RECYCLABLES HANDLING & RECOVERY FACILITY ANNUAL REPORT

(If you need assistance filling out this form please email swmfannualreport@dec.ny.gov or call 518-402-8678.)

Complete and submit this form by March 1, 2020.

This annual report is for the year of operation from January 01, 2019 to December 31, 2019

SECTION 1 - GENERAL INFORMATION

		FACILITY	INFORMATION				
FACILITY NAME:							
East Hampton Recy	cling 8	_					
FACILITY LOCATION ADDRESS	:	FACILITY	CITY:		STAT	ΓE:	ZIP CODE:
260 Springs Fireplace	Road	East I	Hampton		NY		11937
FACILITY TOWN:		FACILITY	COUNTY:	FAC	ILITY P	HON	IE NUMBER:
East Hampton		Suffol	k	63	1-32	24-	7191
FACILITY NYS PLANNING UNIT:	-1-4				-17	NYS	DEC D4
East Hampton (Town)						REC	310N#: R1
360 PERMIT #:	DATE IS	SUED:	DATE EXPIRES:	NYS	DEC A	CTIV	ITY CODE OR
1472400127/00004	6/5/1	5	1/21/20	REG	ISTRAT	rion	NUMBER:
FACILITY CONTACT:		public	CONTACT PHONE		CONTA	CTI	FAX NUMBER:
Stephen K. Lynch		□ private	NUMBER: 631-324-0925		631-	-32	9-3369
CONTACT EMAIL ADDRESS: SL	.ynch@El	-lamptonN	ſ.gov				
		OWNER	INFORMATION				
OWNER NAME:		700	HONE NUMBER:				JMBER:
Town of East Hampton		631-324-4140		631-324-2789			89
OWNER ADDRESS:		OWNER C			STA	TE:	ZIP CODE:
159 Pantigo Road		East Har	·		NY		11937
OWNER CONTACT:		OWNER C	ONTACT EMAIL ADDRE	:SS:			
Peter VanScoyoc		PVanS	Scoyoc@EHam	ptor	NY.	gov	′
		OPERATO	RINFORMATION				
OPERATOR NAME: ☐ sam Stephen K. Lynch	e as owner				□ pub □ priv		
			FERENCES				
Preferred address to receive correct Other (provide):	spondence	: 🖪 Facility l	ocation address		Ownera	ddres	s
Preferred email address: Facil Other (provide):	ity Contact		wner Contact				
Preferred individual to receive com ☐ other (provide):	espondend	Ce: Facil	ity Contact 🔲 Own	er Cont	act		
Did							

Did you operate in 2019? Yes; Complete this form.
□ No; Complete and submit Sections 1 and 11. If you no longer plan to operate and with to relinquish your permit/registration associated with this solid waste management activity, also complete the "Inaction Solid Waste Management Facility or Activity Notification Form" located at: http://www.dec.ny.gov/chemical/52706.html .

SECTION 2 - MATERIAL RECEIVED

Please provide the tonnages of materials received. This includes all materials received at your facility regardless of their destination after processing. DO NOT REPORT IN CUBIC YARDS!

		D	O NOT REPORT	T IN CUBIC YAF	RDS!		
Specify the methods used to m	easure the quar	ntities received $arepsilon$	and the percentag	ges measured by	y each method:		
_100% Scale Weight			_% Estimated				
% Truck Count			_% Other (Specify	y:)		
	T: 5			I	A 11	 	T

Material	Tip Fee (\$/Ton)	January (tons)	February (tons)	March (tons)	April (tons)	May (tons)	June (tons)	July (tons)
Commingled Containers (metal, glass, plastic)		36.28	39.59	39.15	19.79	37.51	43.82	61.45
Commingled Paper (all grades)								
Single Stream (total)								
Other (specify)								
	<u> </u>			<u> </u> 				
Total Tons Recei	ved	36.28	39.59	39.15	19.79	37.51	43.82	61.45
Material	August (tons)	September (tons)	October (tons)	November (tons)	December (tons)	1	l Year ons)	Daily Avg. (tons)
Commingled Containers (metal, glass, plastic)	89.53	71.56	19.99	11.38	35.87	505.92		6.25
Commingled Paper (all grades)								
Single Stream (total)								
Other (specify)								
Total Tons Received	89.53	71.56	19.99	11.38	35.87.	505.92		6.25

If the material type is not listed, use one of the "Other" lines and fill in the name of the material. If more "Other" lines are needed, cross out an unused type and fill in the other materials name. If still more "Other" lines are needed, attached another copy of this page, cross out an unused type, and fill in the other materials name.

SECTION 3 - SERVICE AREA OF MATERIAL RECEIVED

Please identify where the material is coming from. The total tons received reported below should equal the total tons received in Section 2 (Solid Waste Received). DO NOT REPORT IN CUBIC YARDS!

- If the material WAS received from another solid waste management facility, please write in the name and address of the facility along with the appropriate state, county and planning unit/municipality.
- If the material WAS NOT received from another solid waste management facility, please write in "Direct Haul" along with the appropriate state, county and
 planning unit/municipality where the material was generated.

Specify transport method, list type of material(s) and percentages of total material to	transported by each:	
100 % Road: Material(s):	% Rail: Material(s):	
% Water: Material(s):	% Other (specify:): Material(s):	

	SERVICE AREA OF	MATERIAL RE	CEIVED(where the	material is coming from)	
MATERIAL	SOLID WASTE MANAGEMENT FACILITY FROM WHICH IT WAS RECEIVED (Name & Address) OR "Direct Haul"	SERVICE AREA STATE OR COUNTRY	SERVICE AREA COUNTY OR PROVINCE	SERVICE AREA NYS PLANNING UNIT (See Attached List of NYS	TONS RECEIVED
Commingled	Montauk Transfer Station - 365 Montauk Hwy, Montauk, NY 11954	NY	Suffolk County	East Hampton (Town)	216.56
Containers	East Hampton Recycling & Disposal Center	NY	Suffolk County	East Hampton (Town)	289.36
(metal, glass, plastic)	260 Springs Fireplace Rd, East Hampton, NY 11937				
	Montauk Transfer Station - 365 Montauk Hwy, Montauk, NY 11954	NY	Suffolk County	East Hampton (Town)	82.67
Commingled Paper (all grades)	East Hampton Recycling & Disposal Center	NY	Suffolk County	East Hampton (Town)	304.20
(an gradeo)	260 Springs Fireplace Rd, East Hampton, NY 11937				
Single Stream (total)					
Other (specify)	Montauk Transfer Station - 365 Montauk Hwy, Montauk, NY 11954	NY	Suffolk County	East Hampton (Town)	113.49
Cardboard					
	East Hampton Recycling & Disposal Center	NY	Suffolk County	East Hampton (Town)	414.69
	260 Springs Fireplace Rd, East Hampton, NY 11937				
			TOTAL MATE	RIAL RECEIVED (tons	s): 1420.97

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SECTION 4 – RESIDUE

Residue destination (Name & Address)_____

Percent Residue Calc	ulation: Total tons residue/Total tons material receive	ed x 100 =	_		
	SECTION 5 - RECYCLABL	ES & RECOVER	RED MATERIAL	s	
Please identify dest Destin	ination of recyclable materials. Indicate the nation Planning Unit/Municipality and the amou	me of the facility, and of material reco	address, corresp vered. DO NOT I	onding State/Country, REPORT IN CUBIC YAR	County/Province,
100 % Road: Materia	od, list type of material(s) and percentages of total material(s):al(s):	% R	ail: Material(s):): Material(s):	
	PAPER	RECOVERED			
RECOVERED MATERIAL	DESTINATION (Name & Address)	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	DESTINATION NYS PLANNING UNIT (See Attached List of NYS Planning 出版)	TONS RECOVERED (out of facility)
Commingled Paper (all grades)					
Corrugated	PK Metals and Peconic Recycling & Transfer (see attachment)	NY	Suffolk County		129.06
Cardboard	All American Funding & Refining, LLC	NY	Nassau County		399.12
Junk Mail					

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NY

NY

Nassau County

Nassau County

Oyster Bay Solid Waste Dispo 118.75

Oyster Bay Solid Waste Dispo 294.21

TOTAL PAPER RECOVERED (tons): 941 14

Magazines

Newspaper

Office Paper

Paperboard / Boxboard

Other Paper (specify)

All American Funding & Refining, LLC

All American Funding & Refining, LLC

345 Eastern Parkway, Farmingdale, NY 11735

345 Eastern Parkway, Farmingdale, NY 11735

Total residue (tons) = _____

TOWN OF EAST HAMPTON SANITATION DEPARTMENT 2019 PERMITTED TRANSFER FACILITY ANNUAL REPORT

East Hampton Recycling & Disposal Center 260 Springs Fireplace Road East Hampton, NY 11937

SECTION 5 - PERMITTED TRANSFER FACILITY RECYCLABLE & RECOVERED MATERIALS

CORREGATED CARDBOARD

	Receiving Company name:	Tons Recovered:
•	PK Metals 3542 Route 112, Coram, NY 11727	55.64
•	Peconic Recycling & Transfer 560 Commerce Road, Cutchogue, NY 11935	73.42
•	All American Funding & Refining, LLC 345 Eastern Parkway, Farmingdale, NY 11735	399.12

SECTION 5 - RECYCLABLES & RECOVERED MATERIALS (continued)

	GLASS R	ECOVERED			
RECOVERED MATERIAL	DESTINATION (Name & Address)	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	DESTINATION NYS PLANNING UNIT (See Attached List of NYS MINE ()	TONS RECOVEREI (out of facility)
Container Glass	East Hampton Recycling & Disposal Center	NY	Suffolk County	East Hampton (Town)	344.12
	260 Springs Fireplace Rd, East Hampton, NY 11937				
Industrial Scrap Glass					
Other Glass (specify)					
			TOTAL GLASS R	ECOVERED (tons): 34	4 12
	METAL R	ECOVERED			
RECOVERED MATERIAL	DESTINATION (Name & Address)	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	DESTINATION NYS PLANNING UNIT (See Attached List of NYS	TONS RECOVERED (out of facility)
Aluminum Foil / Trays					
Bulk Metal					
Enameled Appliances	Gershow Recycling - 71 Peconic Avenue, Medford, NY 11763	NY	Suffolk County	Brookhaven (Town)	56.00
/ White Goods	PK Metals - 3542 Route 112, Coram, NY 11727	NY	Suffolk County	Brookhaven (Town)	448.82
Industrial Scrap Metal]
Tin & Aluminum Containers	Gershow Recycling - 71 Peconic Avenue, Medford, NY 11763	NY	Suffolk County	Brookhaven (Town)	32.73
Other Metal (specify)					
			TOTAL METAL F	RECOVERED (tons): 5	37 55

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SECTION 5 - RECYCLABLES & RECOVERED MATERIALS (continued)

	PLASTIC RE	COVERED			
RECOVERED MATERIAL	DESTINATION (Name & Address)	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	DESTINATION NYS PLANNING UNIT (See Attached List of NYS Planning Units)	TONS RECOVERED (out of facility)
Commingled Plastic	Winters Bros 120 Nancy St., West Babylon, NY 11704	NY	Suffolk County	Babylon (Town)	66.73
(#1 - #7)	All Deposit Redemption - 21 Pine Aire Dr, Bay Shore, NY 11706	NY	Suffolk County	Islip Resource Recovery Aç	70.14
PET (plastic #1)					
HDPE (plastic #2)					
Other Rigid Plastics (#3 - #7)					
Industrial Scrap Plastic					
Plastic Film & Bags					
Other Plastics (specify)					
		T	OTAL PLASTIC R	RECOVERED (tons): 13	6.87

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VOLUME TO WEIGHT CONVERSION FACTORS

MATERIAL	EQUIVA	LENT	MATERIAL	EQUI'VAL	ENT	MATERIAL	EQUIVA	LENT
GLASS - w hole bottles	1 cubic yard	0.35 tons	GLASS - crushed mechanically	1 cubic yard	0.88 tons	ALUMINUM - cans - w hole	1 cubic yard	0.03 tons
GLASS - semi crushed	1 cubic yard	0.70 tons	GLASS - uncrushed manually	55 gallon drum	0.16 tons	ALUMINUM - cans - flattened	1 cubic yard	0.125 tons
PAPER - high grade loose	1 cubic yard	0.18 tons	PLASTIC - PET - w hole	1 cubic yard	0.015 tons			
PAPER - high grade balled	1 cubic yard	0.36 tons	PLASTIC - PET - flattened	1 cubic yard	0.04 tons			
PAPER - mixed loose	1 cubic yard	0.15 tons	PLASTIC - PET - balled	1 cubic yard	0.38 tons	WHITE GOODS - uncompacted	1 cubic yard	0.10 tons
NEWSPRINT - loose	1 cubic yard	0.29 tons	PLASTIC - styrofoam	1 cubic yard	0.02 tons	WHITE GOODS - compacted	1 cubic yard	0.5 tons
NEWSPRINT - compacted	1 cubic yard	0.43 tons	PLASTIC - HDPE - w hole	1 cubic yard	0.012 tons			
CORRUGATED - loose	1 cubic yard	0.015 tons	PLASTIC - HDPE - flattened 1	1 cubic yard	0.03 tons			
CORRUGATED - baled	1 cubic yard	0,55 tons	PLASTIC - HDPE - balled	1 cubic yard	0.38 tons	FERROUS METAL - cans whole	1 cubic yard	0.08 tons
			PLASTIC - mixed (grocery bags)	45 gallon bag	0.01 tons	FERROUS METAL - cans	1 cubic yard	0.43 tons

SECTION 5 - RECYCLABLES & RECOVERED MATERIALS (continued)

	MIXED MATERIA	L RECOVERED			
RECOVERED MATERIAL	DESTINATION (Name & Address)	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	DESTINATION NYS PLANNING UNIT (See Attached List of NYS P)	TONS RECOVERED (out of facility)
Commingled Containers (metal, glass, plastic)					
Commingled Paper & Containers					
Single Stream					
Other (specify)					
		TOTAL	MIXED MATERIA	AL RECOVERED (tons)	:
	MISCELLANEOUS MA	TERIAL RECOVE	RED		
RECOVERED MATERIAL	DESTINATION (Name & Address)	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	DESTINATION NYS PLANNING UNIT (See Attached List of NYS Planning)	TONS RECOVERED (out of facility)
Electronics	AHRC- Nassau Vocational Training Center	NY	Nassau County	Hempstead (Town)	9.89
Textiles					
Other (specify)	Winters Bros 120 Nancy St, West Babylon, NY 11704	NY	Suffolk County	Brookhaven (Town)	101.63
Tires					
	To	OTAL MISCELLA	NEOUS MATERIA	L RECOVERED (tons)	* 111.52

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SECTION 6 - 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):						
	Date Received	Type Received	Date Disposed	Disposal Method & Location		
\vdash						
OFOTION 7 COCT FORMATTO AND FINANCIAL ACCURANCE DOCUMENTS						
SECTION 7 - COST ESTIMATES AND FINANCIAL ASSURANCE DOCUMENTS						
Are there required cost estimates and financial assurance documents for closure? Yes No If yes, attach additional sheets reflecting annual adjustments for inflation and any changes to the						
Yes No If yes, attach additional sheets reflecting annual adjustments for inflation and any changes to the Closure Plan?						
SECTION 8 - PROBLEMS						
Were any problems encountered during the reporting period (e.g., specific occurrences which have led to changes in facility procedures)?						
Ye	Yes No If yes, attach additional sheets identifying each problem and the methods for resolution of the problem.					
L						
SECTION 9 - CHANGES						
Were there any changes from approved reports, plans, specifications, and permit conditions?						
Yes No If yes, attach additional sheets identifying changes with a justification for each change.						
SECTION 10 - PERMIT/CONSENT ORDER REPORTING REQUIREMENTS						
1 -	Are there any additional permit/consent order reporting requirements not covered by the previous sections of this form?					
□Y€	Yes No If yes, attach additional sheets identifying the reporting requirements with their respective responses.					

SECTION 11 - SIGNATURE AND DATE BY OWNER OR OPERATOR

Owner or Operator must sign, date and submit one completed form to the appropriate Regional Office (See attachment for Regional Office addresses, email addresses and Materials Management Contacts).

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

ATTACHMENTS: YES NO

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

Email address: SWMFannualreport@dec.ny.gov

I certify, under penalty of law, that the data and other information identified in this report have been prepared under my direction and supervision in compliance with a system designed to ensure that qualified personnel properly and accurately gather and evaluate this information. I am aware that any false statement I make in such report is punishable pursuant to section 71-2703(2) of the Environmental Conservation Law and section 210.45 of the Penal Law.

(2) of the Livinorinicital/portscreation Law are	d Scotlon 2 To. To of the Fellar Lav		
Signature	5/01/0000 Date		
Stephen K. Lynch	Commissioner of Public Works		
Name (Print or Type)	Title (Print or Type)		
SLynch@EHamptonNY.gov			
Email (Print	Email (Print or Type)		
260 Springs Fireplace Road	East Hampton		
Address	City		
NY 11937	631 ₃ 24 ₀₉₂₅		
State and Zip	Phone Number		