LAND CLEARING DEBRIS LANDFILL ANNUAL REPORT

Submit the Annual Report no later than March 1, 2018. This

annual report is for the year of operation from January 01, 2017 to December 31, 2017

SECTION 1 – FACILITY INFORMATION

	FACILITY	INFORMATION				
FACILITY NAME:						
John K. Triller						
FACILITY LOCATION ADDRESS:	FACILITY CITY:		STAT	ΓE:	ZIP CODE:	
46 Elm St	Champlain			NY	,	12919
FACILITY TOWN:	FACILITY	FACILITY COUNTY:		FACILITY PHONE NUMBER:		IE NUMBER:
Champlain	Clinton		5	518-572-0989		-0989
FACILITY NYS PLANNING UNIT: (A list of N)	/S Planning Un	its can be found at	the end of this	report).	NY:	SDEC GION #: 510
360 REGISTRATION DATE ISSUED: July 2, 2012		NYS DEC A NUMBER: 10d18	CTIVITY CO	DE OR RI	EGIS	TRATION
FACILITY CONTACT: John K. Triller	public CONTACT PHONE NUMBER: 518-572-0989		CONTACT FAX NUMBER: 518-298-4090			
CONTACT EMAIL ADDRESS:						
	OWNER	INFORMATION				
OWNER NAME: John K. Triller				OWNER FAX NUMBER: 518-298-4090		
OWNER ADDRESS: 46 Elm St	OWNER CITY: Champlain		,	STAT	ΓE:	ZIP CODE: 12919Same
OWNER CONTACT: Same	OWNER CONTACT EMAIL ADDRESS: Same					
	OPERATO	RINFORMATIO	N			
OPERATOR NAME: same as owner			□ public □ private			
		FERENCES				
Preferred address to receive correspondence Other (provide):	e: Facility lo	ocation address		Owner ac	ddress	3
Preferred email address:	■ 0	wner Contact				
Preferred individual to receive correspondent Other (provide):	ce: Facili	ity Contact	Owner Co	ontact		
Did you operate in 2017? Yes; Comple	te this form.		7 16	lancal-	. 4	operate and wish to

relinquish your permit/registration associated with this solid waste management activity, also complete the "Inactive Solid

Waste Management Facility or Activity Notification Form" located at: http://www.dec.ny.gov/chemical/52706.html .

SECTION 7 - SIGNATURE AND DATE BY OWNER OR OPERATOR

Owner or Operator must sign, date and submit the completed form by email or mail to the appropriate Regional Office (See attachment for Regional Office email & mailing addresses and Solid Waste Contacts.)

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

New York State Department of Environmental Conservation
Division of Materials Management
Bureau of Permitting and Planning
625 Broadway
Albany, New York 12233-7260
Fax 518-402-9041

Email address: SWMFannualreport@dec.ny.gov

I hereby affirm under penalty of perjury that information provided on this form and attached statements and exhibits was prepared by me or under my supervision and direction and is true to the best of my knowledge and belief, and that I have the authority to sign this report form pursuant to 6 NYCRR Part 360. I am aware that any false statement made herein is punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

	3/01/18
Signature	Date
JOHN K. TRICURN Name (Print or Type)	Owner/Operator Title (Print or Type)
Name (Fint of Type)	Title (Fillit of Type)
trooperkt@aol.com	
Email (Print or	· Type)
46 Elm St	Champlain
Address	City
NY, 12919 State and Zip	518 572 0989 Phone Number

ATTACHMENTS: YES NO (Please check appropriate line)

Reprinted (12/17)

John K. Triller 46 Elm Street Champlain, NY 12919 (518) 572-0989

NYDEC Division of Materials Management Albany, NY 12233

Gentlemen:

This land fill has become inactive due to the misrepresentation of my property by DEC Region 5, particularly Erin Donhauser, Environmental Analyst1, Division of Environmental Permits, Region 5.

On June 6, 2016 I telephoned Region 5 DEC Division of Materials and requested a permit to install 200' of 4' diameter pipe in my landfill site to pipe a Class "D" Stream. I was referred to Ms. Donhauser, Division of Environmental Permits as it was not within their responsibilities. I again inquired as to placing a pipe in the lowest portion of the property along a Class "D" stream to allowing filling the entire site of 1.84 acres. I was advised by Donhauser I did not need a DEC permit to place the pipe. I requested written acknowledgement from her, before proceeding with the installation of the pipe. She furthered her conversation with a written response (attached) stating "she did not see any mapped protected streams on the parcel" acknowledging that "a class "D" Stream did not require a Protection of Waters permit from the Department". I had already spoken to the Material Management Division who made the referral to Ms. Donhauser, stating that placing the pipe was not within their division. I requested the information from Donhauser in writing to protect myself and the installing contractor should the pipe installation be contested at a later date. At no time was I advised by anyone at Region 5 that DEC was "NOT" the controlling regulatory agency for streams in NY State and that I needed to apply to the US Army Corp of Engineers.

I coordinated the installation with the permission and cooperation of the Town of Champlain Highway Department Supervisor. He allowed me to attach my pipe to a Town owned pipe beneath the adjoining roadway.

I subsequently purchased and had the 200' of 4' pipe installed within the landfill site costing me an estimated \$15,000.00. The town installed a new section of 20' x 4' pipe to their existing pipe to facilitate connecting my pipe. In 2016' I continued to fill thousands of tons of earth over the pipe attempting to level the property and neared completion of filling the 200' x 30' deep fill site.

It was not until February of 2017 that I was advised by the Clinton County Highway Department Engineer that The US Army Corp of Engineers had regulatory authority over my fill site, "NOT DEC" and I would need their approval, not, the approval of NY DEC to fill the site and place a pipe in the stream.

I contacted US Corps of Army Engineers and was refused a permit by them and was "Ordered" to not only remove the pipe but to empty and restore the fill site to its original configuration. I now have an

estimated \$50,000.00+ in costs for removal of the pipe, excavating the fill site property and restoring the site with a new grade, far exceeding it's original grade. The new pipe was installed only months before it's removal could not be salvaged and was destroyed during removal.

My expenses have risen above \$50,000.00 and are expected reach \$75,000.00. The finalization of the project is still incomplete. A final grade and soil compaction is required, along with the replanting of the site.

The site will require grinding of remaining stumps and removal of the 200' of pipe debris before being totally closed.

Respectfully:

John K. Triller

Subj:

Fwd: FW: Stream Map

Date: From: 2/7/2017 10:04:16 P.M. Eastern Standard Time

TROOPERKT@aol.com

To:

John.R.Connell@usace.armv.mil

I have forwarded the email I made reference to:

Kevin Triller

From: erin.donhauser@dec.ny.gov

To: trooperkt@aol.com

Sent: 2/6/2017 1:23:51 P.M. Eastern Standard Time

Subj: FW: Stream Map

Mr. Triller,

As we discussed, this is the only email I sent you. Let me know if you have questions.

Thank you,

Erin Donhauser

From: Donhauser, Erin M (DEC) Sent: Friday, July 22, 2016 11:15 AM

To: 'trooperkt@aol.com' <trooperkt@aol.com>

Subject: Stream Map

Hello,

Please see the attached map. If this is the parcel in question, I do not see any mapped protected streams located on the parcel. The stream would be a Class C if it runs year round, or a Class D if it is seasonal. Class C and D streams do not require a Protection of Waters permit from the Department, but as we discussed, water quality standards still apply to the stream. Please be sure to speak with the Division of Materials management in regards to any changes to your solid waste registration.

Thank you,

Erin Donhauser

Environmental Analyst 1, Division of Environmental Permits

New York State Department of Environmental Conservation

1115 NYS Route 86, PO Box 296, Ray Brook, NY 12977

P: (518) 897-1234 | F: (518) 897-1394 | erin.donhauser@dec.ny.gov

www.dec.ny.gov | 1



Division of Materials Management
New York State Department of Environmental Conservation
Albany, New York 12233-7260

INACTIVE SOLID WASTE MANAGEMENT FACILITY OR ACTIVITY NOTIFICATION FOR

	- 731 OF						
FACILITY NAME: JOHN K. TRILLEN	MANAGEMENT						
FACILITY ADDRESS: 46 ECM ST FACILITY CITY: Champlain NY							
FACILITY CITY: Champlain NY	STATE: 1/4 ZIP CODE: 12919						
TYPE OF INACTIVE FACILITY OR ACTIVITY: (Check all applicable boxes)							
 □ C&D processing – permit □ C&D processing – registration □ Household Hazardous Waste 	Regulated Medical Waste – Onsite Treatment Regulated Medical Waste – Commercial Treatment						
☐ Landfill – Construction & Demolition Debris ☐	 □ Regulated Medical Waste – Transfer Station □ Transfer Station – permit □ Transfer Station – registration 						
☐ Landfill – Long Island	 □ Waste Tire Storage – Dealer □ Waste Tire Storage – New Product Manufacturing 						
	 □ Waste Tire Storage – Onsite Energy Recovery □ Waste Tire Storage – permitted □ Waste Tire Storage – Retreader 						
 □ Recyclable Handling & Recovery □ Regulated Medical Waste – Radiopharmacy 	Waste Tire Storage – Retreader Other						
DEC ACTIVITY CODE(S) OR REGISTRATION NUMBER(S): /0δ/8	racility county: Chinhor REGION #: 5						

This document certifies that the type of facility or activity identified above is no longer operational. The owner/operator relinquishes their NYSDEC permit/registration and retains no other permit, registrations, or licenses related to the identified activity. It is recognized that in order to resume operation, a new permit application or registration form must be submitted to the Department for processing and approval. This notification does not excuse the facility from any closure, post-closure, or other requirements identified in 6 NYCRR Part 360.

I hereby affirm under penalty of perjury that information provided on this form was prepared by me or under my supervision and direction and is true to the best of my knowledge and belief, and that I have the authority to sign this form pursuant to 6 NYCRR Part 360. I am aware that any false statement made herein is punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

JOHN K. TRUEL Name (Print or Type)	Title (Print or Type)	(<u>518</u>) <u>572-0989</u> Phone Number
46 ECM ST Address	Clearge on City	State and Zip
Signature	3/1/18 Date	