

## 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			
FACILITY NAME: <b>Hanna Paper Recycling Inc.</b>			
FACILITY LOCATION ADDRESS: <b>475 Ludwig Avenue</b>	FACILITY CITY: <b>Buffalo</b>	STATE: <b>NY</b>	ZIP CODE: <b>14227</b>
FACILITY TOWN: <b>Buffalo</b>	FACILITY COUNTY: <b>Erie</b>	FACILITY PHONE NUMBER: <b>716-891-9312</b>	
FACILITY NYS PLANNING UNIT: (A list of NYS <a href="#">Planning Units</a> can be found at the end of this report). NEST			NYSDEC REGION #: <b>9</b>
360 PERMIT #: (Refer to DEC Permit)	DATE ISSUED: <b>Dec 20 2018</b>	DATE EXPIRES: <b>Dec 20 2023</b>	NYS DEC ACTIVITY CODE OR REGISTRATION NUMBER: (Refer to DEC Registration) <b>15R20017</b>
FACILITY CONTACT: <b>Erin Riley</b>	<input type="checkbox"/> public <input checked="" type="checkbox"/> private	CONTACT PHONE NUMBER: <b>716-891-9312 ext. 10</b>	CONTACT FAX NUMBER: <b>716-891-4710</b>
CONTACT EMAIL ADDRESS: <b>ERILEY@HANNAPAPER.COM</b>			
OWNER INFORMATION			
OWNER NAME: <b>The Hanna Group Ltd.</b>	OWNER PHONE NUMBER: <b>905-475-9844</b>	OWNER FAX NUMBER: <b>905-475-5537</b>	
OWNER ADDRESS: <b>70 Addiscott Court</b>	OWNER CITY: <b>Markham</b>	STATE: <b>ON</b>	ZIP CODE: <b>L6G 1A6</b>
OWNER CONTACT: <b>Maureen Barton</b>	OWNER CONTACT EMAIL ADDRESS: <b>mbarton@hannapaper.com</b>		
OPERATOR INFORMATION			
OPERATOR NAME: <input checked="" type="checkbox"/> same as owner		<input type="checkbox"/> public <input checked="" type="checkbox"/> private	
PREFERENCES			
Preferred address to receive correspondence: <input checked="" type="checkbox"/> Facility location address <input type="checkbox"/> Owner address <input type="checkbox"/> Other (provide):			
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:

100 % Scale Weight

       % 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)		-5	0	1	1	0	1	8
Commingled Paper (all grades)		1541	1301	1537	1374	1450	1318	1253
Single Stream (total)								
Other (specify)								
<b>Total Tons Received</b>		1536	1301	1538	1375	1450	1319	1261
Material	August (tons)	September (tons)	October (tons)	November (tons)	December (tons)	Total Year (tons)	Daily Avg. (tons)	
Commingled Containers (metal, glass, plastic)	1	1	1	1	0	10		
Commingled Paper (all grades)	1336	1314	1398	1096	1149	16067		
Single Stream (total)								
Other (specify)								
<b>Total Tons Received</b>	1337	1315	1399	1097	1149	16077		

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 transported by each:

100 % Road: Material(s): \_\_\_\_\_ % Rail: Material(s): \_\_\_\_\_  
 \_\_\_\_\_ % Water: Material(s): \_\_\_\_\_ % Other (specify: \_\_\_\_\_): Material(s): \_\_\_\_\_

SERVICE AREA OF MATERIAL RECEIVED (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 <small>(See Attached List of NYS Planning Units)</small>	TONS RECEIVED
<b>Commingled Containers</b> <small>(metal, glass, plastic)</small>	SEE ATTACHED SCHEDULE				
<b>Commingled Paper</b> <small>(all grades)</small>					
<b>Single Stream</b> <small>(total)</small>					
<b>Other</b> (specify)					
<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 5 – RECYCLABLES & RECOVERED MATERIALS** (continued)

GLASS RECOVERED					
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					
Industrial Scrap Glass					
Other Glass (specify)					
<b>TOTAL GLASS RECOVERED (tons):</b>					
METAL RECOVERED					
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					
Bulk Metal					
Enameled Appliances / White Goods					
Industrial Scrap Metal					
Tin & Aluminum Containers					
Other Metal (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 (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)					
<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 - 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 - 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 (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					
Single Stream (total)					
Other (specify)					
<b>TOTAL MIXED MATERIAL RECOVERED (tons):</b>					_____
MISCELLANEOUS MATERIAL RECOVERED					
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)					
<b>TOTAL MISCELLANEOUS MATERIAL 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

### 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.



Signature

February 10, 2020

Date

Maureen Barton

Name (Print or Type)

Vice President, Finance

Title (Print or Type)

mbarton@hannapaper.com

Email (Print or Type)

70 Addiscott Court

Address

Markham

City

ON L6G 1A6

State and Zip

(905) 475-9844

Phone Number

ATTACHMENTS:  YES  NO

**SECTION 3 - SERVICE AREA OF MATERIAL RECEIVED**

Recyclable Material	Management Facility From	Service Area State or Country	County or Province	NYS Planning Unit	Tons Recycled
Metal /Plastic	Direct Haul	NY	Erie	N/A-Buffalo	7.00
Comingled Paper (all grades)	Direct Haul	NY	Brooklyn	2-New York City	-
	Direct Haul	NY	Onondaga	7-Onondaga	554.00
	Direct Haul	NY	Oswego	7-Oswego	19.00
	Direct Haul	NY	Herkimer	6-Herkimer	46.00
	Direct Haul	NY	Orleans	8-Orleans	184.00
	Direct Haul	NY	Genesee	8-GLOW	36.00
	Direct Haul	NY	Livingston	8-GLOW	15.00
	Direct Haul	NY	Monroe	8-Monroe	18.00
	Direct Haul	NY	Ontario	8-Ontario	45.00
	Direct Haul	NY	Allegany	9-Allegany	-
	Direct Haul	NY	Cattaraugus	9-Cattaraugus	-
	Direct Haul	NY	Chautauqua	9-Chautauqua	235.00
	Direct Haul	NY	Wyoming	9-GLOW	2.00
	Direct Haul	NY	Erie	9-NEST	302.00
	Direct Haul	NY	Niagara	9-Niagara	1,004.00
	Direct Haul	NY	Erie	9-NWCB	874.00
	Direct Haul	NY	Erie	N/A-Buffalo	10,973.00
	Direct Haul	IL		N/A	1.00
	Direct Haul	PA		N/A	1,252.00
	Direct Haul	FL		N/A	-
	Direct Haul	GA		N/A	-
	Direct Haul	CT		N/A	188.00
	Direct Haul	MI		N/A	-
	Direct Haul	RI		N/A	-
	Direct Haul	VT		N/A	-
	Direct Haul	Canada	ON		N/A
					<b>16,075.00</b>

Hanna Paper Recycling Inc.  
Section S

Row Labels	State or Country	County or Province	NYS Planning Unit	Tons Recovered
<b>Corrugated cardboard</b>				
	Canada	ON	N/A	1,490
				16
	Canada	ON	N/A	16
<b>Corrugated cardboard Total</b>				<b>1,506</b>
<b>Office Paper</b>				
	NY	Erie	9-Nest	1
	Canada	QC	N/A	1,646
	Canada	ON	N/A	146
	Canada	QC	N/A	146
	Canada	QC	N/A	361
	MI	N/A	N/A	5,828
	Canada	QC	N/A	1,105
	Canada	QC	N/A	807
	Canada	QC	N/A	807
	Canada	QC	N/A	2
<b>Office Paper Total</b>				<b>9,896</b>
<b>Newspaper</b>				
	CT	N/A	N/A	322
				1
	NY	Orleans	8-Orleans	1
	Canada	ON	N/A	20
				20
	NY			1

Hanna Paper Recycling Inc.  
Section 5

Row Labels	State or Country	County or Province	NYS Planning Unit	Tons Recovered
Newspaper	NY	Buffalo	N/A	1
				200
	Canada	ON	N/A	200
	NY	Buffalo	N/A	
				471
	Canada	QC	N/A	471
				267
	IL	N/A	N/A	267
	NY	Erie	9-Buffalo	1
				1
	NY	?	?	1
<b>Newspaper Total</b>				<b>1,284</b>
<b>Boxboard</b>				
				<b>3,140</b>
	VT	N/A	N/A	3,140
				107
	NY	Jefferson	6-DANC	107
				22
	Canada	ON	N/A	22
				88
	Canada	ON	N/A	88
				22
	Canada	ON	N/A	22
<b>Boxboard Total</b>				<b>3,379</b>
<b>Misc. Metal</b>				
				<b>2</b>
	NY	Erie	9-Buffalo	2
	NH	N/A	N/A	
<b>Misc. Metal Total</b>				<b>2</b>

Hanna Paper Recycling Inc.  
Section 5

Row Labels	State or Country	County or Province	NYS Planning Unit	Tons Recovered
Plastic				6
	NY	Erie	9-Nest	6
				2
	NY	Erie	9-Nest	2
Plastic Total				8
Grand Total				16,075