

# RECYCLABLES HANDLING RECOVERY FACILITY ANNUAL REPORT

(If you need assistance filling out this form please email [swmfannualreport@dec.ny.gov](mailto: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			
<b>FACILITY NAME:</b> Tomra New York Recycling LLC			
<b>FACILITY LOCATION ADDRESS:</b> 3120 Shippers Road		<b>FACILITY CITY:</b> Vestal	
		<b>STATE:</b> NY	<b>ZIP CODE:</b> 13850
<b>FACILITY TOWN:</b> Vestal		<b>FACILITY COUNTY:</b> Broome	<b>FACILITY PHONE NUMBER:</b> 607-797-2331
<b>FACILITY NYS PLANNING UNIT:</b> A list of NYS <a href="#">Planning Units</a> can be found at the end of this report). Broome County			<b>NYSDEC REGION #:</b> 7
<b>360 PERMIT #:</b> Refer to DEC Permit	<b>DATE ISSUED:</b> 04/19/16	<b>DATE EXPIRES:</b>	<b>NYS DEC ACTIVITY CODE OR REGISTRATION NUMBER:</b> (Refer to DEC Registration 04R20034
<b>FACILITY CONTACT:</b> Mike Noel		<input type="checkbox"/> public <input checked="" type="checkbox"/> private	<b>CONTACT PHONE NUMBER:</b> 475-225-3846
<b>CONTACT FAX NUMBER:</b>			
<b>CONTACT EMAIL ADDRESS:</b> michael.noel@tomra.com			
OWNER INFORMATION			
<b>OWNER NAME:</b> Tomra NY Recycling LLC		<b>OWNER PHONE NUMBER:</b> 475-225-3846	
		<b>OWNER FAX NUMBER:</b>	
<b>OWNER ADDRESS:</b> One Corporate Drive, Suite 710		<b>OWNER CITY:</b> Shelton	
		<b>STATE:</b> CT	<b>ZIP CODE:</b> 06484
<b>OWNER CONTACT:</b> Mike Noel		<b>OWNER CONTACT EMAIL ADDRESS:</b> michael.noel@tomra.com	
OPERATOR INFORMATION			
<b>OPERATOR NAME:</b> <input checked="" type="checkbox"/> same as owner		<input type="checkbox"/> public <input checked="" type="checkbox"/> private	
PREFERENCES			
<b>Preferred address to receive correspondence:</b> <input type="checkbox"/> Facility location address <input checked="" type="checkbox"/> Owner address <input type="checkbox"/> Other (provide):			
<b>Preferred email address:</b> <input type="checkbox"/> Facility Contact <input checked="" type="checkbox"/> Owner Contact <input checked="" type="checkbox"/> Other (provide):			
<b>Preferred individual to receive correspondence:</b> <input type="checkbox"/> Facility Contact <input checked="" 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 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 transported by each:

100 % Road: Material s : Deposit Used Beverage Containers & Packaging                      % Rail: Material s : \_\_\_\_\_  
 \_\_\_\_\_ % Water: Material s : \_\_\_\_\_                      % Other specify: \_\_\_\_\_): Material s : \_\_\_\_\_

SERVICE AREA OF MATERIAL RECEIVED <small>where the material is coming from</small>					
MATERIAL	SOLID WASTE MANAGEMENT FACILITY FROM WHICH IT WAS RECEIVED <small>Name Address)</small> OR “ <i>Direct Haul</i> ”	SERVICE AREA STATE OR COUNTRY	SERVICE AREA COUNTY OR PROVINCE	SERVICE AREA NYS PLANNING UNIT <small>See Attached List of NYS Planning Units</small>	TONS RECEIVED
<b>Commingled Containers</b> <small>metal, glass, plastic</small>					
<b>Commingled Paper</b> <small>all grades</small>					
<b>Single Stream</b> <small>(total</small>					
<b>Other</b> <small>(specify</small>					
<small>Deposit Used Beverage Containers &amp; Packaging</small>	Direct Haul	NY	Broome County	Broome County	
See Attachment 1					
<b>TOTAL MATERIAL RECEIVED (tons :</b>					_____

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

## 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 : Deposit Used Beverage Containers & Packaging \_\_\_\_\_ % Rail: Material s : \_\_\_\_\_  
 \_\_\_\_\_ % Water: Material s : \_\_\_\_\_ % Other specify: \_\_\_\_\_): Material s : \_\_\_\_\_

PAPER RECOVERED					
RECOVERED MATERIAL	DESTINATION <small>Name Address)</small>	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>
<b>Commingled Paper</b> <small>all grades</small>					
<b>Corrugated Cardboard</b>	See Attachment 2				
<b>Junk Mail</b>					
<b>Magazines</b>					
<b>Newspaper</b>					
<b>Office Paper</b>	See Attachment 2				
<b>Paperboard / Boxboard</b>					
<b>Other Paper (specify</b>					
<b>TOTAL PAPER RECOVERED (tons :</b> _____					

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 5 – RECYCLABLES & RECOVERED MATERIALS** (continued)

**GLASS RECOVERED**

<b>RECOVERED MATERIAL</b>	<b>DESTINATION</b> Name Address)	<b>DESTINATION STATE OR COUNTRY</b>	<b>DESTINATION COUNTY OR PROVINCE</b>	<b>DESTINATION NYS PLANNING UNIT</b> See Attached List of NYS <u>Planning Units</u>	<b>TONS RECOVERED</b> out of facility
<b>Container Glass</b>	See Attachment 2				
<b>Industrial Scrap Glass</b>					
<b>Other Glass</b> (specify					
<b>TOTAL GLASS RECOVERED (tons :</b>					_____

**METAL RECOVERED**

<b>RECOVERED MATERIAL</b>	<b>DESTINATION</b> Name Address)	<b>DESTINATION STATE OR COUNTRY</b>	<b>DESTINATION COUNTY OR PROVINCE</b>	<b>DESTINATION NYS PLANNING UNIT</b> See Attached List of NYS <u>Planning Units</u>	<b>TONS RECOVERED</b> out of facility
<b>Aluminum Foil / Trays</b>					
<b>Bulk Metal</b>					
<b>Enameled Appliances / White Goods</b>					
<b>Industrial Scrap Metal</b>					
<b>Tin Aluminum Containers</b>	See Attachment 2				
<b>Other Metal</b> (specify					
<b>TOTAL METAL RECOVERED (tons :</b>					_____

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 5 – RECYCLABLES & RECOVERED MATERIALS** continued

PLASTIC RECOVERED					
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 Plastic # 1 - #7)					
PET plastic #1)	See Attachment 2				
HDPE plastic #2)					
Other Rigid Plastics #3 - #7)					
Industrial Scrap Plastic					
Plastic Film & Bags	See Attachment 2				
Other Plastics (specify					
<b>TOTAL PLASTIC RECOVERED (tons :</b>					

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.

**VOLUME TO WEIGHT CONVERSION FACTORS**

MATERIAL	EQUIVALENT	MATERIAL	EQUIVALENT	MATERIAL	EQUIVALENT
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 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 - uncompactd	1 cubic yard 0.10 tons
NEWSPRINT - loose	1 cubic yard 0.29 tons	PLASTIC - styrofoam	1 cubic yard 0.02 tons	WHITE GOODS - compactd	1 cubic yard 0.5 tons
NEWSPRINT - compactd	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 - baled	1 cubic yard 0.38 tons	FERROUS METAL - cans w hole	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 MATERIAL RECOVERED					
RECOVERED MATERIAL	DESTINATION <small>Name Address)</small>	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	DESTINATION NYS PLANNING UNIT <small>See Attached List of NYS <u>Planning Units</u></small>	TONS RECOVERED <small>out of facility</small>
Commingled Containers <small>metal, glass, plastic</small>					
Commingled Paper Containers					
Single Stream <small>(total)</small>					
Other <small>(specify</small>					

**TOTAL MIXED MATERIAL RECOVERED (tons : \_\_\_\_\_**

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

**TOTAL MISCELLANEOUS MATERIAL RECOVERED (tons : \_\_\_\_\_**

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

## 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.



## 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:

**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.

**Michael Noel** Digitally signed by Michael Noel  
Date: 2020.02.28 08:57:54 -05'00'  
\_\_\_\_\_  
Signature

**February 28, 2020**  
\_\_\_\_\_  
Date

**Michael Noel**  
\_\_\_\_\_  
Name (Print or Type)

**Manager, Governmental Affairs**  
\_\_\_\_\_  
Title (Print or Type)

**michael.noel@tomra.com**  
\_\_\_\_\_  
Email (Print or Type)

**One Corporate Drive, Suite 710**  
\_\_\_\_\_  
Address

**Shelton**  
\_\_\_\_\_  
City

**CT 06484**  
\_\_\_\_\_  
State and Zip

**(475) 225-3846**  
\_\_\_\_\_  
Phone Number

ATTACHMENTS:  YES  NO

TOMRA New York Recycling-Vestal-Region 2019		Weight (lbs.)				
Stop Primary Route State Code	Stop Primary Route County Desc	CAN	GLASS	PET	Lbs	Tons
NY	ALBANY	542,957	2,032,476	681,754		
NY	ALLEGANY			5,453		
NY	BRONX	1,842,267	13,320,236	4,602,041		
NY	BROOME	1,579,230	4,646,105	1,651,537	7,876,872.03	3,938.44
NY	CATTARAUGUS	36,625	110,504	58,648		
NY	CAYUGA	313,537	827,639	443,206		
NY	CHAUTAUQUA	644,357	2,104,831	1,401,900		
NY	CHENANGO	156,582	443,852	289,689	890,123.03	445.06
NY	CLINTON	520,806	1,252,297	823,907		
NY	COLUMBIA	57,465	260,754	108,961		
NY	CORTLAND	8,377	69,941	12,268		
NY	DELAWARE	137,112	372,413	196,092	705,616.20	352.81
NY	DUTCHESS	323,629	732,861	1,167,008		
NY	ERIE	3,918,149	19,210,975	5,003,552		
NY	ESSEX	148,892	573,986	166,909		
NY	FRANKLIN	248,644	1,102,385	332,668		
NY	FULTON	271,643	738,049	314,309		
NY	GENESEE	278,760	1,270,539	324,253		
NY	GREENE	106,960	502,005	228,965		
NY	HAMILTON	10,383	18,207	12,057		
NY	HERKIMER	136,319	305,699	324,533		
NY	JEFFERSON	378,556	1,325,275	937,817		
NY	KINGS	1,150,247	1,007,627	2,578,739		
NY	LEWIS	93,603	142,768	156,440		
NY	LIVINGSTON	312,479	800,605	352,033		
NY	MADISON	159,654	1,104,821	446,140		
NY	MANHATTAN	488,334	3,361,519	1,295,715		
NY	MONROE	2,710,400	16,951,130	4,386,283		
NY	MONTGOMERY	283,223	743,800	293,806		
NY	NASSAU	144,540	548,541	791,891		
NY	NIAGARA	1,050,162	3,293,740	1,278,069		
NY	ONEIDA	1,056,703	3,270,972	1,295,748		
NY	ONONDAGA	2,318,008	7,570,268	2,716,930		
NY	ONTARIO	508,070	2,196,618	689,085		

TOMRA New York Recycling-Vestal-Region 2019		Weight (lbs.)				
Stop Primary Route State Code	Stop Primary Route County Desc	CAN	GLASS	PET	Lbs	Tons
NY	ORANGE	669,558	2,752,489	1,635,993		
NY	ORLEANS	161,962	560,170	165,404		
NY	OSWEGO	519,045	4,320,438	751,212		
NY	OTSEGO	189,104	537,518	242,575		
NY	PUTNAM	57,282	349,939	226,514		
NY	QUEENS	1,272,426	4,387,427	2,631,656		
NY	RENSSELAER	475,317	2,042,898	467,609		
NY	RICHMOND	37,937	9,032	170,772		
NY	ROCKLAND	752,966	1,519,326	1,005,015		
NY	SARATOGA	950,761	7,622,568	700,824		
NY	SCHENECTADY	3,316,599	12,295,536	4,075,057		
NY	SCHOHARIE	142,709	566,505	135,343		
NY	SENECA	144,009	420,083	203,971		
NY	ST. LAWRENCE	617,990	2,195,417	651,592		
NY	STEUBEN	31,353	54,834	123		
NY	SUFFOLK	474,430	1,381,196	1,108,840		
NY	SULLIVAN	107,332	288,357	264,349		
NY	TIOGA	44,371	137,463	45,958	227,791.45	113.90
NY	ULSTER	193,646	727,056	512,967		
NY	WARREN	352,085	869,906	384,967		
NY	WASHINGTON	272,550	698,397	206,007		
NY	WAYNE	399,448	1,102,995	548,305		
NY	WESTCHESTER	912,673	8,303,207	3,600,626		
NY	WYOMING	112,715	328,351	111,670		
NY	YATES	97,230	437,952	93,906		
TOTAL		34,242,168	146,122,499	55,309,662		<b>4,850.20</b>

2019 Recyclables Handling & Recovery Facility Annual Report

Tomra, Vestal, NY

			New York	Destination NYS
Commodity Type	Customer	Delivery Address	County	Planning Unit
Glass	Central Recycling Co-Op Inc	260 Latta Brook Park Horseheads, NY 14845		
PET	Ultrepet	136C Fuller Rd Albany , NY 12205		
PET	Unifi Manufacturing	2920 Vance Street Ext. Reidsville , NC 27320		
ALUM	Alcoa Recycling Co., Inc	300 N. Hall Road Alcoa , TN 37701		
ALUM	Logan Aluminum	6920 Lewisburg Road, Russellville, KY 42276		
ALUM	Novelis Berea	302 Mayde Berea , KY 40403		
ALUM	Novelis Greensboro	1261 Willow Run Road Greensboro, GA 30642		
ALUM	Novelis Oswego	123 Great Bear Road, Fulton, NY		
ALUM	Real Alloy	805 Gardner Lane Rd, Morgantown, KY 42261		
CARD	Corcoran Environmental Services	<u>Fitchburg Paperboard</u> 100 Newark Ave Fitchburg, MA 01420		
OP	Gulfstream	1100 West Grant Street Hartford City , IN 47348		
OP	AAA Polymer	68 Freeman Street AAA Polymer Brooklyn NY 11222		

**Grand Total**

*100% of volume moved by truck.*

**Section 2 - Material Received (tons); and Section 5 - Recyclables & Recovered Materials (tons)\***

January	February	March	April	May	June	July	August	September	October	November	December	Grand Total
					64	66	51		54	52	11	298
100	20	121	103	103	124	124	123	139	118	77	87	1,240
	41											41
				20								20
					21							21
		20	41	20		59	85	103	83	100	60	571
20												20
42	20		20	40		20			20			162
20	61	62	41		82	20	20					306
								21				21
				21		8		8			18	55
	20											20
<b>183</b>	<b>162</b>	<b>203</b>	<b>205</b>	<b>204</b>	<b>291</b>	<b>297</b>	<b>279</b>	<b>271</b>	<b>275</b>	<b>229</b>	<b>177</b>	<b>2,776</b>