

CNY RESOURCE RECOVERY, INC. ● ● ●

DATE: 2/13/2020

Send to: DEC

Attention:

Office Location: CENTRAL

Fax Number: OFFICE

URGENT ⁵¹⁸⁻⁴⁰²⁻⁹⁰⁹¹

PLEASE REVIEW

COMMENTS:

From: Russell Gower

Office Location: Syracuse NY

Phone Number: 315-471-0254

Number of Pages, Including Cover: 21

REPLY ASAP PLEASE COMMENT

FOR YOUR INFORMATION

TO: DEC CENTRAL OFFICE

Annual Reports for
2 Locations

Hard copies to follow in mail to
appropriate Regional Office
for each location

fax cover

CNY Resource Recovery, Inc.
5879 Firestone Dr., Syracuse, NY 13206
315-471-0254 Phone | 315-471-0218 Fax
www.cnyresourcerecovery.com | Web site

Please note -
Resending 2nd
Location!

RECYCLABLES HANDLING & RECOVERY FACILITY ANNUAL REPORT

(If you need assistance filling out this form please email swm/annualreport@dec.ny.gov or call 618-402-8676.)

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 NAME: CNY NORTH EAST			
FACILITY LOCATION ADDRESS: 12521 US RT. 11		FACILITY CITY: ADAMS CENTER	
FACILITY TOWN: ADAMS CENTER		FACILITY COUNTY: JEFFERSON	
FACILITY NYS PLANNING UNIT: (A list of NYS Planning Units can be found at the end of this report). DANC		STATE: NY	
DATE ISSUED:		DATE EXPIRES:	
360 PERMIT #: (Refer to DEC Permit)		NYS DEC ACTIVITY CODE OR REGISTRATION NUMBER: (Refer to DEC Registration) 23R20005	
FACILITY CONTACT: Ben Gower		CONTACT PHONE NUMBER: 315-583-5554	
CONTACT EMAIL ADDRESS:		CONTACT FAX NUMBER: 315-583-5560	
OWNER NAME: Russell Gower		OWNER PHONE NUMBER: 315-471-0254	
OWNER ADDRESS: 5879 FIRESTONE DR.		OWNER FAX NUMBER: 315-471-0218	
OWNER CONTACT:		OWNER CITY: SYRACUSE	
OPERATOR NAME: <input checked="" type="checkbox"/> same as owner		STATE: NY	
Preferred address to receive correspondence: <input checked="" type="checkbox"/> Facility location address <input type="checkbox"/> Owner address		ZIP CODE: 13206	
<input type="checkbox"/> Other (provide):		OWNER CONTACT EMAIL ADDRESS: CNYRESOURCERECOVERY@yahoo.com	
Preferred email address: <input checked="" type="checkbox"/> Facility Contact <input type="checkbox"/> Owner Contact		<input type="checkbox"/> Other (provide):	
Preferred individual to receive correspondence: <input checked="" type="checkbox"/> Facility Contact <input type="checkbox"/> Owner Contact		<input type="checkbox"/> Other (provide):	

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 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 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!

Specify the methods used to measure the quantities received and the percentages measured by each method:

% Scale Weight N/A _____ % Estimated
 % Truck Count _____ % Other (Specify: _____)

Material	Tip Fee (\$/Ton)	January (tons)	February (tons)	March (tons)	April (tons)	May (tons)	June (tons)	July (tons)
Commingled Containers (metal, glass, plastic)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Commingled Paper (all grades)								
Single Stream (total)								
Other (specify)								
Total Tonnage Received								
Material	August (tons)	September (tons)	October (tons)	November (tons)	December (tons)	Total Year (tons)	Daily Avg. (tons)	
Commingled Containers (metal, glass, plastic)	N/A	N/A	N/A	N/A	N/A			
Commingled Paper (all grades)								
Single Stream (total)								
Other (specify)								
Total Tonnage Received								

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.

Additional Information for CNY Northeast DEC Reg# 23R20005

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!

Specify the methods used to measure the quantities received and the percentages measured by each method:

70 % Scale Weight

20 % Estimated

10 % Truck Count

Material	Tip Fee (\$/Ton)	January (tons)	February (tons)	March (tons)	April (tons)	May (tons)	June (tons)	July (tons)
Proc - PRINTWASTE		0	0	0	0	0	0	0
PRINTWASTE		131	204	159	164	238	146	48
CARDBOARD		0	0	0	0	0	0	0
Plastic		11.6	0	0	30.63 Batteries 37.1 used	0	0	21.15
BATTERIES/LEAD		0	0	1	0	0	0	1
STEEL		1.65	1.71	0	0	1.18	0	1.09
STAINLESS STEEL		9.8	13.3	3.62	14	13.6	21.7	20.7
Mixed Non-Ferrous								
Total Tons Received								
Material	August (tons)	September (tons)	October (tons)	November (tons)	December (tons)	Total Year (tons)	Daily Avg (tons)	
PRINTWASTE	0	0	0	0	0	0	0	
CARDBOARD	45	37	49	25	0	1246	3.98	
Plastic	0	0	0	0	0	0	0	
BATTERIES/LEAD	0	16	0	0	21	90.75	1.29	
Steel	0	0	1	0	1.5	3.5	1.011	
Stainless Steel	0	3.21	3.65	0	0	12.49	1.039	
Mixed Non-Ferrous	25	16.7	26.4	13.6	12.5	188.92	1.603	
Total Tons Received						1541.66	4.923	

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SECTION 4 - RESIDUE

Total residue (tons) = _____ Residue destination (Name & Address) _____
 Percent Residue Calculation: Total tons residue/Total tons material received x 100 = _____

SECTION 5 - RECYCLABLES & RECOVERED MATERIALS

Please identify destination of recyclable materials. Indicate the name of the facility, address, corresponding State/Country, County/Province, Destination Planning Unit/Municipality and the amount of material recovered. **DO NOT REPORT IN CUBIC YARDS!**

Specify transport method, list type of material(s) and percentages of total material transported by each:

100 % Road: Material(s): ALL % Rail: Material(s): _____
 % Water: Material(s): _____ % Other (specify: _____): Material(s): _____

RECOVERED MATERIAL	DESTINATION (Name & Address)	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	DESTINATION NYS PLANNING UNIT <small>(See Attached List of NYS Planning Units)</small>	TONS RECOVERED <small>(out of facility)</small>
Commingled Paper <small>(all grades)</small>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Corrugated Cardboard	<u>Westrock, Solvay</u>	<u>NY</u>	<u>Orandaga</u> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<u>1246</u>
Junk Mail			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Magazines			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Newspaper			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Office Paper			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Paperboard/ Boxboard			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Other Paper (specify)			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
TOTAL PAPER RECOVERED (tons):					<u>1246</u>

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SECTION 5 - RECYCLABLES & RECOVERED MATERIALS (continued)

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)
Container Glass	N/A		0	0	
Industrial Scrap Glass			0	0	
Other Glass (specify)			0	0	
			0	0	
			0	0	
TOTAL GLASS RECOVERED (tons)					
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)
Aluminum Foil / Trays			0	0	
Bulk Metal	Ferrous Metal transferred to CNX Resource Recovery in Syracuse	NY	Orandaga	0	3.5
Enameled Appliances / White Goods			0	0	
Industrial Scrap Metal	Mixed non-ferrous - Aluminum, Copper, Brass + Stainless is transferred to CNX Resource			0	
Tin & Aluminum Containers	Recovery in Syracuse	NY	Orandaga	0	201.41
Other Metal (specify)	Lead Acid based Batteries - RSR			0	
	Middle town.	NY	ORANGE	0	58
	LEAD ACID BASED batteries - Tonnali	CANADA	ONTARIO	0	33
TOTAL METAL RECOVERED (tons)					

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SECTION 5 – RECYCLABLES & RECOVERED MATERIALS (continued)

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 (#1 - #7)	N/A		⊙	⊙	
PET (plastic #1)			⊙	⊙	
HDPE (plastic #2)			⊙	⊙	
Other Rigid Plastics (#3 - #7)			⊙	⊙	
Industrial Scrap Plastic			⊙	⊙	
Plastic Film & Bags			⊙	⊙	
Other Plastics (specify)			⊙	⊙	
			⊙	⊙	
TOTAL PLASTIC RECOVERED (tons)					

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VOLUME TO WEIGHT CONVERSION FACTORS

MATERIAL	EQUIVALENT	MATERIAL	EQUIVALENT	MATERIAL	EQUIVALENT
GLASS - whole bottles	1 cubic yard 0.35 tons	GLASS - crushed mechanically	1 cubic yard 0.88 tons	ALUMINUM - cans - whole	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 - whole	1 cubic yard 0.015 tons		
PAPER - high grade baled	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 - baled	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 - whole	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 - baled	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)

RECOVERED MATERIAL	DESTINATION (Name & Address)	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	DESTINATION NYS PLANNING UNIT <small>(See Attached List of NYS Planning Units)</small>	TONS RECOVERED <small>(out of facility)</small>
Commingled Containers <small>(metal, glass, plastic)</small>	N/A		○	○	
			○	○	
			○	○	
Commingled Paper & Containers			○	○	
			○	○	
			○	○	
Single Stream <small>(total)</small>			○	○	
			○	○	
			○	○	
Other (specify)			○	○	
			○	○	
			○	○	

TOTAL MISCELLANEOUS MATERIAL RECOVERED (tons)

RECOVERED MATERIAL	DESTINATION (Name & Address)	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	DESTINATION NYS PLANNING UNIT <small>(See Attached List of NYS Planning Units)</small>	TONS RECOVERED <small>(out of facility)</small>
Electronics	N/A		○	○	
			○	○	
Textiles			○	○	
			○	○	
Other (specify)			○	○	
			○	○	
			○	○	

TOTAL MISCELLANEOUS MATERIAL RECOVERED (tons)

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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

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 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)?

Yes No If yes, attach additional sheets identifying each problem and the methods for resolution of the problem.

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

Are there any additional permit/consent order reporting requirements not covered by the previous sections of this form?

Yes No If yes, attach additional sheets identifying the reporting requirements with their respective responses.

