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NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION DEC 12/20/17

Division of Materials Management, Bureau of Permitting and Planning 625 Broadway, 9th Floor, Albany, New York 12233-7260 P: (518) 402-8678 | F: (518) 402-9041 www.dec.ny.gov

KEVIN wood & DECNY JOY

December 12, 2017

Dear Facility Owner/Operator:

Re: Annual Reporting for Facilities Regulated Under 6 NYCRR Part 360 and/or ECL 27-2303:

- Construction and Demolition Debris Processing Facilities;
- Household Hazardous Waste Collection & Storage Facilities;
- Landfills:
- **Municipal Waste Combustion Facilities:**
- Recyclables Handling and Recovery Facilities;
- Regulated Medical Waste Facilities:
- **Transfer Stations:**
- Used Cooking Oil Processing Facilities;
- Vehicle Dismantler Facilities*:
- Waste Oil Storage, Reprocessing or Rerefining Facilities; and
- Waste Tire Storage Facilities.

This letter is to remind you that your 2017 Annual Report is due no later than March 1, 2018, in accordance with 6 NYCRR Part 360 and/or ECL 27-2303. Submission of the completed form does not relieve you from any additional reporting responsibilities that are identified as special conditions in your 6 NYCRR Part 360 permit or that may be required for inactive or closed facilities, or other types of solid waste management facilities not referenced above.

For facilities at which multiple activities or operations occur (e.g., transfer stations that are also authorized for construction and demolition debris processing, recyclables handling & recovery, etc.) please complete the forms for each of these activities. If you have any questions about which forms to use, please contact the DEC Regional Office for the Region in which your facility is located or contact the Central Office at (518) 402-8678.

To complete the annual report submission process:

- 1. The 2017 annual report forms are available online at http://www.dec.ny.gov/chemical/52706.html. A brief description of each type of solid waste management facility can be found at http://www.dec.ny.gov/chemical/8495.html.
- 2. Complete the fillable pdf form(s) applicable to your facility or facilities, OR Download the forms applicable to your facility or facilities, and fill out the form(s) by hand.
- 3. Print the forms double-sided.
- 4. Sign the form(s).
- 5. Make a copy for your records.
- 6. Fax the completed annual report form(s) to the DEC Central Office at (518) 402-9041 or e-mail it to SWMFannualreport@dec.ny.gov (If you cannot fax or e-mail the form(s) or if there are lengthy attachments to the annual report(s), save the document onto a CD and mail to the Central Office at the address on the top of this letter.)



7. E-mail the completed form(s) to the DEC Regional Office that has jurisdiction over your facility. (If you cannot e-mail the form(s) or if there are lengthy attachments to the annual report(s), mail the original completed form to your respective DEC Regional Office.) Contact information for the DEC Regional Offices can be found enclosed with this letter.

Further instructions can be found on the annual report forms. Should you have any questions regarding the use of the forms, or would like a hard copy or an electronic copy of the forms, please contact Jay Garrity at (518) 402-8678, or via e-mail at SWMFannualreport@dec.ny.gov. Other questions regarding your reporting responsibilities should be directed to your respective DEC Regional Office.

Failure to submit the Annual Report Form is a violation of 6 NYCRR Part 360 and can result in a penalty of up to \$7,500 per violation and an additional penalty of up to \$1,500 per day that the violation continues, as specified in ECL §71-2703. DEC has been actively pursuing facilities that fail to submit annual reports in a timely manner, and expects to issue Notices of Violation soon after the March 1 reporting deadline.

As you may be aware, the revised Part 360 regulations became effective on November 4, 2017 and are available at http://www.dec.nv.gov/regulations/81768.html. Please take note of any additional reporting requirements for your facility or facilities as you prepare for the 2018 operating year.

Thank you for your cooperation in this matter.

Sincerely,

Richard Clarkson, P.E.

Director

Bureau of Permitting & Planning

Enclosure

*Please note, if your facility engages in the dismantling or wrecking of used motor vehicles for parts recycling/resale and for scrap, you are also subject to the SPDES Multi-Sector General Permit for Stormwater Discharges Associated with Industrial Activity (MSGP). Activities such as vehicle dismantling have the potential to discharge pollutants directly into nearby waterbodies or indirectly via storm sewer systems, thereby degrading water quality. The MSGP is intended to provide regulatory oversight to industrial facilities to control stormwater runoff and prevent pollutants from reaching waterbodies. To obtain coverage under the MSGP, you must develop a Stormwater Pollution Prevention Plan (SWPPP), which outlines how you intend to prevent pollutants from being discharged from your facility; implement stormwater best management practices; and then submit a Notice of Intent. If your facility is discharging stormwater and fails to obtain MSGP, you could be subject to enforcement actions, including, but not limited to, financial penalties up to \$37,500 per day per violation. If you have questions regarding the MSGP and if your facility is required to obtain coverage, you can contact the NYSDEC Division of Water's MSGP Coordinator, Steven McCague by phone at (518) 402-8244, or by e-mail at steven.mccague@dec.ny.gov. In addition, more information on the MSGP can be found on DEC's website at http://www.dec.ny.gov/chemical/9009.html.

New York State Department of Environmental Conservation Division of Materials Management Bureau of Permitting and Planning

MATERIAL MANAGEMENT PROGRAM CONTACTS

CENTRAL OFFICE

Bureau of Permitting and Planning 625 Broadway Albany, NY 12233-7260 Phone: (518) 402-8678

For Submission of Annual Reports only:

Fax: (518) 402-9041

Email: For solid waste management facilities - swmfannualreport@dec.ny.gov

REGIONAL OFFICE ADDRESSES & LEAD CONTACT PERSON

REGION 1 (Nassau, Suffolk)

Syed Rahman 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, Uister, Westchester)

James Lansing 21 South Putt Comers Road New Paitz, 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)

Kevin Wood 232 Golf Course Road Warrensburg, NY 12885 Phone: (518) 623-1233 SWMFAnnualReportR5@dec.ny.gov

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

Yuan Zeng 317 Washington Street Watertown, NY 13601 Phone: (315) 785-2584 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) 226-5408 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



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

Newcomb LCD LF FACILITY LOCATION ADDRESS: FACILITY CITY: STATE: ZIP CODE: 69 Hudson River RD. NY 12852 FACILITY TOWN: FACILITY COUNTY: FACILITY PHONE NUMBER: Newcomb ESSEX 518-582-2156 FACILITY NYS PLANNING UNIT: (A list of NYS Planning Units can be found at the end of this report). NYSDEC ESSEX 800 REGISTRATION DATE ISSUED: NYS DEC ACTIVITY CODE OR REGISTRATION NUMBER: 16D08 FACILITY CONTACT: Public CONTACT PHONE NUMBER: 518-582-2061 CONTACT EMAIL ADDRESS: OWNER INFORMATION OWNER NAME: OWNER PHONE NUMBER: 518-582-2061 OWNER NAME: OWNER PHONE NUMBER: 518-582-2061 OWNER ADDRESS: OWNER CITY: NEWCOMB NY 12852 OWNER CONTACT: STATE: ZIP CODE: NY 12852 OWNER CONTACT: OWNER CONTACT EMAIL ADDRESS: Inredeloria@newcombny.com OPERATOR INFORMATION	ou ustoregoe K	FACILITY	Y INFORMATION	V				
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OPERATOR NAME: ■ same as owner □ public □ private	Robin DeLoria	mrdelo	ria@newco	ombny.c	om			
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PREFERENCES								
Preferred address to receive correspondence: Facility location address		: Facility lo	ocation address	ſ	Owner at	kivens		
Preferred email address: Facility Contact Owner Contact Cother (provide):		ા 0	wner Contact					
Preferred Individual to receive correspondence: Facility Contect Owner Contact		ce: 🖸 Facili	ity Contact	Owner Con	ntact			
								

Did you operate in 2017? Yes; Complete this form.

No; Complete and submit Sections 1 and 7. If you no longer plan to 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.

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SECTION 2 - LAND CLEARING DEBRIS (LCD) DISPOSED

Provide the tonnages of land clearing debris disposed.	DO NOT REPORT IN CUBIC YARDS!
Specify the methods used to measure the quantities dis	posed and the percentages measured by each method:
% Scale Weight	100 % Estimated
% Truck Count	% Other (Specify:)

Land Clearing Debris	Weight (tons)
January	
February	
March	
April	
May	
June	3.5
July	2.5
August	1.0
September	.5
October	
November	
December	
Total Disposed For Year	7.5
Dally Average (Tons)	n/a

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SECTION 3 -- SERVICE AREA OF MATERIAL RECEIVED

Identify the service area of the material. The Total Tons Received reported below should equal the Total Tons Received in Section 2 (LAND CLEARING DEBRIS (LCD) DISPOSED). DO NOT REPORT IN CUBIC YARDSI

- 1) <u>Direct hauled from the generator of the material</u>. In the case where the material is hauled to your facility from the generator (i.e. hauled from residences, job sites, commercial establishments, etc.), "Direct Haul" is the appropriate response in Column 2 under "Service Area." Please report the tonnage by material type and identify the state, county and planning unit where it was generated; or
- 2) <u>Sent to your facility from another solid waste management facility.</u> Material may be sent to your facility from another solid waste management facility. In this case, please report the tonnage by material type from each sending solid waste management facility, as well as the sending facility's name, address, county, and the planning unit where the sending facility is located.

Specify transport method	and percentages of total waste transport	ed by each:
100 % Road	% Rail	
% Water	% Other (specify:	
Explain which waste type	s and service areas below are included it	n these transport methods
	- And	

SERVICE AREA OF MATERIAL RECEIVED					
TYPE OF SOLID WASTE	SOLID WASTE MANAGEMENT FACILITY FROM WHICH IT WAS RECEIVED (Name & Address) OR "I in () H' . []	SERVICE AREA STATE OR COUNTRY	SERVICE AREA COUNTY OR PROVINCE	SERVICE AREA NYS PLANNING UNIT (See Attached List of NYS Planning Units)	TONS RECEIVED
	Direct Haul	NY	Essex		7.5
Land Clearing Debris					
Other (specify)					
				TOTAL RECEIVED (tons):	7.5

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SECTION 4 - OPERATIONS

Estimated time remaining before closure 10 years							
Does this facility accept exempt materials (i.e. recognizable uncontaminated concrete and concrete products, asphalt pavement, brick, glass, soil or rock)? Yes No							
SECTION 5 – UNAUTHORIZED SOLID WASTE Has unauthorized solid waste been received at the facility during the reporting period? Yes No if yes, give information below for each incident (attach additional sheets if necessary):							
	, , ,		(Manual additional officers if ficeessary).				
Date Received Type Received Date Disposed Disposal Method & Location							
SECTION 6 - PROBLEMS							
Were any problems encountered during the reporting period (e.g., specific occurrences which have led to changes in facility procedures)?							
☐ Yes ☐ No If yes, attach additional sheets identifying each problem and the methods for resolution of the problem.							

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:

State and Zip

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.

Robin DeLoria

Name (Print or Type)

Print or Type)

Title (Print or Type)

Semail (Print or Type)

Newcomb

City

New York 12852

518, 582 3211

ATTACHMENTS: YES NO (Please check appropriate line)