



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, 2022.

This annual report is for the year of operation from January 01, 2021 to December 31, 2021

SECTION 1 – GENERAL INFORMATION

| FACILITY INFORMATION | | | |
|---|---|---|---|
| FACILITY NAME: | | | |
| FACILITY LOCATION ADDRESS: | FACILITY CITY: | STATE: | ZIP CODE: |
| FACILITY TOWN: | FACILITY COUNTY: | FACILITY PHONE NUMBER: | |
| FACILITY NYS PLANNING UNIT: (A list of NYS Planning Units can be found at the end of this report). | | | NYSDEC REGION #: |
| 360 PERMIT #: (Refer to DEC Permit) | DATE ISSUED: | DATE EXPIRES: | NYS DEC ACTIVITY CODE OR REGISTRATION NUMBER: (Refer to DEC Registration) |
| FACILITY CONTACT: | <input type="checkbox"/> public <input type="checkbox"/> private | CONTACT PHONE NUMBER: | CONTACT FAX NUMBER: |
| CONTACT EMAIL ADDRESS: | | | |
| OWNER INFORMATION | | | |
| OWNER NAME: | OWNER PHONE NUMBER: | OWNER FAX NUMBER: | |
| OWNER ADDRESS: | OWNER CITY: | STATE: | ZIP CODE: |
| OWNER CONTACT: | OWNER CONTACT EMAIL ADDRESS: | | |
| OPERATOR INFORMATION | | | |
| OPERATOR NAME: | <input type="checkbox"/> same as owner | <input type="checkbox"/> public <input type="checkbox"/> private | |
| PREFERENCES | | | |
| Preferred address to receive correspondence: <input type="checkbox"/> Facility location address <input type="checkbox"/> Owner address <input type="checkbox"/> Other (provide): | | | |
| Preferred email address: <input type="checkbox"/> Facility Contact <input type="checkbox"/> Owner Contact <input type="checkbox"/> Other (provide): | | | |
| Preferred individual to receive correspondence: <input type="checkbox"/> Facility Contact <input type="checkbox"/> Owner Contact <input type="checkbox"/> Other (provide): | | | |

Did you operate in 2021? 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:

_____ % 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 <i>(metal, glass, plastic)</i> | | | | | | | | |
| Commingled Paper (all grades) | | | | | | | | |
| Single Stream (total) | | | | | | | | |
| Other (specify) | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Total Tons Received | | | | | | | | |
| Material | August (tons) | September (tons) | October (tons) | November (tons) | December (tons) | Total Year (tons) | Daily Avg. (tons) | |
| Commingled Containers <i>(metal, glass, plastic)</i> | | | | | | | | |
| 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.

*Approximately
 **303 DSNY collection days

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 <small>(where the material is coming from)</small> | | | | | |
|--|--|-------------------------------|---------------------------------|--|---------------|
| MATERIAL | SOLID WASTE MANAGEMENT FACILITY FROM WHICH IT WAS RECEIVED <small>(Name & Address)</small> 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 |
| Commingled Containers <small>(metal, glass, plastic)</small> | | | | | |
| | | | | | |
| | | | | | |
| Commingled Paper <small>(all grades)</small> | | | | | |
| | | | | | |
| | | | | | |
| Single Stream <small>(total)</small> | | | | | |
| | | | | | |
| | | | | | |
| Other <small>(specify)</small> | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| TOTAL MATERIAL 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) = _____ 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:

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

| PAPER RECOVERED | | | | | |
|---|--|------------------------------|--------------------------------|---|--|
| RECOVERED MATERIAL | DESTINATION <small>(Name & Address)</small> | DESTINATION STATE OR COUNTRY | DESTINATION COUNTY OR PROVINCE | DESTINATION NYS PLANNING UNIT <small>(See Attached List of NYS Planning Units)</small> | TONS RECOVERED <small>(out of facility)</small> |
| Commingled Paper <small>(all grades)</small> | | | | | |
| Corrugated Cardboard | | | | | |
| Junk Mail | | | | | |
| Magazines | | | | | |
| Newspaper | | | | | |
| Office Paper | | | | | |
| Paperboard / Boxboard | | | | | |
| Other Paper <small>(specify)</small> | | | | | |
| | | | | | |
| TOTAL PAPER 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)

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 | | | | | |
| Other Metal (specify) | | | | | |
| | | | | | |
| | | | | | |
| TOTAL METAL 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)

| 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, 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 - uncompactd | 1 cubic yard 0.10 tons |
| NEWSPRINT - loose | 1 cubic yard 0.29 tons | PLASTIC - styrofoam | 1 cubic yard 0.02 tons | WHITE GOODS - compactd | 1 cubic yard 0.5 tons |
| NEWSPRINT - compactd | 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 <i>(Name & Address)</i> | DESTINATION STATE OR COUNTRY | DESTINATION COUNTY OR PROVINCE | DESTINATION NYS PLANNING UNIT <i>(See Attached List of NYS Planning Units)</i> | TONS RECOVERED <i>(out of facility)</i> |
| Commingled Containers <i>(metal, glass, plastic)</i> | | | | | |
| | | | | | |
| | | | | | |
| Commingled Paper & Containers | | | | | |
| | | | | | |
| | | | | | |
| Single Stream <i>(total)</i> | | | | | |
| | | | | | |
| | | | | | |
| Other <i>(specify)</i> | | | | | |
| | | | | | |
| | | | | | |
| TOTAL MIXED MATERIAL RECOVERED (tons): _____ | | | | | |
| MISCELLANEOUS MATERIAL RECOVERED | | | | | |
| RECOVERED MATERIAL | DESTINATION <i>(Name & Address)</i> | DESTINATION STATE OR COUNTRY | DESTINATION COUNTY OR PROVINCE | DESTINATION NYS PLANNING UNIT <i>(See Attached List of NYS Planning Units)</i> | TONS RECOVERED <i>(out of facility)</i> |
| Electronics | | | | | |
| | | | | | |
| Textiles | | | | | |
| | | | | | |
| Other <i>(specify)</i> | | | | | |
| | | | | | |
| | | | | | |
| 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 name.

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 | _____ Date |
| _____ Name (Print or Type) | _____ Title (Print or Type) |
| _____ Email (Print or Type) | |
| _____ Address | _____ City |
| _____ State and Zip | (_____)_____-_____ 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, 2022.

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.

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

New York State Planning Units & Regions

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

| DEC Region | Planning Unit | County | Municipality |
|-------------------------|---|-------------|--|
| 1 | Glen Cove | Nassau | Glen Cove (City) |
| | Hempstead | | Hempstead (Town) |
| | Long Beach | | Long Beach (City) |
| | North Hempstead Solid Waste Management Authority | | North Hempstead (Town), except 8 villages (see below) |
| | Oyster Bay Solid Waste Disposal District | | Oyster Bay (Town), except 17 villages (see below) |
| | Babylon | Suffolk | Babylon (Town) |
| | Brookhaven | | Brookhaven (Town) |
| | East Hampton | | East Hampton (Town) |
| | Fishers Island Waste Management District | | Fishers Island |
| | Huntington | | Huntington (Town) |
| | Islip Resource Recovery Agency | | Islip (Town) |
| | Riverhead | | Riverhead (Town) |
| | Shelter Island | | Shelter Island (Town) |
| | Smithtown | | Smithtown (Town) |
| | Southampton | | Southampton (Town) |
| Southold | Southold (Town), except Fishers Island | | |
| 2 | New York City | Bronx | Bronx |
| | | Kings | Kings (Brooklyn) |
| | | New York | New York (Manhattan) |
| | | Queens | Queens |
| | | Richmond | Richmond (Staten Island) |
| 3 | Dutchess County | Dutchess | |
| | Orange County | Orange | |
| | Putnam County | Putnam | |
| | Rockland County Solid Waste Management Authority (RCSWMA) | Rockland | |
| | Sullivan County | Sullivan | |
| | Ulster County Resource Recovery Agency (UCRRA) | Ulster | |
| | Westchester County | Westchester | |
| 4 | Colonie | Albany | Cohoes (City) |
| | | | Colonie (Town) |
| | | | Colonie (Village) |
| | | | Menands (Village) |
| | | | Watervliet (City) |
| | Capital Region Solid Waste Management Partnership | Albany | Albany (City) |
| | | | Altamont (Village) |
| | | | Berne (Town) |
| | | | Bethlehem (Town) |
| | | | Green Island (Town/Village) |
| | | | Guilderland (Town) |
| | | | Knox (Town) |
| | | | New Scotland (Town) |
| | | | Rensselaerville (Town) |
| Voorheesville (Village) | | | |
| Westerlo (Town) | | | |

| | | | | |
|--------------------|--|--------------------|---|------------------|
| | | Rensselaer | East Greenbush (Town) Rensselaer (City) | |
| 4 | Eastern Rensselaer County Solid Waste Management Authority | Rensselaer | Castleton-on-Hudson (Village) | |
| | | | Hoosick Falls (Village) | |
| | | | Nassau (Village) | |
| | | | Pittstown (Town) | |
| | | | Schaghticoke (Town/Village) | |
| | | | Stephentown (Town) | |
| | | | Valley Falls (Village) | |
| | | | Berlin (Town) | Inactive Members |
| | | | Grafton (Town) | |
| | | | Hoosick (Town) | |
| | | | Nassau (Town) | |
| | | | Petersburg (Town) | |
| | | | Poestenkill (Town) | |
| | | | Columbia County | |
| Delaware County | Delaware | | | |
| Greene County | Greene | | | |
| Montgomery County | Montgomery | | | |
| Otsego County | Otsego | | | |
| Schoharie County | Schoharie | | | |
| Schenectady County | Schenectady | | | |
| 5 | Clinton County | Clinton | | |
| | Essex County | Essex | | |
| | County of Franklin Solid Waste Management Authority (CFSWMA) | Franklin | | |
| | Fulton County | Fulton | | |
| | Hamilton County | Hamilton | | |
| | Saratoga County | Saratoga | | |
| | Warren County | Warren | | |
| | Washington County | Washington | | |
| 6 | Development Authority of the North Country (DANC) | Jefferson | | |
| | | Lewis | | |
| | | St. Lawrence | | |
| | Oneida-Herkimer Solid Waste Authority | Oneida Herkimer | | |
| 7 | Broome County | Broome | | |
| | Cayuga County | Cayuga | | |
| | Chenango County | Chenango | | |
| | Cortland County | Cortland | | |
| | Madison County | Madison | | |
| | Onondaga County | Onondaga | All municipalities, except Town and Village of Skaneateles (See below) | |
| | Oswego County | Oswego | | |
| | Tioga County | Tioga | | |
| | Tompkins County | Tompkins | | |
| 8 | Chemung County | Chemung | | |
| | GLOW Region Solid Waste Management Committee | Genesee | | |
| | | 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 | | |
| 9 | Allegany County | Allegany | | |
| | Cattaraugus County | Cattaraugus | | |
| | Chautauqua County | Chautauqua | | |
| | GLOW Region Solid Waste Management Committee | Wyoming | | |
| | Niagara | Niagara | | |
| | Northeast-Southtowns Solid Waste Management Board (NEST) | | Erie | 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) |
| | | | | Eden (Town) |
| | | | | Elma (Town) |
| | | | | 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) | | Erie | Amherst (Town) | |
| | | | 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 | North Hempstead | Great Neck Estates (Village) |
| | | | Great Neck Plaza (Village) |
| | | | Mineola (Village) |
| | | | New Hyde Park (Village) |
| | | | Plandome (Village) |
| | | | Plandome Manor (Village) |
| | | | Westbury (Village) |
| | | | Williston Park (Village) |
| | | Oyster Bay | Bayville (Village) |
| | | | Brookville (Village) |
| | | | Centre Island (Village) |
| | | | Cove Neck (Village) |
| | | | East Hills (Village) (portion) |
| | | | Glenwood – Glen Head Garbage District |
| | | | Lattington (Village) |
| | | | Laurel Hollow (Village) |
| | | | Matinecock (Village) |
| | | | Mill Neck (Village) |
| | | | Muttontown (Village) |
| | | | Old Brookville (Village) |
| | | | Old Westbury (Village) (portion) |
| | | | Oyster Bay Cove (Village) |
| | | | Roslyn Harbor (Village) (portion) |
| Sea Cliff (Village) | | | |
| Upper Brookville (Village) | | | |
| 4 | Albany | Coeymans (Town) | |
| | | Ravena (Village) | |
| | Rensselaer | Brunswick (Town) | |
| | | North Greenbush (Town) | |
| | | Sand Lake (Town) | |
| | | Schodack (Town) | |
| | Troy (City) | | |
| Columbia | Canaan (Town) | | |
| 7 | Onondaga | Skaneateles (Town/Village) | |
| 9 | Erie | Buffalo (City) | |

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

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) 482-4892
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)

Steve Perrigo
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

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