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 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.

FACILITY NAME: Duffy Layton Contracting, Inc.
SW FACILITY ACTIVITY NUMBER(S): (Ex. 02P20099) 14P101
COUNTY WHERE FACILITY IS LOCATED: Dutchess

DEC USE ONLY

Region:

SWIMS:

MATRIX:

Date Reviewed:

Reviewed By:

Data Entered:

COMPOST FACILITY ANNUAL REPORT SECTION 1 – FACILITY INFORMATION

	FACILITY INFORMATION			
FACILITY NAME:				
Duffy Layton Contracting In	C.			
FACILITY LOCATION ADDRESS:	FACILITY CITY:		STATE:	ZIP CODE:
12 Hunns Lake Road	Stanfordville		NY	12581
FACILITY TOWN:	FACILITY COUNTY:	FACII	LITY PHON	IE NUMBER:
Stanfordville	Dutchess	845	5-868-	7427
NYSDEC REGION #: 3				
FACILITY CONTACT:	CONTACT PHONE NUMBER:			
	845-868-7427			
CONTACT EMAIL ADDRESS: dlayton(@duffylayton.com		_	
	OWNER INFORMATION			
OWNER NAME:	OWNER PHONE NUMBER:			
Myron LAyton	845-868-7427		07475	710 0005
OWNER ADDRESS: PO Box F	OWNER CITY: Stanfordville		STATE:	ZIP CODE : 12581
OWNER CONTACT:	OWNER CONTACT EMAIL ADDRE	SS:	1,	1
dlayton@duffylayton.com				
	OPERATOR INFORMATION			
OPERATOR NAME: ✓ Same as owner				
	PREFERENCES			
Preferred address to receive correspondence	Facility location address	\bigcirc	wner address	•
Other (provide): PO Box F, Stanford	ville, NY 12581			
Preferred email address: Facility Contact				
Other (provide):				
Preferred individual to receive correspondent Other (provide):	Ce: Facility Contact Owne	or	Owne	r Contact
Did you operate in 2020? Yes; Comple No; Comple wish to relinquish your permit/registration assoffice of your intent. See attachment for Region	lete and submit Sections 1, 12 and 1 sociated with this solid waste manage			

SECTION 2 – QUANTITY OF MATERIAL RECEIVED

Please report quantities received from January 01, 2020 to December 31, 2020

	Inputs	Quantity	Unit	Source(s)
	Leaves only	9920	Cubic Yards	Town of Poughkeepsie Highway Dept.
VASTE	Grass Clippings		Choose Units	
YARD WASTE	Mixture of Grass and Leaves		Choose Units	
	Brush (Small branches and limbs, <4 inch diameter)	820	Cubic Yards	Local Landscapers and Homeowners
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)	8580	Cubic Yards	Local Horse and Dairy Farms
	Sawdust/Shavings		Choose Units	
OTHER	Animal Carcasses (road-kill, animal mortalities)		Choose Units	
	Paper Mill Residuals		Choose Units	
	Digestate		Choose Units	
	Other: Alum Sludge	3970	Tons	
TNE	Woodchips	3400	Cubic Yards	Bob Wilder, Solar Farm
BULKING AGENT	Sawdust		Choose Units	
BULKII	Other:		Tons	

SECTION 3 – COMPOST PRODUCTION

WHAT IS THE PROCESS DETENTION TIME? Note: Total time material is processed, not Including storage time	120	days
COMPOST PRODUCED DURING THE YEAR:	8282.00	Cubic Yards
COMPOST DISTRIBUTED DURING THE YEAR:	7900.00	Cubic Yards
QUANTITY CURRENTLY STOCKPILED: Note: Finished product stockpiled	4780.00	Cubic Yards
AGE OF OLDEST PRODUCT ON SITE:	13	_ months

SECTION 4 - COMPOST DISTRIBUTION

Quantity Distributed Cubic Yards	Use of Compost (landscaping, agriculture, highway, onsite, bagged, etc.)
280	Agriculture
7620.00	Landscape

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	
O In-vessel Composting	
Other (specify):	
	Vector Attraction Reduction 361-3.7(b)
38 % Volatile Solids Reduction	
SOUR	
Aerobic Process 14 days, ≥400	c, ≥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)

- 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? Yes	○ No
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.
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.

available composed 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 fit relates to the Food Donation and Food Scraps Recycling law.	for large generators as
Assessing Your Food Scraps Recycling Capacity	
DEC is responsible for assessing available food scraps recycling capacity across New from your operation will help us do this. Please complete the following section to calculatexcess food scraps your operation will have the capability to process in 2022. Please states (wet tons or cubic yards).	ate the amount of
A. Amount of foods scraps projected to be processed in 2021:	Choose Unit
B. Amount of foods scraps projected to be processed in 2022:	01 11 11
* Note: You will not be required to process this quantity of material, these estimates will DEC in capacity planning across the state in preparation for the Food Donation and Foolaw effective January 1, 2022.	-
Questions?	DEC USE ONLY
	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 – 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	1/20/2 (Date	
Myron Layton	President	
Name (Print)	Title (Print)	
dlayton@duffylayton	.com	
Er	mail (Print)	
PO Box F	Stanfordville	
Address	City	
NY 12581	₍ 845 ₎ 868 ₋ 7427	
State and Zip	Phone Number	
	ATTACHMENTS)	