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: Town of Bethlehem Compost Facility		
SW FACILITY ACTIVITY NUMBER(S): (Ex. 02P20099)		
COUNTY WHERE FACILITY IS LOCATED: Albany		

DEC USE ONLY

Region:

SWIMS:

MATRIX:

Date Reviewed:

Reviewed By:

Data Entered:

COMPOST FACILITY ANNUAL REPORT SECTION 1 – FACILITY INFORMATION

	FACILITY INFORMATION			
FACILITY NAME:				
Town of Bethlehem Compo	st Facility			
FACILITY LOCATION ADDRESS:	FACILITY CITY:		STATE:	ZIP CODE:
1244 Feura Bush Rd	Selkirk		NY	12158
FACILITY TOWN:	FACILITY COUNTY;	FACI	LITY PHON	IE NUMBER:
Bethlehem	Albany	518	-439-49	955 ext 1598
NYSDEC REGION #: 4				
FACILITY CONTACT:				
	CONTACT PHONE NUMBER:	10		
	518-439-4955 ext 15	10		
CONTACT EMAIL ADDRESS: drain@t	ownofbethlehem.org			
	OWNER INFORMATION			
OWNER NAME:	OWNER PHONE NUMBER:			
Town of Bethlehem	518-439-4955			
OWNER ADDRESS: 74 Elm Avenue East	OWNER CITY: Selkirk		STATE: NY	ZIP CODE: 12158
WNER CONTACT: OWNER CONTACT EMAIL ADDRESS:				
Marc Dorsey mdorsey@townofbethlehem.org				
	OPERATOR INFORMATION			•
OPERATOR NAME: Same as owner				
	PREFERENCES			
Preferred address to receive correspondence: Other (provide): Dan Lilkas-Rain, Tow	○Facility location address on of Bethlehem, 261 Elm	_	wner address ue. Deln	nar. NY 12054
Preferred email address: Facility Contact	Owner Contact			
Other (provide):				
Preferred individual to receive correspondence Oother (provide):	e: Facility Contact Own	ner	Owner	Contact
Did you operate in 2020? Yes; Complet No; Complet wish to relinquish your permit/registration asset	te and submit Sections 1, 12 and	13. If yo	u no longer	plan to operate and
office of your intent. See attachment for Regio	nal Office addresses and contacts.	ement ac	uvity, piease	е пошу ине гедіопаі

SECTION 2 - QUANTITY OF MATERIAL RECEIVED

Please report quantities received from <u>January 01, 2020</u> to <u>December 31, 2020</u>

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	Inputs	Quantity	Unit	Source(s)
	Leaves only	18039	Cubic Yards	
YARD WASTE	Grass Clippings	The brush figure below	Choose Units	
	Mixture of Grass and Leaves	is mixed yard waste	Choose Units	
	Brush (Small branches and limbs, <4 inch diameter)	69020	Cubic Yards	
0	Source Separated Organics (Food scraps, soiled paper products, etc.)	50-60 (estimated)	Cubic Yards	
SSO	Food Processing Waste (brewery grains, grape pomace, etc.)		Choose Units	
	Crop Residues (Corn stalks, etc.)		Choose Units	
2	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	
BULKING AGENT	Woodchips	420	Cubic Yards	
	Sawdust		Choose Units	
BULKI	Other:		Choose Units	

SECTION 3 - COMPOST PRODUCTION

WHAT IS THE PROCESS DETENTION TIME? Note: Total time material is processed, not Including storage time	60-180+	days
COMPOST PRODUCED DURING THE YEAR:	approximately 27,118	Cubic Yards
COMPOST DISTRIBUTED DURING THE YEAR:	арргох. 11,685	Cubic Yards
QUANTITY CURRENTLY STOCKPILED: Note: Finished product stockpiled	7,716	Cubic Yards
AGE OF OLDEST PRODUCT ON SITE:	approx. 24	_ months

SECTION 4 – COMPOST DISTRIBUTION

Quantity Distributed Cubic Yards	Use of Compost (landscaping, agriculture, highway, onsite, bagged, etc.)	
9,426	Bulk sales for landscaping/topsoil/agriculture/erosion contro	
1,084	Individual resident/non-resident sales for landscaping/compost mi	
approx. 1,175	Shoveling by residents for landscaping/compost mix/gardening	

SECTION 9 – UNAUTHORIZED WASTE

riod?

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 remain with a lack of space for our composting operations, as we continue to take in additional yard waste annually than average previous years. 2020 was especially pointed in this regard with not only extra yard waste from residents home during the pandemic lockdown, but also the windstorm/tornado in early October that brought down a huge amount of trees and limbs.

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: <u>518-439-4955</u> ext 1510 Business Email: drain@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 2021: up to 1,000 Cubic Yards B. Amount of foods scraps projected to be processed in 2022: up to 3,000 **Cubic Yards** * 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 – 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.

Name (Print) Title (Print) mdorsey@townofbethlehem.org Email (Print) 74 Elm Avenue East Address Selkirk City	John Il	2-26-21
Name (Print) Title (Print) mdorsey@townofbethlehem.org Email (Print) 74 Elm Avenue East Address City NY, 12158 518 439 4955 ext 1	Signature	Date
mdorsey@townofbethlehem.org Email (Print) 74 Elm Avenue East Selkirk Address City NY, 12158 518 439 4955 ext 1	Marc E Dorsey	Highway Superintendent
74 Elm Avenue East Selkirk Address City NY, 12158 518 439 4955 ext 1	Name (Print)	Title (Print)
74 Elm Avenue East Selkirk Address City NY, 12158 518 439 4955 ext 1	mdorsey@townofbe	thlehem.org
Address City NY, 12158 518 439 4955 ext 1	E	mail (Print)
NY, 12158 518 439 4955 ext 1	74 Elm Avenue East	Selkirk
(_) -	Address	City
State and Zip Phone Number	NY, 12158	518 439 4955 ext 1598
-	State and Zip	Phone Number
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	HMENTS: WNO YES (IF YES, LIST	'ATTACHMENTS)
HMENTS: NO YES (IF YES, LIST ATTACHMENTS)		
CHMENTS: WNO YES (IF YES, LIST ATTACHMENTS)		
HMENTS: NO YES (IF YES, LIST ATTACHMENTS)	*	
CHMENTS: NO YES (IF YES, LIST ATTACHMENTS)		