



John Rossiello Deputy Director Solid Waste Management

125 Worth Street, Rm 727 New York, NY 10013 nyc.gov/sanitation

646-885-5056 jrossiello@dsny.nyc.gov February 22, 2024

New York State Department of Environmental Conservation Division of Materials Management Bureau of Permitting and Planning 625 Broadway, Albany NY, 12233-7260

RE: 91st Street Marine Transfer Station NYSDEC Permit No. 2-6204-00007/00016 2023 Annual Report

Dear Sir/Madam,

Attached, please find the 2023 Annual Report for the New York City Department of Sanitation's (DSNY's) 91st Street Marine Transfer Station (MTS). As required, 1 have provided the Financial Assurance Plan (FAP) closure cost for the fiscal year. This information was inserted after section 7 of the Annual Report.

Please call me if you have any questions or require additional information.

Best Regard John Rossiello

Attachment (1): 2023 Annual Report



PERMITTED	TRANSFER	FACILITY	ANNUAL	REPORT
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Conservation (If you need assistance filling out this form please email swmfannualreport@dec.ny.gov or call 518-402-8678.)

Complete and submit this form by March 1, 2024.

This annual report is for the year of operation from January 01, 2023 to December 31, 2023

SECTION 1 -- GENERAL INFORMATION

	FACILITY INFORMATION						
FACILITY NAME:							
East 91st Street Marine Transfer Station							
FACILITY LOCATION ADDRESS:		FACILITY			STAT		ZIP CODE:
1740 York Avenue NY NY	10128	New `	York		NY		10028
FACILITY TOWN: Manhattan		FACILITY New Yo			LITY PI 690-8		IE NUMBER: 10
FACILITY NYS PLANNING UNIT: New York City	(A list of NY	'S <u>Planning Un</u>	its can be found at the end of	this repo	ort).	NYS REC	SDEC GION #: 2
360 PERMIT #:(Refer to DEC Permit) 2-6204-00007/00016	DATE IS	sued: 2015	DATE EXPIRES: 11/5/2025	REGIS		ION	ITY CODE OR NUMBER: (Refer to
FACILITY CONTACT: Impublic CONTACT PHONE CONTACT FAX NUMBER: John Rossiello Dprivate 646-885-5056 CONTACT FAX NUMBER:						FAX NUMBER:	
CONTACT EMAIL ADDRESS: jros	siello@d	sny.nyc.go\	v				
		the second se	INFORMATION	1			
OWNER NAME: New York City Department of Sanita	ation	OWNER P	PHONE NUMBER: 5-4693	OWN	ER FA	XNU	JMBER:
OWNER ADDRESS: 125 Worth Street		OWNER C		1	STAT	Ē:	ZIP CODE: 10013
OWNER CONTACT:		OWNER C	ONTACT EMAIL ADDRE	SS:	J		<u></u>
John Capo		jcapo@	dsny.nyc.gov				
		OPERATO	RINFORMATION				
	e as owner				🖬 pub 🗆 priv		
			FERENCES				
Preferred address to receive correspondence: Facility location address Owner address Other (provide): Other (provide):							
Preferred email address: Facility Contact Other (provide):							
Preferred individual to receive correspondence: Facility Contact Owner Contact							
Did you operate in 2023? Yes; Complete this form. No; Complete and submit Sections 1 and 11. If you no longer plan to operate and wish							

to relinquish your permit/registration associated with this solid waste management activity, also complete the "Inactive Solid Waste Management Facility or Activity Notification Form" located at: https://extapps.dec.ny.gov/docs/materials_minerals_pdf/inactiveswmf.pdf

SECTION 2 - SOLID WASTE RECEIVED

Please provide the tonnages of solid waste received. Include all waste received. Report Recyclable Materials in Section 5. DO NOT REPORT IN CUBIC YARDS!

Specify the methods used to measure the quantities disposed and the percentages measured by each method: ¹⁰⁰ % Scale Weight _____% Estimated

% Truck Count

% Other (Specify:

Types of Solid Waste	January (tons)	February (tons)	March (tons)	April (tons)	May (tons)	June (tons)
Asbestos						
Construction and Demolition (C&D) Debris						
Mixed Municipal Solid Waste (MSW) (Residential, Institutional, & Commercial)	11,161.04	10,796.19	13,784.94	11,127.34	14,714.29	11,632.97
Oil/Gas Drilling Waste						
Petroleum Contaminated Soll						
Sewage Treatment Plant Sludge						
Treated Regulated Medical Waste						
Emergency Authorization Waste (Storm Debris)						
Other (specify)						
Total Tons Received	11,161.04	10,796.19	13,784.94	11,127.34	14,714.29	11,632.97

SECTION 2 - SOLID WASTE RECEIVED (continued)

Type of Solid Waste	Tip Fee (\$/ton)	August (tons)	September (tons)	October (tons)	November (tons)	December (tons)	Total Year (tons)	Daily Avg. (tons)
Asbestos						-		
Construction & Demolition (C&D) Debris								
industrial Waste (Including Industrial Process Sludges)								
Mixed Municipal Solid Waste (MSW) (Residential, Institutional & Commercial)		13,129.21	10,943.64	10,834.09	14,293.13	10,880.4	143,921.95	481.3
Oil/Gas Drilling Waste								
Petroleum Contaminated Soil								
Sewage Treatment Plant Sludge								
Treated Regulated Medical Waste								
Emergency Authorization Waste (Storm Debris)								
Other (specify)					<u> </u>			
Total Tons Received		13,129.21	10,943.64	10,834.09	14,293.13	10,880.4	143,921.95	481.3

SECTION 3 - SERVICE AREA OF SOLID WASTE RECEIVED

Please identify where the waste is coming from. The total tons received reported below should equal the total tons received in Section 2 (Solid Waste Received). DO NOT REPORT IN CUBIC YARDS!

- If the waste WAS received from another solid waste management facility, please write in the name and address of the facility along with the appropriate state, county and planning unit/municipality.
- If the waste WAS NOT received from another solid waste management facility, please write in "Direct Haul" along with the appropriate state, county and planning unit/municipality where the waste was generated.

Specify transport method, list type of material(s) and percentages of total waste transported by each:

100 % Road: Waste Type(s): Residential Waste	% Rail: Waste Type(s):
% Water: Waste Type(s):	% Other (specify:): Waste Type(s):

SERVICE AREA OF SOLID WASTE RECEIVED (where the waste is coming from)								
TYPE OF SOLID WASTE	SOLID WASTE MANAGEMENT FACILITY FROM WHICH IT WAS RECEIVED (Name & Address) OR "Direct Haul"	SERVICE AREA STATE OR COUNTRY	SERVICE AREA COUNTY OR PROVINCE	SERVICE AREA NYS PLANNING UNIT (See Attached List of NYS Planning Units	TONS RECEIVED			
Asbestos								
Construction & Demolition (C&D) Debris								
Industrial Waste (Including Industrial Process Sludges)								

SERVICE AREA OF SOLID WASTE RECEIVED (where the waste is coming from)							
TYPE OF SOLID WASTE	SOLID WASTE MANAGEMENT FACILITY FROM WHICH IT WAS RECEIVED (Name & Address) OR "Direct Hauf"	SERVICE AREA STATE OR COUNTRY	SERVICE AREA COUNTY OR PROVINCE	SERVICE AREA NYS PLANNING UNIT (See Attached List of NYS Planning Units	TONS RECEIVED		
Municipal Solid Waste (MSW) (Residential, Institutional & Commercial)	Direct Haul	New York	New York County	91st Street Marine	143,921.95		
Oil/Gas Drilling Waste							
Petroleum Contaminated Soil							
Treated Regulated Medical Waste (TRMW)*							
Emergency Authorization Waste (Storm Debris)							
Other (specify)							
		1	то	TAL RECEIVED (tons	- 143.921.95		
			10		•		

* List generators that provide you Certificates of Treatment forms and quantities of TRMW from each _

SECTION 4 - TRANSFER OR DISPOSAL DESTINATION

Please identify destination of waste. Please only include waste sent off-site for disposal or further transfer prior to disposal. Exclude Recyclable Material amounts reported in Section 5. DO NOT REPORT IN CUBIC YARDS!

- If the waste is being sent to another facility for transfer or processing prior to disposal (e.g. Transfer facility or C&D debris handling and recovery facility),
 please identify name, <u>address</u>, corresponding State/Country, County/Province, and Destination Planning Unit of the transfer destination and the amount of
 waste transferred in the "Amount to Transfer Destination" column.
- If the waste is being sent to a landfill or combustor, please identify the name, <u>address</u>, corresponding State/Country, County/Province, and Destination Planning Unit of the disposal destination and the amount of waste being sent for disposal in the "Amount to Disposal Destination" column.

Specify transport method, list type of material(s) and percentages of total waste transported by each:

% Road: Waste Type(s):	% Rail: Waste Type(s):
100 % Water: Waste Type(s): Residential Waste	% Other (specify:): Waste Type(s):

	TRANSFER OR DISPOSAL DESTINATION								
TYPE OF SOLID WASTE	SOLID WASTE MANAGEMENT FACILITY TO WHICH IT WAS SENT (Name & Address)	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	DESTINATION NYS PLANNING UNIT (See Attached List of NYS <u>Planning</u> Units	AMOUNT TO TRANSFER DESTINATION (TONS)	AMOUNT TO DISPOSAL DESTINATION (TONS)	TOTAL YEAR (TONS)		
Asbestos									
Construction & Demolition (C&D) Debris									
Industrial Waste (Including Industrial Process Sludges)									

TYPE OF SOLID WASTE	SOLID WASTE MANAGEMENT FACILITY TO WHICH IT WAS SENT (Name & Address)	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	DESTINATION NYS PLANNING UNIT (See Attached List of NYS <u>Planning</u> Units	AMOUNT TO TRANSFER DESTINATION (TONS)	AMOUNT TO DISPOSAL DESTINATION (TONS)	TOTAL YEAR (TONS)
Municipal Solid	Covanta Delaware Valley 10 Highland Ave Chester PA 19013	PA	Delaware County			65,852	65,852
Waste (MSW)	Covanta Niagara 100 Energy Blvd Niagara Falls NY 14304	NY	Niagara County			76,540	76,540
(Residential, Institutional & Commercial)	Lee County Landfill 1431 Sumter Hwy.Bishopville SC 29010	SC	Lee County			0	0
Oil/Gas Drilling Waste							
Petroleum Contaminated Soil							
Sewage Treatment Plant Sludge							
Treated Regulated Medical Waste							
Emergency Authorization Waste (Storm Debris)							
Other (specify)							

SECTION 5 – PERMITTED TRANSFER FACILITY RECYCLABLE & RECOVERED MATERIALS A. Recyclables Received

Is your facility also a permitted or registered Recyclables Handling & Recovery Facility?

Section 5 for material recovered from the mixed solid waste stream. Complete a Recyclables Handling & Recovery Facility (RHRF) form for material received as source separated. The RHRF form is located at: http://www.dec.ny.gov/chemical/52706.html.

INO; Complete Section 5 for material recovered from the mixed solid waste stream and for material received as source separated.

Material	Tip Fee (\$/Ton)	January (tons)	February (tons)	March (tons)	April (tons)	May (tons)	June (tons)	July (tons)
Commingled Containers (metal, glass, plastic)								
Commingled Paper (all grades)								
Single Stream (total)								
Brush, Branches, Trees, & Stumps								
Food Scraps								1
Yard Waste (curbside)								
Other (specify)								
Total Tons Receive	ed							
Material	August (tons)	September (tons)	October (tons)	November (tons)	December (tons)		l Year ons)	Daily Avg. (tons)
Commingled Containers (metal, glass, plastic)								
Commingled Paper (all grades)								
Single Stream (total)								
Brush, Branches, Trees, & Stumps								
Food Scraps								
Yard Waste (curbside)								
Other (specify)								
Total Tons Received								

SECTION 5 - PERMITTED TRANSFER FACILITY RECYCLABLE & RECOVERED MATERIALS

B. Service Area of Recyclable Material Received

Please identify where the materials are coming from. DO NOT REPORT IN CUBIC YARDS!

- If the materials WERE received from another solid waste management facility, please write in the name and <u>address</u> of the facility along with the appropriate state, county and planning unit/municipality.
- If the materials WERE NOT received from another solid waste management facility, please write in "Direct Haul" along with the appropriate state, county
 and planning unit/municipality where the materials were generated.

Specify transport method, list type of material(s) and percentages of total material transported by each:

% Road: Material(s):	% Rail: Material(s):
% Water: Material(s):	% Other (specify:): Material(s):

	SERVICE AREA OF RECYCLABLE MATER	AL RECEIVED	here the material is c	oming from)	
MATERIAL	SOLID WASTE MANAGEMENT FACILITY FROM WHICH IT WAS RECEIVED (Name & Address) OR "Direct Hau!"	STATE OR COUNTRY	COUNTY OR PROVINCE	NYS PLANNING UNIT (See Attached List of NYS Planning Units)	TONS RECEIVED
Commingled Containers (metal, glass, plastic)					
Commingled Paper (all grades)					
Single Stream					
Brush, Branches, Trees, & Stumps					
Food Scraps					
Yard Waste (curbside)		_			
Other (specify)					
			тс	TAL RECEIVED (tons);

SECTION 5 – PERMITTED TRANSFER FACILITY RECYCLABLE & RECOVERED MATERIALS (continued) C. Material Recovered

Please identify destination of recovered materials. Indicate the name of the facility, address, corresponding State/Country, County/Province, Destination Planning Unit/Municipality and the amount of material transferred. DO NOT REPORT IN CUBIC YARDS!

Specify transport method, list type of material(s) and percentages of total waste transported by each:

% Road: Material Type(s):		% Rail: Material Type(s):					
% Water: Material Type(s):		% Other (specify:): Material Type(s):					
	PA	PER RECOVERED					
RECOVERED MATERIAL	DESTINATION (Name & Address)	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	NYS PLANNING UNIT (See Attached List of NYS <u>Planning Units</u>)	TONS RECOVERED (out of facility)		
Commingled Paper (all grades)							
Corrugated Cardboard							
Junk Mail							
Magazines							
Newspaper							
Office Paper							
Paperboard / Boxboard							
Other Paper (specify)							
				RECOVERED (tons):			

SECTION 5 - PERMITTED TRANSFER FACILITY RECYCLABLE & RECOVERED MATERIALS (continued)

		Ass RECOVERED			
RECOVERED MATERIAL	DESTINATION (Name & Address)	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	DESTINATION NYS PLANNING UNIT (See Attached List of NYS Planning Units	TONS RECOVERED (out of facility)
Container Glass					
Industrial Scrap Glass					
Other Glass (specify)					
			TOTAL GLASS R	ECOVERED (tons):	
RECOVERED MATERIAL	DESTINATION (Name & Address)	TAL RECOVERED DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	DESTINATION NYS PLANNING UNIT (See Attached List of NYS Planning Units	TONS RECOVERED (out of facility)
Aluminum Foil / Trays					
Bulk Metal (from MSW)					
Bulk Metal (from CD debris)					
Enameled Appliances / White Goods					
Industrial Scrap Metal					
Tin & Aluminum Containers					
Other Metal (specify)					
			TOTAL METAL R	ECOVERED (tons):	

SECTION 5 - PERMITTED TRANSFER FACILITY RECYCLABLE & RECOVERED MATERIALS (continued) D. Material Recovered

	PL/	STIC RECOVERED			
RECOVERED MATERIAL	DESTINATION (Name & Address)	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	DESTINATION NYS PLANNING UNIT (See Attached List of NYS Planning Units	TONS RECOVERED (out of facility)
Commingled Plastic (#1 - #7)					
PET (plastic #1)					
HDPE (plastic #2)					
Other Rigid Plastics (#3 - #7)					
Industrial Scrap Plastic					
Plastic Film & Bags					
Other Plastics (specify)					
		T	OTAL PLASTIC R	ECOVERED (tons):	
	MISCELLANE	OUS MATERIAL RECOVE	RED		
RECOVERED	DESTINATION (Name & Address)	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	DESTINATION NYS PLANNING UNIT (See Attached List of NYS Planning Units	TONS RECOVERED (out of facility)
Electronics					
Textiles					
Other (specify)					
			NEOUS MATERIA	L RECOVERED (tons):	

SECTION 5 – PERMITTED TRANSFER FACILITY RECYCLABLE & RECOVERED MATERIALS (continued) C. Material Recovered

4	MIXED	MATERIAL RECOVERED			
RECOVERED MIXED MATERIAL	DESTINATION (Name & Address)	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	DESTINATION NYS PLANNING UNIT (See Attached List of NYS Planning Units	TONS RECOVERED (out of facility)
Commingled Containers (metal, glass, plastic)					
Commingled Paper & Containers					
Single Stream (total)					
Other (specify)					
	ORGANIC	TOTAL		L RECOVERED (tons):	
RECOVERED MATERIAL	DESTINATION (Name & Address)	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	DESTINATION NYS PLANNING UNIT (See Attached List of NYS Planning Units	TONS RECOVERED (out of facility)
Brush, Branches, Trees, & Stumps					
Food Scraps					
Yard Waste (curbside)					
Other (specify)					
		TOTAL OR		L RECOVERED (tons):	

SECTION 6 - UNAUTHORIZED SOLID WASTE

Has unauthorized solid waste been received at the facility during the reporting period?

□ Yes ■ No If yes, give information below for each incident (attach additional sheets if necessary):

Date Received	Type Received	Date Disposed	Disposal Method & Location

Radiation Monitoring

Does your facility use a fixed radiation	monitor? X	Yes No	•
Identify Manufacturer	and Model 37	5-P-1000	of fixed unit.
Does your facility use a portable radia	tion monitor?	_{Yes} X	No
Identity Manufacturer	and Model		of fixed unit.

If the radiation monitors have been triggered give information below for each incident:

	Recei	ved					
Incident Number	Date	Time	Hauler	Origin	Truck Number	Reading %	Disposal Statu:
2023-0012	1/10/23	0415	DSNY	Manhattan	25DN-902	2777%	Completed
2023-0016	1/11/23	2010	DSNY	Manhattan	25DY-067	116%	Completed
2023-0021	1/13/23	2235	D5NY	Manhattan	25DY-160	258%	Completed
2023-0029	1/18/23	2043	DSNY	Manhattan	25DY-068	114%	Completed
2023-0031	1/20/23	0435	DSNY	Manhattan	25DN-860	125%	Completed
2023-0035	1/21/23	1735	DSNY	Manhattan	25DN-201	197%	Completed
2023-0036	1/21/23	1915	DSNY	Manhattan	25DN-409	97%	Completed
2023-0053	2/1/23	1050	DSNY	Manhattan	25DY-412	31%	Completed
2023-0089	2/20/23	0815	D5NY	Manhattan	25DY-513	4064%	Completed
2023-0132	3/18/23	1750	DSNY	Manhattan	25DY-004	114%	Completed
2023-0147	3/24/23	1755	D\$NY	Manhattan	25DN-112	82%	Completed
2023-0170	4/6/23	1730	DSNY	Manhattan	25DN-902	66%	Completed
2023-0199	5/2/23	0205	DSNY	Manhattan	25DN-863	80%	Completed
2023-0207	5/4/23	0231	DSNY	Manhattan	25DY-707	46%	Completed
2023-0244	5/25/23	2000	D\$NY	Manhattan	25DN-902	237%	Completed
2023-0288	6/30/23	0235	DSNY	Manhattan	25DY-004	3266%	Completed
2023-0320	7/19/23	2020	DSNY	Manhattan	25DY-303	71%	Completed
2023-0351	8/9/23	0313	DSNY	Manhattan	25DN-797	79%	Completed
2023-0354	8/11/23	0856	DSNY	Manhattan	25DN-103	108%	Completed
2023-0357	8/14/23	1910	DSNY	Manhattan	25DN-949	164%	Completed
2023-0411	9/21/23	0808	D\$NY	Manhattan	25DY-790	731%	Completed
2023-0424	9/25/23	1710	D\$NY	Manhattan	25DY-203	5525%	Completed
2023-0425	9/25/23	1715	D\$NY	Manhattan	25DY-609	2333%	Completed
2023-0429	9/28/23	0900	DSNY	Manhattan	25DN-112	998%	Completed
2023-0480	10/26/23	0905	DSNY	Manhattan	25DY-786	51746%	Completed
2023-0488	10/30/23	0855	DSNY	Manhattan	25DY-780	4652%	Completed
2023-0493	11/2/23	0855	DSNY	Manhattan	25DY-424	4589CPS	Completed
2023-0504	11/9/23	1735	D\$NY	Manhattan	25DY-733	2661CPS	Completed
2023-0509	11/10/23	2040	DSNY	Manhattan	25DY-303	6137 CPS	Completed
2023-0510	11/11/23	0210	D5NY	Manhattan	25DY-412	10619CPS%	Completed
2023-0524	11/17/23	0850	DSNY	Manhattan	25DY-607	5281 CPS	Completed
2023-0541	11/24/23	2040	DSNY	Manhattan	25DN-124	72379 CPS	Completed
2023-0558	12/1/23	0350	DSNY	Manhattan	25DY-159	108675CPS%	Completed
2023-0582	12/14/23	0859	DSNY	Manhattan	25DY-607	52429%	Completed
2023-0596	12/19/23	1000	DSNY	Manhattan	25DY-788	15547%	Completed

SECTION 7 - COST ESTIMATES AND FINANCIAL ASSURANCE DOCUMENTS

Are there required cost estimates and financial assurance documents for closure?

■ Yes □ No If yes, attach additional sheets reflecting annual adjustments for inflation and any changes to the Closure Plan?

The following represents the City's total landfill and hazardous waste sites liability which is recorded in the government-wide Statement of Net Position:

		2023	2022
		(in thousands)	
Landfill		\$1,027,060	\$1,011,361
Hazardous waste sites		110,917	108,180
Total landfill and hazardous waste sites liability,		\$1,137,977	\$1,119,541

Pollution Remediation Obligations

The pollution remediation obligations (PROs) at June 30, 2023 and June 30, 2022, summarized by obligating event and pollution type, respectively, are as follows:

Obligating Event	Fiscal Ye	ar 2023	Fiscal Year 2022		
*	Amount	Percentage	Amount	Percentage	
	(in thousands)		(in thousands)		
Imminent endangerment	\$ 15	0.01%	\$ 15	0.01%	
Named by regulator as a potentially responsible party	65,033	19.89	67,332	21.79	
Voluntary commencement.	261,761	80.10	241,559	78.20	
Total	\$326,809 ⁽¹⁾	100.00%	\$308,906 ⁽¹⁾	100.00%	
Pollution Type	Amount	Percentage	Amount	Percentage	
	(în thousands)		(in thousands)	-	
Asbestos removal	\$199,103	60.93%	\$183,557	59.43%	
Lead paint removal	17,059	5.22	17,106	5.54	
Soil remediation	21,648	6.62	27,255	8.82	
Water remediation.	50,796	15.54	50,796	1 6 .44	
Other	38,203	11.69	30,192	9.77	
Total	\$ 326,809 0	100.00%	\$308,906 ⁽¹⁾	100.00%	

(b) There are no expected recoveries to reduce the liability.

The PRO liability is derived from registered multi-year contracts which offsets cumulative expenditures (liquidated/unliquidated) against original encumbered contractual amounts. The potential for changes to existing PRO estimates is recognized due to such factors as: additional remediation work arising during the remediation of an existing pollution project; remediation activities may find unanticipated site conditions resulting in necessary modifications to work plans; changes in methodology during the course of a project may cause cost estimates to change, e.g., the new ambient air quality standard for lead considered a drastic change will trigger the adoption of new/revised technologies for compliance purposes; and changes in the quantity which is paid based on actual field measured quantity for unit price items measured in cubic meters, linear meters, etc. Consequently, changes to original estimates are processed as change orders. Further, regarding pollution remediation fabilities that are not yet recognized because they are not reasonably estimable, the Law Department relates that the City has approximately 52 cases in total, 51 cases involving hazardous substances, including spills from above and underground storage tanks, and other contamination on, or caused by facilities on City-owned property; and there is one case involving Drinking Water. Due to the uncertainty of the legal proceedings, future liabilities cannot be estimated.

The City, in compliance with the State Department of Environmental Conservation Permit Numbers 2-6302-00007/00019, 2-6102-00010/00013, 2-6106-00002/00022, 2-6204-007/00013, and 2-6202-00005/00017 issued pursuant to 6 NYCRR Part 360, must provide financial assurance for the closure of the following Marine Transfer Stations: North Shore, Hamilton Avenue, Southwest Brooklyn, East 91st Street, and West 59th Street. Such surety instrument must conform to the requirements of 6 NYCRR Part 360.12. The liability for closure as of June 30, 2023, which equates to the total current closure cost, is \$1.17 million for North Shore, \$1.03 million for Hamilton Avenue, \$970 thousand for Southwest Brooklyn, \$1.12 million for East 91st Street, and \$254 thousand for West 59th Street. The cost estimates are based on current data and are representative of the cost that would be incurred by an independent party. The estimates are subject to adjustment for inflation and to account for changes in regulatory requirements or cost estimates. For government-wide financial statements, the liability for closures is based on total estimated current costs. For fund financial statements, expenditures are recognized using the modified accrual basis of accounting when the closure costs are incurred, and the payment is due. The total liability equaling the total closure costs for the transfer stations of \$4.54 million is included under the Pollution Type "Other" in the table above.

Financial Assurance

						NYCPI	Average
	FY19	FY20	FY21	FY22	FY23	FY19	275.769
North Shore	\$1.02	\$1.04	\$1.06	\$1.11	\$1.17	FY20	280.645
Hamilton Avenue	\$896	\$912	\$931	\$978	\$1,029		1.017681
Southwest Brooklyn	\$844	\$859	\$877	\$921	\$970		
East 91st Street	\$976	\$993	\$1,014	\$1,065	\$1,121	FY21	286.438
West 59th Street	\$221	\$225	\$230	\$241	\$254		1.020642
						FY22	300.896

5 31 8 2 96 1.050475 FY23 316.811 1.052892

CPI for All Urban Consumers (CPI-U) Original Data Value

Series kl; CUURS12ASA0

Not Seasonally Adjusted

Series	All items in New York-Newark-Jersey City, NY-NJ-PA, all
Title:	urban consumers, not seasonally adjusted
Area:	New York-Newark-Jersey City, NY-NJ-PA
ltem:	All items
Base	1982-84=100
Period:	
Years:	2010 lo 2023

Year	Jan	Fab	Mar	Apr	Мау	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Annual	HALF1	HALF2	
2010	238.970	238.862	240.101	240.529	241.075	240.817	241.147	241.569	241.485	241.981	241.960	241.874	240.864	240.059	241.669	
2011	242.639	243.832	245.617	246.489	248.073	248.505	249.164	250.058	250.559	250.051	249.317	248.307	247.718	245.859	249.576	
2012	249.322	250.285	251.887	252.349	252.652	252.406	252.016	253.472	254.554	254.277	254.265	253.555	252.588	251.484	253.693	
2013	254,807	256.234	256.589	255.967	256.270	256.911	257.326	257.659	258.504	257.069	257.377	257.284	256.833	256.130	257.537	
2014	259.596	259.019	259.971	259.985	261.225	261.350	261.498	261.075	261.D74	260.500	259.382	258.080	260.230	260.191	260.268	
2015	258.376	259.240	259.647	259.959	261.066	261.512	261.199	261.347	261.887	261.515	261.009	259.941	260.558	259.967	261.150	
2016	260.342	260.875	261.506	262.619	263.312	263.877	263.722	264.160	264.802	264.738	265.203	265.421	263.365	262.089	264.641	
2017	266.917	267.662	267.582	267.948	268.183	268,666	268.051	268.657	270.059	269.575	269.381	269.564	268.520	267.826	269.215	
2016	270.771	272.214	272.196	272.950	274.001	274.170	274.073	274.441	275.455	275.101	274.478	273.836	273.641	272,717	274.564 FY19	275.7693
2019	275.144	275.823	276.570	277.441	278.068	278.802	278.817	279.428	279.338	279.255	279.468	279.816	278.164	276.975	279.354 FY20	280.6452
2020	282.020	282.577	281.975	280.623	282.092	282.333	283.624	283.478	284.551	284.121	283.291	284.35	282.92	281.937	283.903 FY21	286.4376
2021	285.525	286.474	287.481	289.493	290.991	293.872	293.553	293.927	295.488	296.472	297.49	296.865	292.303	288.973	295.633 FY22	
2022	300.164	301.151	305.024	307.781	309.243	313.589	312.615	313.28	313.88	314.338	314.975	315.656	310.141	306.159	314.124 FY23	316.8109
2023	318.151	319.295	319.038	319.211	320.002	321,29	322,496	324.38						319.498	323,438	

https://data.bls.gov/pdg/SurveyOutputServlet?data_tool=dropmap&series_ld=CUURS12ASA0.CUUSS12ASA0

CPI for All Urban Consumers (CPI-U)

Series Id:	CUURS12ASA0,CUUS\$12ASA0
Not Seasonally	Adjusted
Series Title:	All Items in New York-Newark-Jersey City, NY-NJ-PA, all urban consumers, not seasonally adjusted
Area:	New York-Newark-Jersey City, NY-NJ-PA
item:	All items
Base Period:	1982-84=100

Download: 🗿 Max

Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Annual	HALFE	HALF2
2013	254.807	256.234	256.589	255.967	256,270	256.911	257.326	257.659	258.504	257.069	257.377	257.284	256.833	256.130	257.537
2014	259.596	259.019	259.971	259.985	261.225	261.350	261.498	261.075	261.074	260.500	259.382	258.080	260.230	260.191	269.268
2015	258.376	259.240	259.647	259.959	261.066	261.512	261.199	261.347	261.887	261.515	261.009	259.941	260.558	259.967	261.150
2016	260.342	260.875	261.508	262.619	263.31.2	263.877	263.722	264.160	264.602	264.735	265.203	265.421	263.355	262.099	264,641
2017	266.917	267.662	267.582	267.948	268.183	268.666	268.051	268.657	270.059	269.575	269.381	269.564	268.520	267.826	269,215
2016	270.771	272.214	272.196	272.950	274.001	274.170	274.073	274 441	275.455	275.101	274.478	273.836	273.641	272.717	274.564
2019	275.144	275.023	275,570	277.441	278.068	278.802	278.817	279.428	279.338	279.255	279.468	279.816	278.164	276.975	279.354
2020	282.020	282.577	281.975	280.623	282.092	252,333	283.624	283.478	284.551	284.121	263.291	284.350	282.920	281.937	283,903
2021	285.525	286.474	287.481	289.493	290.991	293.872	293.553	293.927	295.468	296.472	297.490	296.865	292.303	288.973	295.632
2022	300.164	301.151	305.024	307.781	309.243	313.589	312.615	313.280	313.880	314.338	314.975	315.656	310,141	306,159	314.124
2023	318.151	319.295	319.038	319.211	320.002	321.290	322.496	324.380						319.498	

SECTION 8 – PROBLEMS								
Were any problems encountered during the reporting period (e.g., specific occurrences which have led to changes in facility procedures)?								
□ Yes	I No	If yes, attach additional sheets identifying each problem and the methods for resolution of the problem.						
		SECTION 9 – CHANGES						
Were the	ere any cl	hanges from approved reports, plans, specifications, and permit conditions?						
□ Yes	🔳 No	If yes, attach additional sheets identifying changes with a justification for each change.						

SECTION 10 - PERMIT/CONSENT ORDER REPORTING REQUIREMENTS

Are there any additional permit/consent order reporting requirements not covered by the previous sections of this form?

Yes INO If yes, attach additional sheets identifying the reporting requirements with their respective responses.

SECTION 11 - SIGNATURE AND DATE BY OWNER OR OPERATOR

Owner or Operator must sign, date and submit one completed form to the appropriate Regional Office (See attachment for Regional Office addresses, email addresses and Materials Management Contacts).

The Owner or Operator must also submit one copy by email, fax or mail to:

New York State Department of Environmental Conservation Division of Materials Management Bureau of Solid Waste Management 625 Broadway Albany, New York 12233-7260 Fax 518-402-9041 Email address: SWMFannuaireport@dec.ny.gov

I certify, under penalty of law, that the data and other information identified in this report have been prepared under my direction and supervision in compliance with a system designed to ensure that qualified personnel properly and accurately gather and evaluate this information. I am aware that any false statement I make in such report is punishable pursuant to spetion 74-2703(2) of the Environmental Conservation Law and section 210.45 of the Penal Law.

Signature

John Capo

Name (Print or Type)

125 Worth Street

Director of Solid Waste Management

Title (Print or Type)

City

646 885 **4693**

NY 10013

Phone Number

State and Zip

New York

Address

jcapo@dsny.nyc.gov

Email (Print or Type)

ATTACHMENTS: ____ YES X NO (Please check appropriate line)