



# 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, 2021.

This annual report is for the year of operation from January 01, 2020 to December 31, 2020

## SECTION 1 – GENERAL INFORMATION

FACILITY INFORMATION			
FACILITY NAME: Cortland County Recycling Facility			
FACILITY LOCATION ADDRESS: 137 S. Pendleton Street	FACILITY CITY: Cortland	STATE: NY	ZIP CODE: 13045
FACILITY TOWN: Cortland	FACILITY COUNTY: Cortland	FACILITY PHONE NUMBER: 607-753-9377	
FACILITY NYS PLANNING UNIT: (A list of NYS Planning Units can be found at the end of this report). Cortland County			NYSDEC REGION #: 7
360 PERMIT #: (Refer to DEC Permit) 00031/12M01	DATE ISSUED:	DATE EXPIRES:	NYS DEC ACTIVITY CODE OR REGISTRATION NUMBER: (Refer to DEC Registration) 12M01
FACILITY CONTACT: Trisha Jesset	<input checked="" type="checkbox"/> public <input type="checkbox"/> private	CONTACT PHONE NUMBER: (607)753-9377	CONTACT FAX NUMBER:
CONTACT EMAIL ADDRESS: tjesset@cortland-co.org			
OWNER INFORMATION			
OWNER NAME: Cortland County	OWNER PHONE NUMBER: (607)753-9377	OWNER FAX NUMBER:	
OWNER ADDRESS: 60 Central Ave.	OWNER CITY: Cortland	STATE: NY	ZIP CODE: 13045
OWNER CONTACT: Trisha Jesset	OWNER CONTACT EMAIL ADDRESS: tjesset@cortland-co.org		
OPERATOR INFORMATION			
OPERATOR NAME:	<input checked="" type="checkbox"/> same as owner	<input checked="" type="checkbox"/> public <input type="checkbox"/> private	
PREFERENCES			
Preferred address to receive correspondence: <input type="checkbox"/> Facility location address <input checked="" 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 2020?  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: \_\_\_\_\_)

Recycling Type: Single Stream

Material	Tip Fee (\$/Ton)	January (tons)	February (tons)	March (tons)	April (tons)	May (tons)	June (tons)	July (tons)
<b>Commingled Containers</b> (metal, glass, plastic)								
<b>Commingled Paper</b> (all grades)	0	0.00	17.72	24.49	31.15	24.48	21.4	33.85
<b>Single Stream</b> (total)	80.00	95.89	359.94	223.15	164.57	179.39	204.37	185.51
<b>Other</b> (specify)Glass	0	6.73	13.03	14	17.23	17.13	21.3	20.47
<b>Total Tons Received</b>		102.62	390.69	261.64	212.95	221.00	247.07	239.83
Material	August (tons)	September (tons)	October (tons)	November (tons)	December (tons)	Total Year (tons)	Daily Avg. (tons)	
<b>Commingled Containers</b> (metal, glass, plastic)								
<b>Commingled Paper</b> (all grades)	18.48	17.09	17.03	15.61	24.46	245.76	0.94	
<b>Single Stream</b> (total)	180.48	216.02	209.64	187.38	211.31	2,417.65	9.23	
<b>Other</b> (specify)Glass	18.83	14.67	17.51	14.39	15.37	190.66	0.73	
<b>Total Tons Received</b>	218.15	247.78	244.18	217.38	251.14	2854.07	10.9	

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 (See Attached List of NYS Planning Units)	TONS RECEIVED	
Commingled Containers (metal, glass, plastic)						
Commingled Paper (all grades)	Direct Haul	NY	Cortland County	Cortland County	245.76	
Single Stream (total)	Direct Haul	NY	Cortland County	Cortland County	2,417.65	
Other (specify)						
Glass	Direct Haul	NY	Cortland County	Cortland County	190.66	
<b>TOTAL MATERIAL RECEIVED (tons):</b>					<b>2,854.07</b>	

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**SECTION 4 – RESIDUE**

Total residue (tons) = 217.59      Residue destination (Name & Address) Cortland County Landfill, 4708 Town Line Rd. McGraw NY 13101  
 Percent Residue Calculation: Total tons residue/Total tons material received x 100 = 9.00%

**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): \_\_\_\_\_ % Rail: Material(s): \_\_\_\_\_  
 % Water: Material(s): \_\_\_\_\_ % Other (specify: \_\_\_\_\_): 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 Units)	TONS RECOVERED (out of facility)
Commingled Paper (all grades)	Approved compost site adjacent to Cortland Count Landfill Cell 4708 Town Line Rd. McGraw, NY 13101	NY	Cortland County	Cortland County	245.76
Corrugated Cardboard					
Junk Mail					
Magazines					
Newspaper					
Office Paper					
Paperboard / Boxboard					
Other Paper (specify)					
<b>TOTAL PAPER RECOVERED (tons):</b>					<b>245.76</b>

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**SECTION 5 – RECYCLABLES & RECOVERED MATERIALS (continued)**

<b>GLASS RECOVERED</b>						
<b>RECOVERED MATERIAL</b>	<b>DESTINATION (Name &amp; Address)</b>	<b>DESTINATION STATE OR COUNTRY</b>	<b>DESTINATION COUNTY OR PROVINCE</b>	<b>DESTINATION NYS PLANNING UNIT (See Attached List of NYS Planning Units)</b>	<b>TONS RECOVERED (out of facility)</b>	
Container Glass	Cortland County Landfill	NY	Cortland County	Cortland County	190.66	
Industrial Scrap Glass						
Other Glass (specify)						
<b>TOTAL GLASS RECOVERED (tons):</b>					190.66	
<b>METAL RECOVERED</b>						
<b>RECOVERED MATERIAL</b>	<b>DESTINATION (Name &amp; Address)</b>	<b>DESTINATION STATE OR COUNTRY</b>	<b>DESTINATION COUNTY OR PROVINCE</b>	<b>DESTINATION NYS PLANNING UNIT (See Attached List of NYS Planning Units)</b>	<b>TONS RECOVERED (out of facility)</b>	
Aluminum Foil / Trays						
Bulk Metal						
Enameled Appliances / White Goods						
Industrial Scrap Metal						
Tin & Aluminum Containers						
Other Metal (specify)						
<b>TOTAL METAL RECOVERED (tons):</b>						

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**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>						

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**VOLUME TO WEIGHT CONVERSION FACTORS**

MATERIAL	EQUIVALENT	MATERIAL	EQUIVALENT	MATERIAL	EQUIVALENT
GLASS - w hole bottles	1 cubic yard	GLASS - crushed mechanically	1 cubic yard	ALUMINUM - cans - w hole	1 cubic yard
GLASS - semi crushed	1 cubic yard	GLASS - uncrushed manually	55 gallon drum	ALUMINUM - cans - flattened	1 cubic yard
PAPER - high grade loose	1 cubic yard	PLASTIC - PET - w hole	1 cubic yard		
PAPER - high grade baled	1 cubic yard	PLASTIC - PET - flattened	1 cubic yard		
PAPER - mixed loose	1 cubic yard	PLASTIC - PET - baled	1 cubic yard	WHITE GOODS - uncompacted	1 cubic yard
NEWSPRINT - loose	1 cubic yard	PLASTIC - styrofoam	1 cubic yard	WHITE GOODS - compacted	1 cubic yard
NEWSPRINT - compacted	1 cubic yard	PLASTIC - HDPE - w hole	1 cubic yard		
CORRUGATED - loose	1 cubic yard	PLASTIC - HDPE - flattened 1	1 cubic yard		
CORRUGATED - baled	1 cubic yard	PLASTIC - HDPE - baled	1 cubic yard	FERROUS METAL - cans whole	1 cubic yard
		PLASTIC - mixed (grocery bags)	45 gallon bag	FERROUS METAL - cans	1 cubic yard

**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)	Burt Adams Cortland County Landfill	NY NY	Broome County Cortland County	Broome County Cortland County	261.96 2,155.69	
Other (specify)						
<b>TOTAL MIXED MATERIAL RECOVERED (tons):</b>					<b>2,417.65</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	REACT -225 Colonial Dr. Horseheads, Ny 14845 SUNINKING Inc. - 4 Owens Rd. Brockport, NY 14420	NY NY	Chemung County Monroe County	Chemung County Monroe County	19.59 61.76	
Textiles						
Other (specify)						
<b>TOTAL MISCELLANEOUS MATERIAL RECOVERED (tons):</b>					<b>81.35</b>	

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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.



**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.

 P.E.  
\_\_\_\_\_  
Signature

2/9/2021  
\_\_\_\_\_  
Date

Trisha Jesset, P.E.  
\_\_\_\_\_  
Name (Print or Type)

Deputy Superintendent of Highways  
\_\_\_\_\_  
Title (Print or Type)

tjesset@cortland-co.org  
\_\_\_\_\_  
Email (Print or Type)

60 Central Ave.  
\_\_\_\_\_  
Address

Cortland  
\_\_\_\_\_  
City

NY, 13045  
\_\_\_\_\_  
State and Zip

(607) 753-9377  
\_\_\_\_\_  
Phone Number

ATTACHMENTS:  YES  NO

\*This page for reference only. Please do not return with submittal.\*

**Division of Materials Management  
New York State Department of Environmental Conservation  
Albany, New York 12233-7260**

**RECYCLABLES HANDLING & RECOVERY FACILITY**

A Recyclable Handling and Recovery Facility is a facility that receives source-separated recyclables. Further information and a listing of the recyclable handling and recovery facilities are available online at <http://www.dec.ny.gov/chemical/50793.html>.

If your facility is authorized to operate a construction and demolition debris handling and recovery facility you need to submit a Construction and Demolition Debris Handling and Recovery Facility Annual Report.

If your facility is authorized to operate as a transfer facility you need to submit a Transfer Facility Annual. If your facility is authorized to operate as a recyclables handling & recovery facility and a transfer facility you must submit both annual reports.

Forms for all solid waste management facilities can be found at <http://www.dec.ny.gov/chemical/52706.html> and a brief description of each type of facility can be found at <http://www.dec.ny.gov/chemical/8495.html>.

**Annual Report**

**Submit the Annual Report no later than March 1, 2021.**

Reporting of the information indicated on this Recyclables Handling and Recovery Facility Annual Report form is required pursuant to 6 NYCRR Part 360. Failure to provide the required information requested is a violation of Environmental Conservation Law. Timely submission of a properly completed form to the Department's Regional Office that has jurisdiction over your facility and to the Department's Central Office is required to meet the Annual/Quarterly Report requirements of 6 NYCRR Part 360.

Where the Annual Report requirements have been modified, appropriate Sections (as necessary to reflect the modification) must be completed and submitted with a copy of the Department's written notification which allows the modification.

Entries on the report forms should be either typewritten or neatly printed in black ink. Attach additional sheets if space on the pages is insufficient or supplementary information is required or appropriate.

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

Identify the facility's service area by indicating the type and amount of material received, the Solid Waste Management facility (SWMF) from which it was received by your facility (or Direct Haul), the corresponding State/Country, the County/Province, and the NYS Planning Unit from which waste was received. **Refer to the list of NYS Planning Units that can be found at the end of this report.** The Total Tons Received reported below should equal the Total Tons Received in Section 2. **DO NOT REPORT IN CUBIC YARDS!**

**Additional Service Area Guidance:**

1) Direct hauled from the generator of the recyclables. In the case where the recyclables are hauled to your recycling facility from the generator (i.e., hauled from residences, commercial establishments, etc.), "Direct Haul" would be the appropriate response in Column 2 under "Service Area". Please report the tonnage by material type and identify the state, county and planning unit where it was generated; or

2) Sent to your recycling facility from another solid waste management facility. Recyclables may be sent to your recycling facility from another solid waste management facility. In this case, please report the tonnage by material type from each sending solid waste management facility, as well as the sending facility's name, address, county, and the planning unit where the sending facility is located.