



DEPARTMENT US	SE ONLY
DEC APPLICATION NO.	
ACTIVITY NUMBER(S)	

DIVISION OF MATERIALS MANAGEMENT APPLICATION FOR A SOLID WASTE MANAGEMENT FACILITY PERMIT

Please read all instructions before completing this application

Please TYPE or PRINT clearly 1. APPLICATION TYPE (CHECK ALL APPLICABLE BO	XES):	
	val (Existing permit expiration date: July 19, 2022)	
2. APPLICANT IS:	3. IS APPLICATION FILED BY OR ON BEHALF OF A MUNICIPALITY?	
Facility Owner Facility Operator	☐ YES (Name of municipality:) ✓ NO	
4. FACILITY NAME AND LOCATION (Attach USGS T Name: Dunn Mine and C&D Facility	opo Map showing exact location)	
Address: 209 Partition Street Extension, Rensselaer, N	JY 12144	
Town:	County: Rensselaer	
Coordinates: NYTM-E 700,043	NYTM-N 1,390,807	
	umber (if applicable):	
	real property owner has changed since last application was submitted.	
5. FACILITY OWNER'S INFORMATION Name: S.A. Dunn & Company, LLC	6. FACILITY OPERATOR'S INFORMATION Name: S.A. Dunn & Company, LLC	
Address: 209 Partition Street Extension	Address: 209 Partition Street Extension	
City/State/Zip: Rensselaer, NY 12144	City/State/Zip: Rensselaer, NY 12144	
Phone number: (518) 650-6106	Phone number: (518) 650-6106	
Email:	Email:	
7. ENGINEER'S INFORMATION	8. REAL PROPERTY OWNER'S INFORMATION	
Name: Amy J. Knight	Name: See attached	
NYS Professional Engineer License #: 076341	Address:	
Firm Name: CEE, PLLC	City/State/Zip:	
Address: 31 Bellows Road	Phone number:	
City/State/Zip: Raynham, MA 02767	Email:	
Phone number: (774) 501-2176	Check here if facility owner is not real property owner	
Email: aknight@cecinc.com	See instruction page for written permission requirement.	
9. TYPE OF FACILITY (CHECK ALL APPLICABLE BOX		
Combustion & Thermal Treatment (362-1)	Navigational Dredge Material Handling & Recovery (361-9)	
C & D Debris Handling & Recovery (361-5)	Nonspecific Facilities (360.17)	
Composting & Other Organics Processing (36	(1-3) Recyclables Handling & Recovery (361-1)	
Household Hazardous Waste Collection (362	-4) Research, Development, and Demonstration (360.18)	
Land Application & Associated Storage (361-	2) Transfer (362-3)	
✓ Landfill (363)	Waste Oil (374-2)	
Regulated Medical Waste (365)	Waste Tire Handling & Recovery (361-6)	
Mulch Processing (361-4)	Used Cooking Oil & Yellow Grease (361-8)	
Municipal Solid Waste Processing (362-2)		

10. NAME(S) OF ALL MUNICIPALITIES IN SERVICE AREA: Various	11. SOLID WASTE ACCEPTED: Identify facility capacity and throughput of each waste type, as applicable	
	Construction and Demolition Debris No change in approved design capacity of 100 truck round trips per day is proposed. Truck count is inclusive of C&D deliveries, mining traffic and leachate collection trucks.	
FOR MODIFICATION APPLICATION ONLY		
12. DOES THE MODIFICATION APPLICATION INVOLVE (CI	HECK ALL APPLICABLE BOXES): eptance rate increase Facility expansion (including landfill)	
SKIP QUESTION #13 AND #14 IF APPLYING FOR RENEWA	LONLY	
13. APPLICATION DESCRIPTION	14. FACILITY SIZE	
Include a brief description of new or modification request		
	b Total site area (acres) 90.4	
The facility is an existing, permitted construction and demolitic debris (C&D) disposal facility located in Rensselaer, New York to plans to modify the existing disposal footprint by incorporating mechanically stabilized earthen (MSE) berm on the north side the site. The proposed modification decreases the C&D disposarea footprint by approximately 1.2 acres and is not expected result in any adverse impacts at the facility. The modification submitted concurrently with the permit renewal application.	For modification application ONLY c. Associated facility size change (acres) -1.2 For Landfill ONLY d. Facility size ultimately planned (acres) 62.1	
	f. Ultimate facility height above ground level (feet)	
16. REAL PROPERTY OWNER CERTIFICATION ✓ Corporation Partnership Sole Proprietorship	ariance and cite specific provision(s) here: Municipality/other government entity Other: Cacility is located or the proposed or modified facility will be located and am signing	
Or if signing in a representative capacity: I hereby attest that I am the (indi	icate title or capacity) <u>Division Vice President</u> , an authorized representative sed or modified facility will be located). I am duly authorized on behalf of said owner to	
approval. I also grant permission for the department to access the above-desc but not limited to 7:00 am to 7:00 pm Monday through Friday, and additiona circumstances) without the property owner, applicant or other representative or fenced with an unlocked gate, department staff may still enter the property	operate the facility described in the application in accordance with a final DEC permit or cribed real property, including any adjacent areas, during all reasonable times (including all facility hours of operation, and as appropriate during emergencies and similar exigent of the property owner or facility present. If the property is posted with "keep out" signs y. Department staff may traverse the property, inspect the facility, take measurements, and photograph the property, and conduct other activities necessary to evaluate the ther applicable statutory or regulatory requirements.	
I am aware that any false statement made herein is punishable as a Class A mise		
	MARK CERESA Date: 1/13/2022	
Title or Representation if signing in a representative capacity:	Jivision vice President	
statements and information provided on this application and all attachments	gally responsible party for this application as presented to NYSDEC. I affirm that the	
	red, arising out of the project described herein and agree to indemnify and hold from the said project.	