

# **ATTACHMENT 1**



# NOTICE TO COMPLY

Facility Name: <b>Chiquita Canyon Landfill</b>		Facility ID#: <b>119219</b>	Sector: <b>VB</b>
Location Address: <b>29201 Henry Mayo Drive</b>		City: <b>Castaic</b>	Zip: <b>91384</b>
Mailing Address: <b>29201 Henry Mayo Drive</b>		City: <b>Castaic</b>	Zip: <b>91384</b>

This Notice to Comply is being issued to:

- Request additional information needed to determine compliance with clean air requirements.  
 Correct a minor violation found during an inspection.

Failure to respond or take corrective action, or providing false statements in response to this Notice to Comply can lead to issuance of a Notice of Violation pursuant to the California Health and Safety Code. The facility cited above is subject to re-inspection at any time to ensure compliance.

## YOU ARE HEREBY DIRECTED TO COMPLY WITH:

#	AQMDRULE/ CAL H&SCODE	REQUIREMENT	COMPLIANCE DUE DATE	COMPLIANCE ACHIEVED DATE
1	Cal. H&S Code 42303	Provide proof of notification to the South Coast AQMD regarding the incident that occurred on 01/15/2024.	2/29/2024	
2	Cal. H&S Code 42303	Provide records of the last two (2) carbon media changes for the Carbon Adsorber System (P/O G55163) including the types of media, the media replacement dates, and the quantity used for each respective carbon vessel.	2/29/2024	
3				
4				
5				

Served To: <b>Steve Cassulo</b>	Served By: <b>Alemayehu Solomon</b>
Title: <b>District Manager</b>	Date Served: <b>2/15/2024</b> Phone: <b>909.396.3256</b> Fax:
Email Address: <b>SteveCa@wasteconnections.com</b> Phone: <b>661.371.9214</b>	Email Address: <b>asolomon@aqmd.gov</b> Forms/ Applications/Info available at: <b>www.aqmd.gov</b>

**Instructions:**

- For each minor violation cited above, compliance shall be achieved by the compliance deadline specified for that particular violation.
- Within 5 working days of achieving compliance for each respective violation, the owner/responsible officer of the cited facility must complete and return a signed copy of this Notice to Comply to the South Coast Air Quality Management District at the address listed above.
- Please copy and return this Notice to Comply as many times as necessary to provide the required information. On each copy, include the date on which compliance was achieved. Date, sign, and send all completed copies to the attention of the inspector named above.

I hereby certify that the facility cited in this Notice to Comply has achieved compliance with the requirements listed above.

**Nicole Ward** Assistant District Manager *Nicole Ward* 2/29/2024  
NAME OF OWNER/ RESPONSIBLE OFFICIAL TITLE SIGNATURE DATE

**NOTICE#: E57106**

FILE COPY (Blue) FACILITY COPY (Gold) INSPECTOR COPY (White)

**ATTACHMENT 2**

**ATTACHMENT 3**

**ATTACHMENT 4**

**ATTACHMENT 5**