

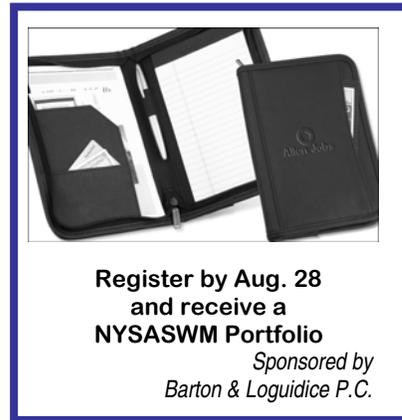
New York State Association For Solid Waste Management

2009 FALL CONFERENCE

Crowne Plaza Resort Hotel & Golf Club
Lake Placid, NY

September 27, 28 & 29

A Minimum of
5 NYS Continuing
Education Contact
Hours Will Be
Offered



Conference Registration	Exhibitor Registration and Conference Questions A limited number of exhibitor booths are available.
Robin Kane	Jeff Bouchard
Fulton County Department of Solid Waste	
P.O. Box 28, Johnstown, NY 12095	
(518) 736-5501 FAX (518) 762-2859	
Email: rkane@co.fulton.ny.us	Email: jbouchard@co.fulton.ny.us

Agenda



Day 1 Sunday, September 27, 2009

Board of Directors' Dinner

Day 2 Monday, September 28, 2009

- 9:00 AM **Registration Opens/Board of Directors' Meeting**
- 10:00 AM **Meet the Exhibitors** – Refreshments served
- Noon **Lunch** (tickets from hotel)
- 1:00 PM **Welcome** – Mike Wolak, *NYSASWM President*
- 1:05 PM **Panel Discussion***
NYSDEC Policy Ed Dassatti, *NYSDEC*
SWM Plans Judy Drabicki, *NYSDEC*
B.U.D. Materials in Landfill Construction & Closures
Tom Lynch, *NYSDEC*
- 2:30 PM **Break** (in exhibitor area)
- 3:00 PM **Engineering Aspects for Leachate Management***
Landfill vs. Wastewater
Jeff Bouchard, *Fulton County DSW*
George Bevington, *Gloversville-Johnstown STP*
- 4:00 PM **Eco Monitoring at Landfill Sites***
Jim Biamonte, *Oneida-Herkimer SWA*
Johanna Duffy, *Barton & Loguidice Engineering*
- 4:30 PM **Business Meeting** (Award Presentation)
- 5:00 PM **Dinner** (tickets)
- 7:00 PM **Attitude Adjustment Hour**
- 8:00 PM **Comedian Tom Cotter**

Day 3 Tuesday, September 29, 2009

- 7:00 AM **Breakfast** (tickets)
- 8:30 AM **Tire Recycling Markets in New York State**
James Gilbert, *Empire State Development*
- 9:00 AM **Engineering Evaluation of Fugitive Landfill Gas Emissions***
Joe Stockbridge, Matt McGarry, *Town of Colonie*
- 10:00 AM **Break** (in exhibitor area)
- 10:30 AM **Engineering for Rodman's Southern Expansion***
Bill Seifried, *DANC*
- 11:30 AM **NYS Product Stewardship Council Update**
Resa A. Dimino, *NYSDEC, NYPSC*
Hans Arnold, *Gerhardt LLC*
- Noon **Award of Door Prize** - Must be present to win
Adjournment
Lunch available for any remaining (tickets)

**These sessions are eligible for New York State Continuing Education Contact Hours*

HOTEL INFORMATION

NYSASWM has been offered the New York State per diem rates for this hotel; two nights, single occupancy is \$330 (double occupancy is \$219 per person) and includes meals. (One night only, \$165 single, \$109.50 double). Tickets for meals will be available at hotel registration desk. Extra meal tickets are available at \$64 per day.

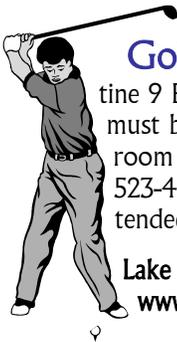
To obtain these special rates, you must make your reservations by **August 28, 2009**, and indicate that you are participating in this conference. You must complete the enclosed "Lodging Reservation Form" from the Crowne Plaza Resort Hotel & Golf Club - and send it direct to the hotel - to receive this special pricing. You can contact the hotel directly at **(518) 523-2556** or **Fax (518) 523-9410** to request additional information or visit their web site at www.crowneplaza.com.

All tax-exempt forms must be provided by the individual at the time of reservations to prevent being assessed a 7.75% NYS tax and 3% Essex County tax.

NOTE: Don't forget to fill out BOTH the hotel and NYSASWM registration forms and submit each to the correct organization.

MEALS

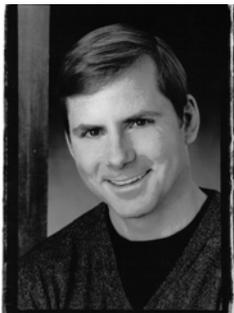
All meals from Sunday to Tuesday breakfast are included with room package for those who are staying two nights. For those who arrive Monday, Monday lunch and dinner and Tuesday breakfast are included.



Golfers: Registered NYSASWM Conference attendees are eligible for complimentary greens fees at the pristine 9 Executive Golf Course or a \$5 discount off seasonal greens fees at the Mountain and Links Courses. You must be registered with the hotel for the day being offered. Sunday arrivals can play on Sunday, if they have a room at the Crowne Plaza for Sunday night. Same applies for Monday arrivals. Contact the Pro-Shop @ (518) 523-4460 to schedule your tee times and to check availability. You must identify yourself as a NYSASWM attendee to qualify for discounted rates.

Lake Placid and the surrounding area have numerous recreational opportunities and historic sites. Go online at www.lakeplacid.com for a complete list of activities, events and information on the Lake Placid region.

Featured Comedian - Tom Cotter



Tom Cotter

New York City-based Comedian Tom Cotter will entertain you with his wise guy humor and rapid fire delivery. Some of Tom's accomplishments include filming his own special for Comedy Central, winning the grand prize at the Boston Comedy Festival, being voted "Best Stand Up" at the Las Vegas Comedy Festival and being featured in Best of the Fest at the Montreal Comedy Festival. His television appearances have included the Tonight Show with Jay Leno, 2008 Barbara Walters Special, the Late Late Show on CBS and NBC's Last Comic Standing. Tom recently landed his own series "Two Funny" on the Woman's Entertainment Network. He has also done voice-overs in a number of TV commercials including McDonald's, Doritos, Pepsi and Amstel Light. He has performed at over 300 colleges and across the globe.

**Don't miss his performance Monday night!
Sponsored by MXI Environmental**

Directions

From New York City and New Jersey:

Take the New York State Thruway (I-90) north to Exit 24 (Albany). Take I-87 (the Adirondack Northway) north to Exit 30. Pick up Route 9 north and follow it for two miles to Route 73 for 28 miles to Lake Placid.

From Syracuse, Rochester and Points West:

Take I-90 (NYS Thruway) east to Exit 36 (Syracuse). Pick up I-81 north and follow it to Watertown. Take Route 3 east to Saranac Lake, then follow Route 86 east to Lake Placid.

2009 CONFERENCE REGISTRATION and PAYMENT FORM

Registration

Member*

Non-Member**

By Aug. 28 \$125.00 \$175.00
After Aug. 28 \$175.00 \$225.00

*NYSASWM will honor discount to any SWANA (NY) or NYSAR³ member.

**Includes NYSASWM membership for the remainder of 2009

Name: (as you would like it to appear on your name badge)

_____ Title: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: (_____) _____ Fax: (_____) _____

E-mail: _____

Register Before Aug. 28 and receive a free NYSASWM Portfolio

Payment Method:

My check for \$_____ is enclosed (*Make check payable to: NYSASWM*)

VISA Mastercard Municipal Voucher

Signature: _____

Name: _____
exactly as it appears on card

Card Billing Address: _____

City: _____ State: _____ Zip Code: _____

Card Number: _____

Expiration: Month: _____ Year: _____ Last three numbers on signature line: _____

Registration form and payment should be mailed or faxed to:

NYSASWM Fall Conference
c/o Robin Kane, Fulton County Dept. of Solid Waste
P.O. Box 28, Johnstown, NY 12095
FAX: (518) 762-2859
Questions: (518) 736-5501

NYSASWM MEMBERSHIP BENEFITS



- ◆ Discount registration for the Spring Federation Solid Waste Conference and Exhibitor Show at the Sagamore Hotel in Lake George
 - ◆ Discount registration for the Annual Fall NYSASWM Conference & Exhibitor Show
 - ◆ Discount registration to March Training Program
 - ◆ Subscription to the NYSASWM newsletter - Wasteline
 - ◆ Track legislation on behalf of the membership and alert members to bills that may have an impact on their systems
 - ◆ Scholarship Program with first consideration given to children of NYSASWM members
- ◆ Countless opportunities for networking and technology transfer as a member of the largest organization representing solid waste managers in New York State

JOIN NYSASWM TODAY

MEMBERSHIP APPLICATION

New York State Association for Solid Waste Management

Established 1975

Please complete the following:

Name _____ Title: _____

Company: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: (____) _____ Fax: (____) _____

E-mail: _____

Check type of membership:

- Municipal, political subdivision or public benefit corporation
- Other professional

NOTE: Only municipal political subdivision or public benefit agency official members are entitled to vote. Dues are per person (not per company) and are in effect for the calendar year.

Please make check payable to: NYSASWM (dues are \$75.00 per person per calendar year) and mail to:

**New York State Association for Solid Waste Management
Membership Department, P.O. Box 13461, Albany, NY 12212**

Please note that while NYSASWM is a not-for-profit organization, membership dues are not tax deductible as a charitable contribution. To the extent permitted under the Internal Revenue Code, dues may be deducted as a business expense.



CROWNE PLAZA

RESORT & GOLF CLUB
LAKE PLACID

THE PLACE TO MEET.

NYSASWM

LODGING RESERVATION FORM

Arrival: Sunday, September 27 Departure: Tuesday, September 29, 2009

Guest Room Rate	Single	Double
Nightly Rate	\$165.00	\$109.50

Rate is quoted on a per person, per night basis

Service Charge Included
7.75% NYS Tax and 3% Essex County Tax Additional (unless exempt)

Nightly Package Rates includes: 1 Night Lodging, 1 Breakfast, 1 Lunch, 1 Dinner, plus complimentary reception prior to dinner on Monday.

To confirm your room reservation a \$125.00 deposit in the form of a check or a major Credit Card is required.

Check \$ _____

CC#: _____ Exp: _____

Name: _____

Affiliation: _____

Billing Address: _____

City/State/Zip: _____

E-mail Address: _____

Tele#: _____ Fax#: _____

Arrival Date: _____ Departure Date: _____

Single (1per) Double (2 ppl)

Roommate(s) _____

Crowne Plaza is not responsible for assigning roommates.

Entrée Choice for Monday Night

_____ **Roast Pork Loin** - roast pork loin finished with a spicy port wine sauce

_____ **Scrod Provencal** - broiled Boston scrod seasoned with breadcrumbs, garlic & diced tomatoes, served with potato and vegetables

ROOM DESCRIPTIONS

- Traditional rooms have 2 double beds or 1 king bed – hotel's choice.
- Rates quoted above are subject to 7.75% NYS Tax, and 3% Essex County Tax (on Room portion), unless exempt
- Rollaway beds are available upon request at a nightly charge of \$15.00+ tax

RESERVATION POLICIES

- Reservations received after the conference room block is full or after Friday, 8/28/09 will be accepted on an availability basis.
- Cancellations must be received by Sunday, 9/13/09.
- Deposits will not be refunded after Sunday, 9/13/09.
- Check in time is 4PM - Check out time is 11AM.
- Telephone reservations will not be accepted.
- Faxed reservations must be guaranteed by a major Credit Card.
- Reservations will be guaranteed from date of arrival to date of departure, as confirmed and Credit will not be given for Early Check-outs or missed meals.
- Payment arrangements for your stay will be required upon arrival in the form of Cash or major Credit Card.
- Rates for Early Arrival before Sunday, 9/27/09 or for Late Departure after Wednesday, 9/30/09 will be quoted upon request, subject to availability and cannot be guaranteed at the Conference rate.
- Confirmation of your Reservation will be e-mailed, faxed, or mailed using the information provided on this form.

I have read and agree with the above Reservation Policies

Please sign and date

Submit form and deposit to:
 Crowne Plaza Resort and Golf Club Lake Placid
 101 Olympic Drive, Lake Placid, New York 12946
 Telephone: 518-523-2556 Fax: 518-523-9410

Confirmation #: _____

Res. Agent: _____ Date: _____

EXEMPTION CERTIFICATE - TAX ON OCCUPANCY OF HOTEL ROOMS

STATE OF NEW YORK-Operators of hotels, etc. should not accept this certificate unless the officer or employee presenting it shows satisfactory credentials.
TO BE RETAINED BY VENDOR AS EVIDENCE OF EXEMPT OCCUPANCY

Vendor: Crowne Plaza Resort and Golf Club Lake Placid, 101 Olympic Dr., Lake Placid, New York 12946

Date: 2009

This is to certify that I, the undersigned, am a representative of the United States Government department, agency or instrumentality indicated below; that the charges for the occupancy at the above establishment on the dates set forth below have been or will be paid for by such governmental unit; and that such charges are incurred in the performance of my official duties as a representative or employee of such governmental unit.

Dates of Occupancy: _____ Signature: _____

Governmental Unit: _____ Title: _____

NOTE: A SEPARATE EXEMPTION CERTIFICATE IS REQUIRED FOR EACH OCCUPANCY AND FOR EACH REPRESENTATIVE OR EMPLOYEE.