

RECYCLABLES HANDLING & RECOVERY FACILITY ANNUAL REPORT

Department of Environmental Conservation RECYCLABLES HANDLING & RECOVERY FACILITY ANNUAL REPORT Environmental (If you need assistance filling out this form please email 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:							
FACILITY LOCATION ADDRESS	<u> </u>	FACILITY	FACILITY CITY:		STATE:	ZIP CODE:	
FACILITY TOWN:		FACILITY	COUNTY:	FACI	LITY PHOI	NE NUMBER:	
					T		
FACILITY NYS PLANNING UNIT:	(A list of NY	'S <u>Planning Un</u>	its can be found at the end of	f this rep		SDEC GION#:	
360 PERMIT #: (Refer to DEC DATE IS		SUED:	DATE EXPIRES:			/ITY CODE OR I NUMBER:(Refer to	
Permit)					egistration)	I NOWIDER. (Refer to	
FACILITY CONTACT:		□ public □ private	CONTACT PHONE NUMBER:		CONTACT	FAX NUMBER:	
CONTACT EMAIL ADDRESS:							
CONTACT EMALE ADDITECT.		OWNED	INFORMATION				
OWNER NAME:			OWNER INFORMATION OWNER PHONE NUMBER: OWNER FAX NUMBER:				
OWNER NAME.		OWNER PHONE NUMBER.		OWNERT AX NOWIDER.			
OWNER ADDRESS:		OWNER C	SITY:		STATE:	ZIP CODE:	
OWNER CONTACT:		OWNER C	ONTACT EMAIL ADDR	ESS:		<u> </u>	
		OPERATO	RINFORMATION				
OPERATOR NAME: Sam	e as owner				□public □private		
		PREI	FERENCES		•		
Preferred address to receive corres ☐ Other (provide):	spondence	⊖: □ Facility l	ocation address		Owner addres	es	
Preferred email address: ☐ Facility Contact ☐ Owner Contact ☐ Other (provide):							
Preferred individual to receive correction Other (provide):	esponden	ce: □ _{Facil}	ity Contact 🔲 Owr	ner Conta	ct		
Did you operate in 2020? ☐ Yes	s; Complet	te this form.					
☐ No to relinquish your permit/registration Solid Waste Management Facility of	n associa	ted with this		nt activi	ty, also coi	mplete the "Inactive	

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!

pecify the methods used to m % Scale Weight % Truck Count	ododio tilo que		% Estimated % Other (Spec)	Recycling T	ype:	
Material	Tip Fee (\$/Ton)	January (tons)	February (tons)	March (tons)	April (tons)	May (tons)	June (tons)	July (tons)
Commingled Containers (metal, glass, plastic)								
Commingled Paper (all grades)								
Single Stream (total)								
Other (specify)								
Total Tons Receiv	/ed							
Material	August (tons)	September (tons)	October (tons)	November (tons)	December (tons)		l Year ons)	Daily Avg. (tons)
Commingled Containers (metal, glass, plastic)								
Commingled Paper (all grades)								
Single Stream (total)								
Other (specify)								
Total Tons 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.

SECTION 3 - SERVICE AREA OF MATERIAL RECEIVED

<u>Please identify where the material is coming from.</u> 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* <u>address</u> 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 tra	insported by eac	h:		
% Road: Material(s):	% Rail:	Material(s):		
% Water: Material(s):	% Othe	r (specify:): Material(s):	
· · · · · · · · · · · · · · · · · · ·	, 			, , ,	
	SERVICE AREA OF I	MATERIAL REC	EIVED(where the	material is coming from)	
	SOLID WASTE MANAGEMENT FACILITY FROM	SERVICE	SERVICE	SERVICE AREA	

	SERVICE AREA OF N	IATERIAL RE	CEIVED(where the r	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)					
Single Stream (total)					
Other (specify)					
			TOTAL MATER	RIAL RECEIVED (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 4 - RESIDUE

Total residue (tons) = Percent Residue Calci	Residue destination (Name & A ulation: Total tons residue/Total tons material received	Address) d x 100 =			
	SECTION 5 - RECYCLABL		— RED MATERIAL	S	
Please identify destination	ination of recyclable materials. Indicate the nan ation Planning Unit/Municipality and the amoun	ne of the facility, a t of material reco	<u>address,</u> corresp vered. DO NOT I	onding State/Country, (REPORT IN CUBIC YARI	County/Province, DS!
Specify transport metho	od, list type of material(s) and percentages of total mate (s):al(s):	erial transported by e	each: ail: Material(s):	\. Makarial(a)	
% vvater: Materia	II(S):	% U	tner (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)					
Corrugated Cardboard					
Junk Mail					
Magazines					
Newspaper					
Office Paper					
Paperboard / Boxboard					
Other Paper (specify)					
	<u>I</u>		TOTAL PAPI	ER 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.

SECTION 5 - RECYCLABLES & RECOVERED MATERIALS (continued)

	GLA	ASS 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)					
			TOTAL GLASS R	ECOVERED (tons):	
	MET	AL RECOVERED		<u> </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)
Aluminum Foil / Trays					
Bulk Metal					
Enameled Appliances / White Goods					
Industrial Scrap Metal					
Tin & Aluminum Containers					
Other Metal (specify)					
			TOTAL METAL D	ECOVERED (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.

SECTION 5 - RECYCLABLES & RECOVERED MATERIALS (continued)

	PLASTIC RE	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)					
		T	OTAL PLASTIC R	ECOVERED (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	EQUIV <i>A</i>	LENT	MATERIAL	EQUIVALENT		MATERIAL	EQUIV <i>A</i>	LENT
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 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)

	MIXED MATERIA	AL 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)					
		TOTAL	MIXED MATERIA	L RECOVERED (tons):	
	MISCELLANEOUS MA	TERIAL RECOVE	RED		
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)					
	T	TAL MISCELLA	 NEOUS MATERIA	AL 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

		olid waste been received	, ,		
□ Yes	□ No I	yes, give information bel	ow for each incident (at	tach additional sheets if necessary):	
D	ate Receiv	red Type Received	Date Disposed	Disposal Method & Location	
	SECTI	ON 7 - COST ESTIM	ATES AND FINANC	CIAL ASSURANCE DOCUMENTS	
Are ther	e required	cost estimates and finance	cial assurance documer	its for closure?	
□Yes	□No	If yes, attach additional s Closure Plan?	sheets reflecting annual	adjustments for inflation and any changes to the	
		;	SECTION 8 – PRO	BLEMS	
	ny problem procedures		reporting period (e.g., s	specific occurrences which have led to changes in	
□Yes	□No	If yes, attach additional sproblem.	sheets identifying each	problem and the methods for resolution of the	
			SECTION 9 – CHA	NGES	
Were th	ere any ch	anges from approved rep	orts, plans, specification	ns, and permit conditions?	
□Yes	☐ Yes ☐ No If yes, attach additional sheets identifying changes with a justification for each change.				
	SEC	TION 10 - PERMIT/C	ONSENT ORDER	REPORTING REQUIREMENTS	
Are ther form?	e any addi	tional permit/consent orde	er reporting requirement	ts not covered by the previous sections of this	
□Yes	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

 ${\bf Email\,address: SWMFannual report@dec.ny.gov}$

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.

	Signatur	e		Date
	Name (Print o	r Type)		Title (Print or Type)
		En	nail (Print or	Type)
	Address		 .	City
	State an	d Zip	_	() Phone Number
ATTACHMENTS:	YES	NO		

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) <u>Direct hauled from the generator of the recyclables</u>. In the case where the recyclables are hauled to your recycling facility from the generator (i.e., hauled from residences, commercial establishments, etc.), "<u>Direct Haul</u>" 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) <u>Sent to your recycling facility from another solid waste management facility</u>. 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.

New York State Planning Units & Regions

When completing the annual report, please use the <u>Planning Unit</u> listed below that corresponds with the municipality and county. Note: The Planning Unit is not the DEC Region.

DEC	Planning Unit	County	Municipality
Region		County	
	Glen Cove	_	Glen Cove (City)
	Hempstead	_	Hempstead (Town)
	Long Beach	Nesser	Long Beach (City)
	North Hempstead Solid Waste Management Authority	Nassau	North Hempstead (Town), except 10 villages (see below)
	Oyster Bay Solid Waste Disposal District		Oyster Bay (Town), except 17 villages (see below)
	Babylon	_	Babylon (Town)
1	Brookhaven	_	Brookhaven (Town)
· ·	East Hampton	_	East Hampton (Town)
	Fishers Island Waste Management District	_	Fishers Island
	Huntington	_	Huntington (Town)
	Islip Resource Recovery Agency	Suffolk	Islip (Town)
	Riverhead	_	Riverhead (Town)
	Shelter Island		Shelter Island (Town)
	Smithtown		Smithtown (Town)
	Southampton		Southampton (Town)
	Southold		Southold (Town), except Fishers Island
		Bronx	Bronx
		Kings	Kings (Brooklyn)
2	New York City	New York	New York (Manhattan)
		Queens	Queens
		Richmond	Richmond (Staten Island)
	Dutchess County	Dutchess	
	Orange County	Orange	
	Putnam County	Putnam	
3	Rockland County Solid Waste Management Authority (RCSWMA)	Rockland	
	Sullivan County	Sullivan	
	Ulster County Resource Recovery Agency (UCRRA)	Ulster	
	Westchester County	Westchester	
			Cohoes (City)
			Colonie (Town)
	Colonie	Albany	Colonie (Village)
			Menands (Village)
			Watervliet (City)
			Albany (City)
			Altamont (Village)
4			Berne (Town)
4			Bethelehem (Town)
	0 11 10 1 0 11 11 11 11		Green Island (Town/Village)
	Capital Region Solid Waste Management	Albany	Guilderland (Town)
	Partnersnip		Knox (Town)
			New Scotland (Town)
			, ,
			Voorheesville (Village)
	Partnership	Albally	Knox (Town) New Scotland (Town) Rensselaerville (Town)

		Ī	East Greenbush (Town)	
		Rensselaer	Rensselaer (City)	
4			Castleton-on-Hudson (Village)	
			Hoosick Falls (Village)	
			Nassau (Village)	
	Eastern Rensselaer County Solid Waste Management Authority	Rensselaer	Pittstown (Town)	
			. ,	
			Schaghticoke (Town/Village)	
			Stephentown (Town)	
			Valley Falls (Village)	
			Berlin (Town)	
			Grafton (Town)	
			Hoosick (Town) Inactive	
			Nassau (Town) Members	
			Petersburg (Town)	
			Poestenkill (Town)	
	Columbia County	Columbia	All, except Town of Canaan	
	Delaware County	Delaware		
	Greene County	Greene		
	Montgomery County	Montgomery		
	Otsego County	Otsego		
	Schoharie County	Schoharie		
	Schenectady County	Schenectady		
	Clinton County	Clinton		
	Essex County	Essex		
	County of Franklin Solid Waste Management	LOSCA		
	Authority (CFSWMA)	Franklin		
_	Fulton County	Fulton		
5	Hamilton County	Hamilton		
	•			
	Saratoga County	Saratoga		
	Warren County	Warren		
	Washington County	Washington		
	Development Authority of the North Country	Jefferson		
	(DANC)	Lewis		
6	(6/1140)	St. Lawrence		
	Oneida-Herkimer Solid Waste Authority	Oneida		
		Herkimer		
	Broome County	Broome		
	Cayuga County	Cayuga		
	Chenango County	Chenango		
	Cortland County	Cortland		
7	Madison County	Madison		
7	Onondaga County	Onondaga	All municipalities, except Town and Village of Skaneatles (See below)	
	Oswego County	Oswego	(2222300)	
	Tioga County	Tioga		
	Tompkins County	Tompkins		
	Chemung County	Chemung		
8	GLOW Region Solid Waste Management	Genesee		
	Committee	Livingston		
	Monroe County	Monroe		
	,			
	Ontario County	Ontario		
	Orleans County	Orleans		
	Schuyler County	Schuyler		
	Seneca County	Seneca		

	Steuben County	Steuben	
	Wayne County	Wayne	
	Yates County	Yates	
	Allegany County	Allegany	
	Cattaraugus County	Cattaraugus	
	Chautauqua County	Chautauqua	
	GLOW Region Solid Waste Management		
	Committee	Wyoming	
	Niagara	Niagara	
			Akron (Village)
			Alden (Town/Village)
			Angola (Village)
			Aurora (Town)
			Blasdell (Village)
			Boston (Town)
			Brant (Town)
			Cheektowaga (Town)
			Clarence (Town)
			Colden (Town)
			Collins (Town)
			Concord (Town)
			Depew (Village)
			East Aurora (Village)
	Northeast-Southtowns Solid Waste Management Board (NEST)		Eden (Town)
9		Erie	Elma (Town)
		LITE	Evans (Town)
			Farnham (Village)
			Gowanda (Village)
			Hamburg (Town/Village)
			Holland (Town)
			Lackawanna (City)
			Lancaster (Town/Village)
			Marilla (Town)
			Newstead (Town)
			North Collins (Town/Village)
			Orchard Park (Town/Village)
			Sardinia (Town)
			Sloan (Village)
			Springville (Village)
			Wales (Town)
			West Seneca (Town)
	Northwest Communities Solid Waste Management Board (NWCB)		Amherst (Town)
		Erie	Grand Island (Town)
			Kenmore (Village)
			Tonawanda (Town/Village)
			Williamsville (Village)

Municipalities Not Currently Affiliated With a Recognized Planning Unit

DEC Region	County	Non-Member Municipality	
1	Nassau	Great Neck Estates (Village) Great Neck Plaza (Village) Mineola (Village) New Hyde Park (Village) Old Westbury (Village) (portion) Plandome (Village) Plandome Manor (Village) Roslyn Harbor (Village) Williston Park (Village) Bayville (Village) Bayville (Village) Brookville (Village) Centre Island (Village) Cove Neck (Village) East Hills (Village) East Hills (Village) East Hills (Village) Unumber of the protein of the protei	
	Albany	Coeymans (Town) Ravena (Village)	
4	Rensselaer	Brunswick (Town) North Greenbush (Town) Sand Lake (Town) Schodack (Town) Troy (City)	
	Columbia	Canaan (Town)	
7	Onondaga	Skaneatles (Town/Village)	
9	Erie	Buffalo (City)	

New York State Department of Environmental Conservation
Division of Materials Management
Bureau of Solid Waste Management

MATERIAL MANAGEMENT PROGRAM CONTACTS

CENTRAL OFFICE

Bureau of Solid Waste Management 625 Broadway Albany, NY 12233-7260

Phone: (518) 402-8678

For Submission of Solid Waste Management Facility Annual Reports only:

Fax: (518) 402-9041

Email: swmfannualreport@dec.ny.gov

REGIONAL OFFICE ADDRESS & LEAD CONTACT PERSON

REGION 1 (Nassau, Suffolk)

Syed Rahman/David Gibb SUNY @ Stony Brook 50 Circle Road Stony Brook, NY 11790 Phone: (631) 444-0375

SWMFannualreportR1@dec.ny.gov

REGION 2 (Bronx, Kings, New York, Queens, Richmond)

Joseph O'Connell 47-40 21st Street Long Island City, NY 11101-5407 Phone: (718) 482-4896

SWMFannualreportR2@dec.ny.gov

REGION 3 (Dutchess, Orange, Putnam, Rockland, Sullivan, Ulster, Westchester)

Lee Reiff 21 South Putt Corners Road New Paltz, NY 12561 Phone: (845) 256-3134

SWMFannualreportR3@dec.ny.gov

REGION 4 (Albany, Columbia, Delaware, Greene, Montgomery, Otsego, Rensselaer, Schenectady, Schoharie)

Brian Maglienti 1130 North Westcott Road Schenectady, NY 12306 Phone: (518) 357-2085

SWMFannualreportR4@dec.ny.gov

REGION 5 (Clinton, Essex, Franklin, Fulton, Hamilton, Saratoga, Warren, Washington)

Jessie Sangster 1115 State Route 86, PO Box 296 Ray Brook, NY 12977 Phone: (518) 897-1266

SWMFannualreportR5@dec.ny.gov

REGION 6 (Herkimer, Jefferson, Lewis, Oneida, St. Lawrence)

Gary McCullouch 317 Washington Street Watertown, NY 13601 Phone: (315) 785-2513

SWMFannualreportR6@dec.ny.gov

REGION 7 (Broome, Cayuga, Chenango, Cortland, Madison, Onondaga, Oswego, Tioga, Tompkins)

Thomas Annal 615 Erie Boulevard West Syracuse, NY 13204 Phone: (315) 426-7419

SWMFannualreportR7@dec.ny.gov

REGION 8 (Chemung, Genesee, Livingston, Monroe, Ontario, Orleans, Schuyler, Seneca, Steuben, Wayne, Yates)

Greg MacLean 6274 East Avon-Lima Road Avon, NY 14414 Phone: (585) 226-5411

SWMFannualreportR8@dec.ny.gov

REGION 9 (Allegany, Cattaraugus, Chautauqua, Erie, Niagara, Wyoming)

Peter Grasso 270 Michigan Avenue Buffalo, NY 14203 Phone: (716) 851-7220

SWMFannualreportR9@dec.ny.gov

September 2020