



5600 Niagara Falls Blvd. Niagara Falls, NY 14304
o 716.282.2676 f 716.282.6073 republicservices.com

March 17, 2021

New York State Department of Environmental Conservation
Division of Materials Management
Bureau of Solid Waste Management
270 Michigan Avenue
Buffalo, NY 14203

RE: ALLIED WASTE MATERIAL RECOVERY FACILITY
15M26

Dear Mr. Grasso:

Attached please find the annual report for the Allied Waste Material Recovery Facility located in Buffalo, NY. The ownership of the facility changed at the end of June 2020. This report covers the time frame of January through June 2020.

Please feel free to contact me at 716-371-4222 with any questions or comments.

Sincerely,

A handwritten signature in blue ink that reads "Ralph Larimore".

Ralph Larimore
Environmental Manager

Attach
Rachel Rubach / NYSDEC
Albany / NYSDEC
BM.D.2



Department of
Environmental
Conservation

RECYCLABLES HANDLING & RECOVERY FACILITY ANNUAL REPORT

(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: Allied Waste Material Recovery Facility			
FACILITY LOCATION ADDRESS: 2299 Kenmore Ave	FACILITY CITY: Buffalo	STATE: NY	ZIP CODE: 14207
FACILITY TOWN: Kenmore	FACILITY COUNTY: Erie	FACILITY PHONE NUMBER:	
FACILITY NYS PLANNING UNIT: (A list of NYS <u>Planning Units</u> can be found at the end of this report). NWCB			NYSDEC REGION #: 9
360 PERMIT #: (Refer to DEC Permit)	DATE ISSUED: 11/14/05	DATE EXPIRES:	NYS DEC ACTIVITY CODE OR REGISTRATION NUMBER: (Refer to DEC Registration) 15M26
FACILITY CONTACT: Ralph Larimore	<input type="checkbox"/> public <input checked="" type="checkbox"/> private	CONTACT PHONE NUMBER: 716-371-4222	CONTACT FAX NUMBER: 716-285-3398
CONTACT EMAIL ADDRESS: rlarimore@republicservices.com			
OWNER INFORMATION			
OWNER NAME: Allied Waste Services of North America LLC	OWNER PHONE NUMBER: 716-371-4222	OWNER FAX NUMBER: 716-285-3398	
OWNER ADDRESS: 2321 Kenmore	OWNER CITY: Buffalo	STATE: NY	ZIP CODE: 14207
OWNER CONTACT: Ralph Larimore	OWNER CONTACT EMAIL ADDRESS: rlarimore@republicservices.com		
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 type="checkbox"/> Facility location address <input type="checkbox"/> Owner address <input checked="" type="checkbox"/> Other (provide): Allied Waste Landfill, Attn: Ralph Larimore, 5600 Niagara Falls Blvd, Niagara Falls, NY 14304			
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)
Commingled Containers (metal, glass, plastic)								
Commingled Paper (all grades)		42.53	40.51	34.47	34.07	42.18	12.50	
Single Stream (total)		2167.21	1733.39	2095.38	2240.10	2330.90	1799.12	
Other (specify)		65.47	95.64	98.12	78.05	46.92	37.19	
Other - OOC		638.40	537.63	528.78	410.45	392.99	330.03	
Total Tons Received		2913.61	2407.17	2756.75	2762.67	2812.99	2178.84	
Material	August (tons)	September (tons)	October (tons)	November (tons)	December (tons)	Total Year (tons)	Daily Avg. (tons)	
Commingled Containers (metal, glass, plastic)								
Commingled Paper (all grades)						206.26	2	
Single Stream (total)						12366.10	95	
Other (specify)						421.39	3	
Other - OOC						2838.28	22	
Total Tons Received						15832.03	122	

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)	Direct Haul	NY	Allegany County	Allegany County	99.64
	Direct Haul	NY	Cattaraugus County	Cattaraugus County	106.62
Commingled Paper (all grades)	Direct Haul	NY	Erie County	Northeast Southtowns Soli	12,043.02
	Direct Haul	NY	Chautauqua County	Chautauqua County	113.87
	Direct Haul	NY	Niagara County	Niagara County	209.21
Single Stream (total)	Direct Haul	OH	Handcock		62.04
	Direct Haul	NY	Cattaraugus County	Cattaraugus County	57.14
	Direct Haul	Canada	Ontario		109.23
	Direct Haul	NY	Chautauqua County	Chautauqua County	177.07
Other (specify)	Direct Haul	NY	Erie County	Northeast Southtowns Soli	15.91
TOTAL MATERIAL RECEIVED (tons):					12,993.75

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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)					
Single Stream (total)					
Other (specify)					
OCC	Direct Haul	NY	Chautauqua County	Chautauqua County	20.58
OCC	Direct Haul	NY	Cattaraugus County	Cattaraugus County	128.38
OCC	Direct Haul	NY	Erie County	Northeast Southtowns Soli	2,689.32
TOTAL MATERIAL RECEIVED (tons):					2,838.28

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SECTION 4 – RESIDUE

Total residue (tons) = 2275.89 Residue destination (Name & Address) _____
 Percent Residue Calculation: Total tons residue/Total tons material received x 100 = 14.4

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)						
Corrugated Cardboard	WestRock	NY	Onondaga County	Onondaga County (except Skt	6,106.93	
	Continental Paper Grading	Canada	Ontario		487.43	
Junk Mail						
Magazines						
Newspaper	Midland	IL	Rock Island		44.89	
	Remm	Canada	Ontario		405.66	
	Midland	IL	Rock Island		43.48	
Office Paper						
Paperboard / Boxboard						
Other Paper (specify)						
TOTAL PAPER RECOVERED (tons):					7,088.39	

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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): _____ % 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)						
Corrugated Cardboard	CL Trading	PA	Lycoming		209.59	
Junk Mail						
Magazines						
Newspaper	Penn Turf - Lebanon Seaboard Continental Paper Grading	PA Canada	Lebanon Ontario		826.96 1,843.80	
Office Paper						
Paperboard/Boxboard						
Other Paper (specify)						
TOTAL PAPER RECOVERED (tons):					2,880.36	

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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)	DESTINATION NYS PLANNING UNIT (See Attached List of NYS Planning Units)	TONS RECOVERED (out of facility)
Container Glass	AW Niagara Falls Landfill	NY	Niagara County	Niagara County		2344.71
Industrial Scrap Glass						
Other Glass (specify)						
TOTAL GLASS RECOVERED (tons):						2344.71
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)	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	TMS Triple M	PA Canada	Allegheny Ontario			86.05 240.10
Other Metal (specify)						
TOTAL METAL RECOVERED (tons):						326.15

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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)						
TOTAL GLASS RECOVERED (tons):						
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	Gateway Materials NH Kelman Recycling	NY NY	Erie County Albany County	Northeast Southtowns Solid Waste Capital Region Solid Waste	96.56 40.12	
Other Metal (specify)						
TOTAL METAL RECOVERED (tons):						

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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)	Unifi Manufacturing Phoenix	NC OH	Guilford Wood		235.32 433.46	
HDPE (plastic #2)	Tabb Advance Drainage	MI OH	Wayne Handcock		42.21 329.75	
Other Rigid Plastics (#3 - #7)	KW	AL	Pike		113.00	
Industrial Scrap Plastic						
Plastic Film & Bags						
Other Plastics (specify)						
TOTAL PLASTIC RECOVERED (tons):					1,153.74	

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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)

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)	LM Fibers	NY	Westchester County	Westchester County	22.75	
HDPE (plastic #2)	Envision	NC	Rockingham		84.92	
Other Rigid Plastics (#3 - #7)						
Industrial Scrap Plastic						
Plastic Film & Bags						
Other Plastics (specify)						
TOTAL PLASTIC RECOVERED (tons):					107.67	

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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 w/hole	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)						
Other (specify)						
TOTAL MIXED MATERIAL RECOVERED (tons):						
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)						
TOTAL MISCELLANEOUS MATERIAL RECOVERED (tons):						

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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.

<u><i>Ralph Larimore</i></u> Signature	<u>3/17/2021</u> Date
<u>Ralph Larimore</u> Name (Print or Type)	<u>Environmental Manager</u> Title (Print or Type)
<u>rlarimore@republicservices.com</u> Email (Print or Type)	
<u>5600 Niagara Falls Blvd</u> Address	<u>Niagara Falls</u> City
<u>NY 14304</u> State and Zip	<u>(716) 371-4222</u> Phone Number

ATTACHMENTS: YES NO

OCC

WestRock
53 Industrial Drive
Syracuse, NY 13204

Continental Paper Grading
6790 Century Ave
Mississauga Ontario

CL Trading
2206 Pine Wood Rd
Jeersey Shore, PA 17740

NEWSPAPER

Midland
3301 4th Ave
Moline, IL 61265

Remm
911 Golf Links Rd
Ancaster Ontario L9K 1H9

Penn Turf / Lebanon Seaboard
1600 East Cumberland St
Lebanon, PA 17042

Continental Paper Grading
6790 Century Ave
Mississauga Ontario

OFFICE PAPER

Midland
3301 4th Ave
Moline, IL 61265

CONTAINER GLASS

Allied Waste Niagara Falls Landfill
5600 Niagara Falls Blvd
Niagara Falls, NY 14304

PET

Unifi Manufacturing
PO Box 19109
Greensboro, NC 27419

PET

Phoenix
1098 Fairview Ave
Bowling Green, OH 43402

LM Fibers
159 East Main St
New Rochelle, NY 10801

HDPE PLASTIC

Tabb
PO Box 701452
Plymouth, MI 48170

Advanced Drainage
401 Olive Street
Findlay, OH 45839

Envision
606-B Walters St
Reidsville, NC 27320

TIN & ALUMINUM

TMS
2835 East Carson
Pittsburgh, PA 15203

Triple M
670 Strathearne Ave North
Hamilton Ontario L8H7N7

Gateway Materials
3035 Union Rd
Cheektowaga, NY 14227

NH Kelman Recycling
41 Euclid St
Cohoes, NY 12047

OTHER RIGID PLASTICS

KW Plastics
PO Box 707
Troy, AL 36081

Project Nickel
2299 Kenmore Ave
Buffalo, NY 14216

2020 Annual Report



Department of
Environmental
Conservation

RECYCLABLES HANDLING & RECOVERY FACILITY ANNUAL REPORT

(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: Project Nickel			
FACILITY LOCATION ADDRESS: 2299 Kenmore Ave	FACILITY CITY: Buffalo	STATE: NY	ZIP CODE: 14216
FACILITY TOWN:	FACILITY COUNTY: Erie	FACILITY PHONE NUMBER: 716-754-8226	
FACILITY NYS PLANNING UNIT: (A list of NYS Planning Units can be found at the end of this report). Northeast Southtowns Solid Waste Management Board (NEST)			NYSDEC REGION #: 9
360 PERMIT #: (Refer to DEC Permit)	DATE ISSUED: 7/1/2020	DATE EXPIRES: 10/30/2025	NYS DEC ACTIVITY CODE OR REGISTRATION NUMBER: (Refer to DEC Registration) 15R20049
FACILITY CONTACT: Alan Davis	<input checked="" type="checkbox"/> public <input type="checkbox"/> private	CONTACT PHONE NUMBER: 716-754-8226	CONTACT FAX NUMBER: 716-754-2355
CONTACT EMAIL ADDRESS: adavis@modern-corp.com			
OWNER INFORMATION			
OWNER NAME: Modern Corporation	OWNER PHONE NUMBER: 716-754-8226	OWNER FAX NUMBER: 716-754-2355	
OWNER ADDRESS: 4746 Model City Road	OWNER CITY: Model City	STATE: NY	ZIP CODE: 14107
OWNER CONTACT:	OWNER CONTACT EMAIL ADDRESS:		
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 type="checkbox"/> Facility Contact <input checked="" type="checkbox"/> Owner Contact <input type="checkbox"/> Other (provide):			
Preferred individual to receive correspondence: <input type="checkbox"/> Facility Contact <input checked="" 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

Recycling Type: _____

_____ % Truck Count

_____ % Other (Specify: _____)

Material	Tip Fee (\$/Ton)	January (tons)	February (tons)	March (tons)	April (tons)	May (tons)	June (tons)	July (tons)
Commingled Containers <small>(metal, glass, plastic)</small>								
Commingled Paper (all grades)								
Single Stream <small>(total)</small>								413.10
Other (specify)								
Total Tons Received								413.10
Material	August (tons)	September (tons)	October (tons)	November (tons)	December (tons)	Total Year (tons)	Daily Avg. (tons)	
Commingled Containers <small>(metal, glass, plastic)</small>								
Commingled Paper (all grades)								
Single Stream <small>(total)</small>								
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

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:

_____ % Road: Material(s): _____ _____ % Rail: Material(s): _____
 _____ % Water: Material(s): _____ _____ % Other (specify: _____): Material(s): _____

SERVICE AREA OF MATERIAL RECEIVED (from 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)					
Single Stream (total)	Direct Haul	New York	Erie County	Northeast Southtowns Soli	413.10
Other (specify)					
TOTAL MATERIAL RECEIVED (tons):					413.10

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) = 275.62 Residue destination (Name & Address) Modern Landfill 1445 Pletcher Road Model City, NY 14107
 Percent Residue Calculation: Total tons residue/Total tons material received x 100 = 68.71%

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)	Continental Paper Grading - S. Lumber St. Chicago IL 60616	IL			113.21
Corrugated Cardboard	Continental Paper Grading - S. Lumber St. Chicago IL 60616	IL			72.99
Junk Mail					
Magazines					
Newspaper					
Office Paper					
Paperboard / Boxboard					
Other Paper (specify)					
TOTAL PAPER RECOVERED (tons):					186.20

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					
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 RECOVERED (tons):					
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	Ed Arnold/EASCO 2216 Angling Road Corfu NY 14036	New York	Genesee County	GLOW Region Solid Waste	11.46
Bulk Metal					
Enameled Appliances / White Goods					
Industrial Scrap Metal					
Tin & Aluminum Containers	Ed Arnold/EASCO 2216 Angling Road Corfu NY 14036	New York	Genesee County	GLOW Region Solid Waste	117.08
Other Metal (specify)					
TOTAL METAL RECOVERED (tons):					128.54

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)					
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, attach 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 – whole	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)					
TOTAL MIXED MATERIAL RECOVERED (tons):					_____
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)					
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.

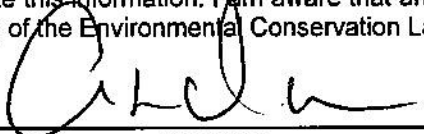
SECTION 11 - SIGNATURE AND DATE BY OWNER OR OPERATOR

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.



Signature

2/22/21

Date

Alan Davis

Name (Print or Type)

VP of Post Collections

Title (Print or Type)

adavis@modern-corp.com

Email (Print or Type)

4746 Model City Road

Address

Model City

City

New York 14107

State and Zip

(716) 754 8226

Phone Number

ATTACHMENTS: YES NO