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

2020

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, 2020 to December 31, 2020

#### Annual Report Form Due: No Later than March 1, 2021

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 <a href="http://www.dec.ny.gov/chemical/52706.html">http://www.dec.ny.gov/chemical/52706.html</a>. 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.

FACILITY NAME: Long Island Compost Farm #50
SW FACILITY ACTIVITY NUMBER(S): (Ex. 02P20099)
COUNTY WHERE FACILITY IS LOCATED: Suffolk

DEC USE ONLY

Region:

SWIMS:

MATRIX:

Date Reviewed:

Reviewed By:

Data Entered:

# COMPOST FACILITY ANNUAL REPORT SECTION 1 – FACILITY INFORMATION

FACILITY INFORMATION				
FACILITY NAME:				
Long Island Compost Farm	#50			
FACILITY LOCATION ADDRESS:	FACILITY CITY:		STATE:	ZIP CODE:
4218 Middle Country Road	Calverton		NY	11901
FACILITY TOWN:	FACILITY COUNTY:	FACIL	ITY PHON	E NUMBER:
Riverhead	Suffolk	N/A	\	
NYSDEC REGION #: 1				
FACILITY CONTACT:	CONTACT PHONE NUMBER:			
Arnold Vigliotti	516-334-6600			
CONTACT EMAIL ADDRESS: avigliotti	@licompost.com			
	OWNER INFORMATION			
OWNER NAME:	OWNER PHONE NUMBER:			
Long Island Compost Corp.	516-334-6600			<b>,</b>
OWNER ADDRESS:	OWNER CITY:		STATE:	ZIP CODE:
100 Urban Avenue	Westbury	-00	NY	11590
OWNER CONTACT:	OWNER CONTACT EMAIL ADDRE			
Charles Vigliotti cvigliotti@licompost.com				
OPERATOR NAME:	OPERATOR INFORMATION			
Same as owner				
	PREFERENCES			
Preferred address to receive correspondence: Facility location address  Other (provide):  Other (provide):				
Preferred email address: Facility Contact	Owner Contact			-
Other (provide):				
Preferred individual to receive correspondence: Facility Contact  Other (provide):  Owner Contact				
Did you operate in 2020? • Yes; Complete this form.  No; Complete and submit Sections 1, 12 and 13. If you no longer plan to operate and with the religious participation appropriate the regional participation appr				
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 <u>January 01, 2020</u> to <u>December 31, 2020</u>

See Attached

	Occ	ATTACH		
	Inputs	Quantity	Unit	Source(s)
	Leaves only		Choose Units	
VASTE	Grass Clippings		Choose Units	
YARD WASTE	Mixture of Grass and Leaves		Choose Units	
	Brush (Small branches and limbs, <4 inch diameter)		Choose Units	
0	Source Separated Organics (Food scraps, soiled paper products, etc.)		Choose Units	
SSO	Food Processing Waste (brewery grains, grape pomace, etc.)		Choose Units	
	Crop Residues (Corn stalks, etc.)		Choose Units	
	Manure (including bedding)		Choose Units	
	Sawdust/Shavings		Choose Units	
OTHER	Animal Carcasses (road-kill, animal mortalities)		Choose Units	
	Paper Mill Residuals		Choose Units	
	Digestate		Choose Units	
	Other:		Choose Units	
TNE	Woodchips		Choose Units	
BULKING AGENT	Sawdust		Choose Units	
BULKIR	Other:		Choose Units	

Attachment – Section 2 – Quantity of Material Received January 1, 2020 to December 31, 2020

Long Island Compost Farm #50 4218 Middle Country Road Calverton, NY 11933

**Total Volume Received: 11,558.30 tons** 

Total Volume includes all compostable grass clippings and compostable sourceseparated organic waste (SSOW).

Plus all Bulking Agent including: Ground brush and wood Ground thatch Ground mixed leaves and wood

#### Source:

All material is first processed, mixed and bulked at:

Vigliotti Recycling Corp. Yard Waste Transfer Facility 100 Urban Avenue, Westbury, NY 11590 DEC Permit No. 1-2822-00464/00002

and

Great Gardens, LLC Yard Waste Transfer Facility 445 Horseblock Road, Yaphank, NY 11980 DEC Permit No. 1-4722-03647/00001

## **SECTION 3 – COMPOST PRODUCTION**

WHAT IS THE PROCESS DETENTION TIME? Note: Total time material is processed, not Including storage time	Varies - up to 180	days
COMPOST PRODUCED DURING THE YEAR:	12,033.76	Tons
compost distributed during the YEAR:  All material is marke Long Island Compost's	eted throug end produ	Tons h ctprogram.
QUANTITY CURRENTLY STOCKPILED: Note: Finished product stockpiled	0	Tons
AGE OF OLDEST PRODUCT ON SITE:	6	months

### SECTION 4 - COMPOST DISTRIBUTION

Quantity Distributed Cubic Yards	Use of Compost (landscaping, agriculture, highway, onsite, bagged, etc.)
	This material is incorporated with all other
	compost product, and distributed over hundreds
	of locations throughout the metropolitan area.

# If PERMITTED SSO composting facility, continue to Section #5 SSO – Source Separated Organics

## ALL OTHER COMPOSTING FACILITIES, continue to Section #9

# SECTION 5 – PATHOGEN AND VECTOR ATTRACTION REDUCTION For permitted SSO composting facilities only. Check one method for each:

## Pathogen Reduction 361-3.7(a)

Windrow Composting	
Aerated Static Pile Composting	
In-vessel Composting	
Other (specify):	
	Vector Attraction Reduction 361-3.7(b)
38 % Volatile Solids Reduction	
SOUR	
Aerobic Process 14 days, ≥40C	, ≥45 C avg.

#### **IMPORTANT NOTE!**

Attach operating and monitoring data to show compliance with methods chosen. Temperature data records should indicate when a pile was created, pile was moved, additional material was added and/or pile was turned.

SECTION 6 - FINISHED COMPOST ANALYSIS

For permitted SSOW composting facilities only. Please attach sampling analyses and laboratory reports as required under Part 360 or your permit. Copies of original laboratory results must be attached. All results, except pH and Total Solids, must be on a dry weight basis. See 361-3.9 Table 6 for pollutant limits and Table 5 for annual product testing frequency 361-3.9 Table 5.

### Summarize data in table below or attached document. Print additional pages as needed.

Analysis Date ====>	Max. Conc. (mg/kg)
Arsenic (mg/kg)	41
Cadmium (mg/kg)	10
Chromium (mg/kg)	1,000
Copper (mg/kg)	1,500
Lead (mg/kg)	300
Mercury (mg/kg)	10
Molybdenum (mg/kg)	40
Nickel (mg/kg)	200
Selenium (mg/kg)	100
Zinc (mg/kg)	2,500
TKN (mg/kg)	
Ammonia Nitrogen (mg/kg)	
Nitrate (mg/kg)	
Total Phosphorus (mg/kg)	
Total Potassium (mg/kg)	
pH (s.u.)	
Total Solids( %)	
Total Volatile Solids (%)	
Fecal Coliform (MPN/g)	<1,000 MPN/g
Salmonella (MPN/4g)	<3MPN/4g
Other	

## SECTION 7 -SAMPLE MANAGEMENT PLAN



For permitted SSO composting facilities only. Describe the number, frequency and location of samples taken. Include a diagram showing all sampling locations.

SECTION 8 – ATTACHMENTS (IF REQUIRED)

N/A

Permitted SSO composting facilities, please attach:

- Temperature monitoring and detention time data.
- Sample analyses laboratory reports.
- Any additional reporting requirements.

Do you have a variance to the Part 360 permit requirements? O Yes	ONo
If yes, please describe:	

### **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.
No problems or complaints.
SECTION 11 - QUESTIONS
Please identify any questions or concerns that you would like the Department to answer or consider: N/A

#### 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: \_\_\_\_\_ Business Phone Number: Business Email: Business Website: ✓ 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). Choose Unit A. Amount of foods scraps projected to be processed in 2021: Choose Unit B. Amount of foods scraps projected to be processed in 2022: \* 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. DEC USE ONLY Questions? Excess Capacity:

#### **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 – 9<sup>th</sup> 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.

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Man Vi Muhaman Signature	2.24.2021 Date
Charles Vigliotti	President
Name (Print)	Title (Print)
cvigliotti@licompost.co	m
Email (F	Print)
100 Urban Avenue	Westbury
Address	City
New York 11590	<sub>(</sub> 516 <sub>)</sub> 334 <sub>-</sub> 6600
State and Zip	Phone Number
	•

AT	FACHMENTS: $igcolon \mathbf{O}$ YES (IF YES, LIST ATTACHMENTS)
•	Section 2 - Quantity of Material Received
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# New York State Department of Environmental Conservation Division of Materials Management Bureau of Waste Reduction and Recycling

#### MATERIAL MANAGEMENT PROGRAM CONTACTS

#### **CENTRAL OFFICE**

Bureau of Waste Reduction and Recycling 625 Broadway Albany, NY 12233-7253

Phone: (518) 402-8706

For Submission of Organics Recycling Annual Reports only:

Fax: (518) 402-9024

Email: organicrecycling@dec.ny.gov

#### **REGIONAL OFFICE ADDRESS & LEAD CONTACT PERSON**

#### REGION 1 (Nassau, Suffolk)

Syed Rahman/David Gibb SUNY @ Stony Brook 50 Circle Road Stony Brook, NY 11790 Phone: (631) 444-0375 SWMFannualreportR1@dec.ny.gov

## REGION 2 (Bronx, Kings, New York, Queens, Richmond)

Joseph O'Connell 47-40 21st Street Long Island City, NY 11101-5407 Phone: (718) 482-4896 SWMFannualreportR2@dec.ny.gov

# REGION 3 (Dutchess, Orange, Putnam, Rockland, Sullivan, Ulster, Westchester)

James Lansing 21 South Putt Corners Road New Paltz, NY 12561 Phone: (845) 256-3123 SWMFannualreportR3@dec.ny.gov

#### REGION 4 (Albany, Columbia, Delaware, Greene, Montgomery, Otsego, Rensselaer, Schenectady, Schoharie)

Victoria Schmitt 1130 North Westcott Road Schenectady, NY 12306 Phone: (518) 357-2243 SWMFannualreportR4@dec.ny.gov

# REGION 5 (Clinton, Essex, Franklin, Fulton, Hamilton, Saratoga, Warren, Washington)

Jessie Sangster 1115 State Route 86, PO Box 296 Ray Brook, NY 12977 Phone: (518) 897-1266 SWMFannualreportR5@dec.ny.gov

# REGION 6 (Herkimer, Jefferson, Lewis, Oneida, St. Lawrence)

Gary McCullouch
317 Washington Street
Watertown, NY 13601
Phone: (315) 785-2513
SWMEannualtenorte6@dec.pv

SWMFannualreportR6@dec.ny.gov

#### REGION 7 (Broome, Cayuga, Chenango, Cortland, Madison, Onondaga, Oswego, Tioga, Tompkins)

Thomas Annal 615 Erie Boulevard West Syracuse, NY 13204 Phone: (315) 426-7419 SWMFannualreportR7@dec.ny.gov

#### REGION 8 (Chemung, Genesee, Livingston, Monroe, Ontario, Orleans, Schuyler, Seneca, Steuben, Wayne, Yates)

Greg MacLean 6274 East Avon-Lima Road Avon, NY 14414 Phone: (585) 226-5411 SWMFannualreportR8@dec.ny.gov

# REGION 9 (Allegany, Cattaraugus, Chautauqua, Erie, Niagara, Wyoming)

Peter Grasso 270 Michigan Avenue Buffalo, NY 14203 Phone: (716) 851-7220

SWMFannualreportR9@dec.ny.gov

September 2020