# RECYCLABLES HANDLING & RECOVERY FACILITY ANNUAL REPORT

(If you need assistance filling out this form please email <a href="mailto:swmfannualreport@dec.ny.gov">swmfannualreport@dec.ny.gov</a> 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:				_	• •		
Chemung County L		treet Tr	ansfer Station				
FACILITY LOCATION ADDRESS	FACILITY	CITY:		STAT	E:	ZIP CODE:	
1690 Lake St.		Elmir			NY		14901
FACILITY TOWN:		FACILITY COUNTY:			FACILITY PHONE NUMBER:		
Elmira	<u>-</u>				1-800-CASELLA		
FACILITY NYS PLANNING UNIT: Chemung County	(A list of NY	S <u>Planning Ur</u>	nits can be found at the end of	this repo	ort). I		DEC ION#:8
360 PERMIT #: (Refer to DEC	DATE IS	SUED:	DATE EXPIRES:				TY CODE OR
Permit) 8-0730-0009/00001-0	10/28	3/17	10/27/27	REGIS DEC Re	gistration	ON 1	NUMBER:(Refer to 8T05
FACILITY CONTACT:		□ public	CONTACT PHONE	С	ONTAC	T F	AX NUMBER:
Alexander Roberts		■ private	<b>NUMBER:</b> 607-873-3240				
CONTACT EMAIL ADDRESS: alexander.roberts@casella.com							
			NFORMATION				
OWNER NAME:							MBER:
Chemung County		607-737-2301			607-737-0351		
OWNER ADDRESS:		OWNER C		STATE	1 '	ZIP CODE:	
203 Lake St.		<del></del>			14901		
OWNER CONTACT:		OWNER CONTACT EMAIL ADDRESS:					
Christopher J. Moss			@chemungcoul	ntyny	.gov		
OPERATOR NAME:	asowner	PERATOR	RINFORMATION				
	doomici				∃public ∃privat		
	PREFERENCES						
Preferred address to receive correspondence: ☐ Facility location address ☐ Owner address  1488 County Route 60, Elmira, NY 14901							
Preferred email address: Facility Contact							
Preferred individual to receive correspondence:  Facility Contact  Owner Contact							
Did you operate in 2019? Yes  No;	-		Sections 1 and 11. If yo	u no lon	ger plar	n 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: <a href="http://www.dec.ny.gov/chemical/52706.html">http://www.dec.ny.gov/chemical/52706.html</a>.

#### **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!

27.39 553.12	24.25 448.66	24.50 490.65	29.75 574.02	44.02 603.10	37.10 557.44	35.85 638.87
· · · · · · · · · · · · · · · · · · ·			<del>-</del>			<del></del>
553.12	448.66	490.65	574.02	603.10	557.44	638.87
				<del> </del>	,	
580.51	472.01	E1E 1E	602.77	047.40	J504.54	
just Septembe		November (tons)	December (tons)	To	tal Year	674.72  Daily Avg. (tons)
				<del> </del>		(10113)
35.37	24.39	11.90	16.05	345.26		<u> </u>
537.37	583.43	545.16	647.34	6777.75		
	35.37	September (tons)  September (tons)  35.37  October (tons)	September (tons)  September (tons)  November (tons)  35.37  24.39  11.90	September (tons) October (tons) December (tons)  35.37 24.39 11.90 16.05	September (tons)	September (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, cross out an unused type and fill in the other materials name. This information is proprietary to our company but can be provided upon request.

557.06

663.39

7123.01

607.82

Total Tons Received

633.28

572.74

## 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): Commingled Paper, Single Stream	% Rail: Material(s):				
% Water: Material(s):	% Other (specify:): Material(s):	_			

	SERVICE AREA OF	MATERIALIRE	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 Planning Units)	TONS RECEIVED
Commingled Containers (metal, glass, plastic)					
	Direct Haul	NY	Chemung County	Chemung County	339.44
Commingled Paper (all grades)	Direct Haul	NY	Steuben County	Steuben County	3,24
<u> </u>	Direct Haul	NY	Tioga County	Tioga County	2.58
0: 1 01	Direct Haul	PA	Bradford County	Bradford County	225.34
Single Stream (total)	Direct Haul	NY	Chemung County	Chemung County	5786.77
· ,	Direct Haul	NY	Schuyler County	Schuyler County	286.18
Single Stream	Direct Haul	NY	Steuben County	Steuben County	449.46
		<u>                                     </u>	TOTAL MATF	RIAL RECEIVED (tons	· 7123.01

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) = Percent Residue Calcu	Residue destination (Name & Add Ilation: Total tons residue/Total tons material received )	iress) ( 100 =					
	SECTION 5 - RECYCLABLES & RECOVERED MATERIALS						
Please identify destination of recyclable materials. Indicate the name of the facility, <u>address</u> , 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:    Material(s): Tires, Electronics, Bulk Metal							
	l(s):	% Ot	her (specify:	): Material(s):			
	PAPERR	ECOVERED*		200			
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 Paper (all grades)							
Corrugated	Proprietary Information	NY	Chemung County	Chemung County	56.66		
Cardboard							
Junk Mail							
Magazines							
Newspaper							
Office Paper							
Paperboard/ Boxboard							
Other Paper (specify)							
			TOTAL DAD	ED DECOVEDED (tone):	EC CC		

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)

OLACO DE	OVERE			
GIASS RE	ASMENED.			in a second second
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)
		TOTAL GLASS P	ECOVERED (tone):	
METALRE		TOTAL GLASS I	ECOVERED (tells).	Control of the second of the s
DESTINATION (Name & Address)	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	DESTINATION NYS PLANNING UNIT (See Attached List of	TONS RECOVERED (out of facility)
			WIO Flamming Units)	(out of laterity)
Kaplan's Scrapyard	NY	Chemung County	Chemung County	30.24
		TOTAL METAL F	RECOVERED (tons): 3	0.24
	DESTINATION (Name & Address)  METAL RE  DESTINATION (Name & Address)	DESTINATION STATE OR COUNTRY  METAL REGOVERED  DESTINATION STATE OR COUNTRY  DESTINATION STATE OR COUNTRY	DESTINATION (Name & Address)  DESTINATION STATE OR COUNTRY  TOTAL GLASS R  METAL RECOVERED  DESTINATION (Name & Address)  DESTINATION (Name & Address)  DESTINATION STATE OR COUNTRY  DESTINATION STATE OR COUNTRY  COUNTY OR PROVINCE  Kaplan's Scrapyard  NY  Chemung County  Chemung County	DESTINATION (Name & Address)  DESTINATION STATE OR COUNTRY  DESTINATION OCCUPANTY OR PROVINCE  TOTAL GLASS RECOVERED (tons):  METAL RECOVERED  DESTINATION (Name & Address)  DESTINATION (Name & Address)  DESTINATION (Name & Address)  DESTINATION (Name & Address)

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 RI	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 (#1 - #7)						
PET (plastic #1)						
HDPE (plastic #2)						
Other Rigid Plastics (#3 - #7)						
Industrial Scrap Plastic						
Plastic Film & Bags						
Other Plastics (specify)						
	TOTAL PLASTIC 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 name.

#### **VOLUME TO WEIGHT CONVERSION FACTORS**

MATERIAL	EQUIVA	LENT	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 - whole	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		TWO HELDS	
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
	1.197	100000	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)

A SECTION OF THE SECT	MIXED MATERIA		TI LITUALO (COMO					
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 Containers (metal, glass, plastic)								
Commingled Paper & Containers								
0. 1 0.	Proprietary Information	NY	Chemung County	Chemung County	6474.93			
Single Stream (total)								
Other (specify)								
	MISCELLANEOUS			L RECOVERED (tons	): 6 <u>474.94</u>			
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)			
Electronics								
Textiles								
Other (specify)								
	<u> </u>	OTAL MISCELLA	NEOLIS MATERIA	N DECOVERED (fond	<u> </u>			
	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**

Yes				the facility during the for each incident (att	reporting period? ach additional sheets if necessary):
	Date Rece	ived	Type Received	Date Disposed	Disposal Method & Location
ļ					
	SECT	ION 7 -	COST ESTIMAT	ES AND FINANC	IAL ASSURANCE DOCUMENTS
Are the	ere required	i cost est	mates and financial	assurance document	s for closure?
Yes	■ No	If yes, a Closure	ittach additional she Plan?	ets reflecting annual a	adjustments for inflation and any changes to the
			SE	CTION 8 – PROBI	LEMS
Were a facility	any problem procedures	ns encour )?	tered during the rep	orting period (e.g., sp	ecific occurrences which have led to changes in
Yes	■No	If yes, a problem	ttach additional shee	ets identifying each pr	oblem and the methods for resolution of the
			SE	CTION 9 – CHAN	GES
Were th	here any ch	anges fro	m approved reports	, plans, specifications	, and permit conditions?
Yes	■ No	If yes, a	ttach additional shee	ets identifying changes	s with a justification for each change.
					·
	SEC	TION 1	0 - PERMIT/CON	ISENT ORDER RI	EPORTING REQUIREMENTS
Are the form?	re any addi	tional per	mit/consent order re	porting requirements	not covered by the previous sections of this
Yes	■No	If yes, at response		ts identifying the repo	rting requirements with their respective

#### 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.

Alexangles Rolls	02/26/2020 Date
Alexander Roberts	Environmental Analyst
Name (Print or Type)	Title (Print or Type)
alexander.roberts@casella.	com
Email (	Print or Type)
1488 County Route 60	Elmira
Address	City
NY 14901	<sub>(</sub> 607 <sub>)</sub> 873_3240
State and Zip	Phone Number