

New York State Department of Environmental Conservation
Division of Materials Management
Albany, New York 12233-7253

2019
REGISTERED OR PERMITTED FACILITY ANNUAL REPORT
COMPOSTING
(DO NOT USE THIS FORM FOR BIOSOLIDS COMPOSTING)
6 NYCRR Part 361-3.2

This annual report is for the year of operation from January 01, 2019 to December 31, 2019

Annual Report Form Due: No Later than March 1, 2020

This form may be used for all composting facilities under section 361-3.2 of the Part 360 series except for biosolids composting. Biosolids composting requires the submission of a different annual report form. Forms for all solid waste management facilities can be found at <http://www.dec.ny.gov/chemical/52706.html>. If you have any questions on this form, please e-mail organicrecycling@dec.ny.gov.

Failure to provide the required information requested is a violation of Environmental Conservation Law. Timely submission of a properly completed form to the Department's Regional Office that has jurisdiction over your facility and to the Department's Central Office is required to meet the Annual Report requirements of 6 NYCRR Part 360 series.

Attach additional sheets if space on the pages is insufficient or supplementary information is required or appropriate.

Bethlehem (T) Food Scraps Composting

FACILITY NAME: Town of Bethlehem Compost Facility

SW FACILITY ACTIVITY NUMBER(S): (Ex. 02P20099) 01Y05 & 01C06

COUNTY WHERE FACILITY IS LOCATED: Albany

DEC USE ONLY

Region: 4 SWIMS: X
 MATRIX: X

Date Reviewed:
Reviewed By:
Data Entered: X

**COMPOST FACILITY ANNUAL REPORT
SECTION 1 – FACILITY INFORMATION**

FACILITY INFORMATION			
FACILITY NAME: Town of Bethlehem Compost Facility			
FACILITY LOCATION ADDRESS: 1244 Feura Bush Rd	FACILITY CITY: Selkirk	STATE: NY	ZIP CODE: 12158
FACILITY TOWN: Bethlehem	FACILITY COUNTY: Albany	FACILITY PHONE NUMBER: 518-439-4955 ext 1598	
NYSDEC REGION #: 4			
FACILITY CONTACT: Dan Lilkas-Rain		CONTACT PHONE NUMBER: 518-439-4955 ext 1510	
CONTACT EMAIL ADDRESS: drain@townofbethlehem.org			
OWNER INFORMATION			
OWNER NAME: Town of Bethlehem	OWNER PHONE NUMBER: 518-439-4955		
OWNER ADDRESS: 74 Elm Avenue East	OWNER CITY: Selkirk	STATE: NY	ZIP CODE: 12158
OWNER CONTACT: Marc Dorsey	OWNER CONTACT EMAIL ADDRESS: mdorsey@townofbethlehem.org		
OPERATOR INFORMATION			
OPERATOR NAME: <input checked="" type="checkbox"/> Same as owner			
PREFERENCES			
Preferred address to receive correspondence: <input type="radio"/> Facility location address <input type="radio"/> Owner address <input checked="" type="radio"/> Other (provide): Contact address: Dan Lilkas-Rain, Town of Bethlehem, 261 Elm Avenue, Delmar, NY 12054			
Preferred email address: <input checked="" type="radio"/> Facility Contact <input type="radio"/> Owner Contact <input type="radio"/> Other (provide):			
Preferred individual to receive correspondence: <input checked="" type="radio"/> Facility Contact <input type="radio"/> Owner <input type="radio"/> Owner Contact <input type="radio"/> Other (provide):			
Did you operate in 2019? <input checked="" type="radio"/> Yes; Complete this form. <input type="radio"/> No; Complete and submit Sections 1, 12 and 13. If you no longer plan to operate and wish to relinquish your permit/registration associated with this solid waste management activity, please notify the regional office of your intent. See attachment for Regional Office addresses and contacts.			

SECTION 2 – QUANTITY OF MATERIAL RECEIVED

Please report quantities received from January 01, 2019 to December 31, 2019

	Inputs	Quantity	Unit	Source(s)
YARD WASTE	Leaves only	18774	Cubic Yards	
	Grass Clippings	the brush figure is	Choose Units	
	Mixture of Grass and Leaves	mixed yard waste	Choose Units	
	Brush (Small branches and limbs, <4 inch diameter)	50380	Cubic Yards	
SSO	Source Separated Organics (Food scraps, soiled paper products, etc.)	12-15 (est.)	Cubic Yards	
	Food Processing Waste (brewery grains, grape pomace, etc.)		Choose Units	
OTHER	Crop Residues (Corn stalks, etc.)		Choose Units	
	Manure (including bedding)		Choose Units	
	Sawdust/Shavings		Choose Units	
	Animal Carcasses (road-kill, animal mortalities)		Choose Units	
	Paper Mill Residuals		Choose Units	
	Digestate		Choose Units	
	Other: _____		Choose Units	
BULKING AGENT	Woodchips		Choose Units	
	Sawdust		Choose Units	
	Other: _____		Choose Units	

SECTION 9 – UNAUTHORIZED WASTE

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

Yes No

If yes, give information below for each incident (attach additional sheets if necessary):

SECTION 10 – PROBLEMS/COMPLAINTS

Describe any operational problems or neighbor complaints arising from the composting operation and include any methods used to remedy the situations. This should include odor complaints, marketing difficulties, major equipment failure, etc.

We did not receive any odor complaints, or other neighbor complaints. Operational difficulties include a lack of space for our composting operations, as we continue to take in additional leaves and/or brush annually than on average in previous years, due to expanding town population, more residents taking advantage of our yard waste collection program, and aging trees producing more foliage. We lack adequate space to lay out the leaves in small enough rows for scattng with our existing, aging scat machine, so we're looking at longer processing time and compounding space issues.

SECTION 11 – QUESTIONS

Please identify any questions or concerns that you would like the Department to answer or consider:

SECTION 12 – FOOD DONATION & FOOD SCRAPS RECYCLING LAW

If you are registered or permitted to compost food scraps please complete the following. For all other operations that are interested in processing food scraps, please contact your DEC regional office to determine what is required.

In 2019, New York State passed the Food Donation & Food Scraps Recycling law. Effective January 1, 2022, large generators of food scraps (defined as generating an annual average of two tons per week or more) must donate excess food and recycle all remaining food scraps if they are within 25 miles of an organics recycler (composting facility, anaerobic digester, etc.). Examples of large generators include: large restaurants, grocery stores, hotels, colleges, etc. For more information visit: <https://www.dec.ny.gov/chemical/114499.html>

Contact Information

Under this legislation, DEC is responsible for providing a list of organics recyclers (compost facilities, anaerobic digesters, etc.) to large generators so they can determine available food scraps recycling opportunities in their area.

You will be included in this listing if you hold a permit or registration for the composting of source separated organics or food scraps. This will educate both large generators and haulers of food scraps that you are an available composter in their area.

Please provide the following information to include in the listing.

Name of Business: Town of Bethlehem Compost Facility

Business Phone Number: 518-439-4955 ext. 1510

Business Email: recycle@townofbethlehem.org

Business Website: townofbethlehem.org/125/Compost-Facility

I would like to opt out of DEC listing my facility as an available food scraps recycler for large generators as it relates to the Food Donation and Food Scraps Recycling law.

Assessing Your Food Scraps Recycling Capacity

DEC is responsible for assessing available food scraps recycling capacity across New York State. Information from your operation will help us do this. Please complete the following section to calculate the amount of excess food scraps your operation will have the capability to process in **2022**. Please stay consistent with units (wet tons or cubic yards).

- A. Amount of foods scraps projected to be processed in 2020: Up to 1,000 Cubic Yards
- B. Amount of foods scraps projected to be processed in 2022: Up to 5,000 Choose Unit

* Note: You will not be required to process this quantity of material, these estimates will only be used to assist DEC in capacity planning across the state in preparation for the Food Donation and Food Scraps Recycling law effective January 1, 2022.

Questions?

DEC USE ONLY
Excess Capacity:
<u>4,000 yd3</u>

SECTION 13 - CERTIFICATION

The Owner or Operator must sign, date and submit one completed form with an original signature to the appropriate Regional Office (See attachment for Regional Office addresses and Contacts.)

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

**NYS Department of Environmental Conservation
Bureau of Waste Reduction and Recycling – Annual Report
625 Broadway – 9th Floor
Albany, New York 12233-7253**

Phone: 518-402-8706

Fax 518-402-9024

Email address: organicrecycling@dec.ny.gov

I certify, under penalty of law, that the information that will be used to determine compliance with the requirements in Subpart 361-3 of 6 NYCRR Part 361 has been prepared under my direction and supervision in accordance with the system designed to ensure that qualified personnel properly gather and evaluate this information. I am aware that false statement made herein are punishable pursuant to section 210.45 of the penal law.


Signature

02-28-2020
Date

Marc E Dorsey
Name (Print)

Highway Superintendent
Title (Print)

mdorsey@townofbethlehem.org
Email (Print)

74 Elm Avenue East
Address

Selkirk
City

NY, 12158
State and Zip

518 439 4955 ext 1598
Phone Number

ATTACHMENTS: NO YES (IF YES, LIST ATTACHMENTS)

- _____
- _____
- _____