[Quoted text hidden]

--

[Quoted text hidden]

 **20250730104925.pdf**
478K

Klemesrud, Mary <mary.klemesrud@dnr.iowa.gov>
To: "John P. Loughlin" <jploughlinlaw@gmail.com>

Wed, Jul 30, 2025 at 1:21 PM

Good Afternoon John,
Thank you for your review and the submittal of revised documents for the Cherokee County Solid Waste Commission's 2025 Landfill Financial Assurance Report. I will prepare the approval letter for the Commission and will have it to you by the end of the day tomorrow. Thank you again!

Sincerely,
Mary Klemesrud
[Quoted text hidden]

John P. Loughlin <jploughlinlaw@gmail.com>
To: "Klemesrud, Mary" <mary.klemesrud@dnr.iowa.gov>

Wed, Jul 30, 2025 at 1:36 PM

All good Thanks
[Quoted text hidden]

MUNICIPAL SOLID WASTE SANITARY LANDFILL LOCAL GOVERNMENT GUARANTEE

Guarantee made this /Date/ by Cherokee County, herein referred to as "Guarantor," which is a county organized under the laws of the State of Iowa. This guarantee is made by the Guarantor on behalf of the Cherokee County Solid Waste Commission to the Iowa Department of Natural Resources, herein referred to as "DNR," in an amount not to exceed \$3,586,054 lawful money of the United States.

WHEREAS, Section 455B.306 of the Code of Iowa requires financial assurance instruments for all sanitary disposal projects; and

WHEREAS, Cherokee County Solid Waste Commission has applied to the DNR to operate a sanitary disposal project located within the State of Iowa, and is required pursuant to IAC 567 Chapter 113.14(455B) to maintain financial assurance for closure and post-closure care in connection therewith; and

WHEREAS, IAC 567 Chapter 113.14(6)"h" provides for the "Local Government Guarantee" mechanism to be an acceptable financial assurance instrument, and Guarantor meets or exceeds the financial test criteria and agrees to comply with the requirements of said subrule; and

WHEREAS, Cherokee County Solid Waste Commission owns and/or operates the following municipal solid waste sanitary landfill facility covered by this Guarantee: Cherokee County Sanitary Landfill, Permit No. 18-SDP-01-75P, 1805 Linden Street, Cherokee, IA 51012; and

WHEREAS, the Guarantor guarantees to DNR that in the event that Cherokee County Solid Waste Commission fails to perform closure and/or post-closure care of the above facility in accordance with the approved plan or other permit requirements, whenever required to do so, the Guarantor shall either perform closure and/or post-closure care, pay a third party to perform closure and/or post-closure care, establish a fully funded secured trust fund as specified in IAC 567 Chapter 113.14(6)"a," or establish an alternate financial assurance instrument in the name of Cherokee County Solid Waste Commission in the amount of the current closure and/or post-closure cost estimate, as required by 567 IAC Chapter 113.14(6); and

WHEREAS, the Guarantor agrees to remain bound under this Guarantee for as long as Cherokee County Solid Waste Commission must comply with the applicable financial assurance requirements of Chapter 113, except when the Guarantor provides written notice, by certified mail, of intent to terminate Guarantee, at least 120 days prior to the date said Guarantee is to be terminated. When such notice is provided, Cherokee County Solid Waste Commission shall, within 90 days, provide DNR proof of alternate financial assurance or the DNR shall call upon the Local Government Guarantee; and

WHEREAS, the Guarantor expressly waives notice of acceptance of this Guarantee by Cherokee County Solid Waste Commission or by DNR. Guarantor also expressly waives notice of amendments or modifications of the site closure plan and of amendments or modifications of the facility permit(s).

IN WITNESS THEREOF, the Guarantor executes this Local Government Guarantee under their respective hand and seal, this 29th day of July, 20 25.



Guarantor Cherokee County

Signature: Kris Glienke

Name: Kris Glienke

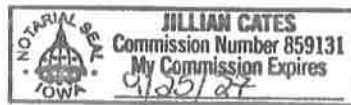
Title: Cherokee County Auditor

Signature: _____

Name: _____

Title: _____

Signature of Witness or Notary: Jillian Cates



MUNICIPAL SOLID WASTE SANITARY LANDFILL LOCAL GOVERNMENT GUARANTEE FINANCIAL TEST & CFO LETTER

[Enter Date]

Iowa Department of Natural Resources
Land Quality Bureau
6200 Park Avenue, Suite 200
Des Moines, IA 50321

Dear Sir or Madam:

I am the chief financial officer for Cherokee County, herein referred to as the "Guarantor." This letter is in support of the Guarantor's use of the Local Government Guarantee to demonstrate financial assurance for closure and/or postclosure care costs as specified in IAC 567 Chapter 113.14(3) and 113.14(4).

The Guarantor is providing a Local Government Guarantee, as specified in IAC 567 Chapter 113.14(6)"h," for the Cherokee County Solid Waste Commission, herein referred to as "Owner," owner and/or operator of the following facility for which financial assurance for closure and post-closure care is demonstrated through the financial test, as specified in IAC 567 Chapter 113.14(6)"f":

Facility Name: Cherokee County Sanitary Landfill

Address: 1805 Linden Street, Cherokee, IA 51012

Permit No: 18-SDP-01-75P

The current closure and/or post-closure care cost estimate, in accordance with IAC 567 Chapter 113.14(3) and 113.14(4), is shown below for each facility covered through the Local Government Guarantee:

Closure cost to be assured: \$ 2,308,425

Postclosure cost to be assured: \$ 1,229,274

Corrective action cost to be assured: \$ 48,355

The Guarantor meets or exceeds the financial test criteria as shown below in Alternative I and agrees to comply with the requirements, as specified in subrule 113.14(6)"h."

As chief financial officer for the Guarantor, I hereby certify that the information provided in this letter is true to the best of my knowledge and that this letter is being submitted in accordance with IAC 567 Chapter 113.14(6)"h" for the Local Government Guarantee.

Signature: Kris Glienke

Name: Kris Glienke, Cherokee County Auditor

Date: 7/29/2025

The figures for the following items are derived from the Guarantor's independently audited, year-end financial statements/audit report for the latest completed fiscal year, ended June 30, 2024.

Alternative I

| | | |
|--|---|--|
| 1. Sum of the current closure and/or postclosure cost estimate(s) being assured through the Local Government Guarantee | \$3,586,054 | \$3,571,302 |
| | From most recent annual auditor's report | From 2nd most recent annual auditor's report |
| 2. Total Revenues | \$14,672,569 | \$15,667,683 |
| 3. Total Expenditures | \$13,841,944 (= \$14,915,566 - \$1,073,622 capital expenditures) | \$14,438,24 (= \$17,226,932 - \$2,788,689 capital expenditures) |
| 4. Current bond rating of most recent outstanding general obligation bonds | AA/Aa or higher | AA/Aa or higher |
| Must be able to answer "Yes" or "True" to the following | | |
| | Yes/True | No/False |
| 5. Has evidence been provided of most recent bond rating? | X | |
| 6. Are outstanding general obligation bonds rated at least Aaa, Aa, A, or Baa, as issued by Moody's or AAA, AA, A or BBB, as issued by Standard & Poor's? | X | |
| 7. There are no outstanding general obligation bonds that are currently in default. | X | |
| 8. There are no outstanding general obligation bonds rated lower than Baa as issued by Moody's or BBB as issued by Standard & Poor's. | X | |
| 9. Have financial statements (audit) been prepared in conformity with Generally Accepted Accounting Principles or with Other Comprehensive Basis of Accounting? | X | |
| 10. Is line 3 less than line 2 in each of the past two years? | X | |
| 11. If answered "no" to line 10, line 3 does not exceed line 2 by more than 5 percent in each of the past two years. | X | |
| 12. Is line 1 less than 43 percent of line 2? | X | |
| 13. Have not received an adverse opinion or disclaimer of opinion from the independent certified public accountant or office of the auditor of the state of Iowa. | X | |
| 14. Have closure and postclosure costs being assured been referenced in the owner's most recent audit report or instead placed in the owner's files if timing did not permit reference in the most recent audit? | X | |

Definitions:

"Deficit" - means total annual revenues minus total annual expenditures.

"Total revenues" - means revenues from all taxes and fees but does not include the proceeds from borrowing or asset sales, excluding revenue from funds managed by local government on behalf of a specific third party.

"Total expenditures" - means all expenditures excluding capital outlays and debt repayment.

"Cash plus marketable securities" - means all the cash plus marketable securities held by the local government on the last day of a fiscal year, excluding cash and marketable securities designated to satisfy past obligations such as pensions.

"Debt service" - means the amount of principal and interest due on a loan in a given time period, typically the current year.



Municipal Solid Waste Sanitary Landfill Financial Assurance Report Form

SECTION 1: FACILITY INFORMATION

(please print or type)

Information Requested

Facility Name: Cherokee County Sanitary Landfill

Permit Number: 18-SDP-01-75P

Permitted Agency/Entity: Cherokee County Solid Waste Commission

SECTION 2: CLOSURE/POSTCLOSURE OR CORRECTIVE ACTION COST ESTIMATES

| Information Requested | Cost Estimate | Date of Cost Estimate |
|--|---------------|-----------------------|
| Updated Closure Cost Estimate | \$ 2,864,313 | 3/12/2025 |
| Updated Postclosure Cost Estimate | \$ 1,792,239 | 3/13/2025 |
| Initial or Updated Corrective Action Cost Estimate | \$ 48,355 | 3/13/2025 |

*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 | 3,155,978 |
| Amount of waste disposed of at the facility during the prior fiscal year | 20,527 |

SECTION 4: PROOF OF COMPLIANCE

Publicly Owned Municipal Solid Waste Landfills

(ATTACH AUDIT REPORT)

Owner's Most Recent Annual Audit Report

Prepared by: Williams & Company, P.C.

For 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 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" | | Closure <input type="checkbox"/> Postclosure <input type="checkbox"/> Corrective Action <input type="checkbox"/> | \$ |
| 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 checked="" type="checkbox"/> Postclosure <input checked="" type="checkbox"/> Corrective Action <input checked="" type="checkbox"/> | \$ 3,586,054 |
| Local Gov't. Dedicated Fund 567 IAC 113.14(6)"i" | | Closure <input type="checkbox"/> Postclosure <input type="checkbox"/> 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 (see formula below) | \$ 515,460 | \$ 555,888 | \$ 15,014 |
| Postclosure Account Balance (see formula below) | \$ 526,598 | \$ 562,966 | \$ 7,995 |
| Or | | | |
| Dedicated Fund Balance (see formula below) | \$ | \$ | \$ |
| Trust Fund Balance (see formula below) | \$ | \$ | \$ |

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

| Closure | Postclosure |
|---|--|
| $[(\$2,846,313 - \$555,888) / 3,155,978] \times 20,527 = \mathbf{\$15,014}$ | $[(\$1,792,240 - \$562,966) / 3,155,978] \times 20,527 = \mathbf{\$7,995}$ |

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: Roman Redig

Title: Chairman

Agency/Entity: Cherokee County Solid Waste Commission

Address: 1805 Linden Street

City: Cherokee

State: IA

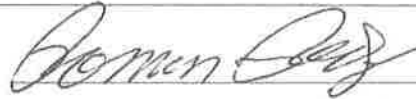
Zip: 51012

Telephone: 712-225-3749

Fax: 712-225-2515

Email Address: jploughlinlaw@gmail.com

Signature of Official:

 - Chairman Date: 7-29-2025

Questions? Contact Chad Stobbe at (515) 201-8272 or Chad.Stobbe@dnr.iowa.gov