

# Fulton County

REDUCE ♦ REUSE ♦ RECYCLE

# FULTON COUNTY DEPARTMENT OF SOLID WASTE

PO BOX 28, 847 MUD ROAD JOHNSTOWN, NY 12095 518-736-5501 FAX: 518-762-2859 David B. Rhodes, Director

February 22, 2022

NYSDEC Central Office Bureau of Solid Waste Management 625 Broadway Albany, NY 12233-7260 NYSDEC Region 5 Jessie Sangster 1115 State Route 86, PO Box 296 Ray Brook, NY 12977

Dear NYSDEC officials:

The Fulton County Department of Solid Waste is hereby submitting its annual Transfer Facility Annual Reports and the Recyclables Handling & Recovery Facility Reports, 2021. Please be advised that each individual report for the eight registered stations operated by Fulton County through this department, also serves as the 2021 annual Recyclables Handling & Recovery Facility annual reports.

The reasoning for this is that the RH&RF report calls for enumerating recyclables collected at these stations by month, whereas the transfer station report only requires enumeration by the total year. In utilizing the "Other" line within the Registered Transfer Facility report, each month's totals are incorporated, fulfilling that (and with the exception of one statistic noted below), all other requested information for the RH&RF report. We have also incorporated each Transfer Station Registration Number, and each Transfer Station Recyclables Handling & Recovery Facility number on each report, along with the expiration date of each.

The only piece of information required by the RH&RF report that is not listed anywhere on the Registered Transfer Facility annual report is residue generated. Since all recyclables at each station are brought to the Fulton County Materials Recovery Facility (MRF) and packaged for transport to the Oneida-Herkimer Solid Waste Authority MRF, there is no residue figure calculated specifically for Fulton County or its individual transfer stations. Therefore, that answer would have been noted as N/A.

Due to the above, Fulton County asserts that all required information for both reports has been submitted.

Sincerely,

Circly D. Jungston
Cindy G. Livingston
Deputy Director



### REGISTERED TRANSFER FACILITY ANNUAL REPORT

(If you need assistance filling out this form please email <a href="mailto:swmfannualreport@dec.ny.gov">swmfannualreport@dec.ny.gov</a> or call 518-402-8678.)

Complete and submit this form by March 1, 2022.

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

### **SECTION 1 – GENERAL INFORMATION**

FACILITY INFORMATION							
FACILITY NAME:							
East Fulton Street Transfe	er Station	or	1				
FACILITY LOCATION ADDRESS:	FACILITY CITY:			STA	TE:	ZIP CODE:	
PO Box 28	Johns				NY	•	12095
FACILITY TOWN:	FACILITY	CC	OUNTY:	FACI	LITY P	OH	NE NUMBER:
Johnstown	Fultor	1		518	3-73	36-	5501
FACILITY NYS PLANNING UNIT: (A list of NY Fulton County	S <u>Planning Un</u>	its o	can be found at the end of	this rep	ort).		SDEC GION #: 5
	and the second second		over the transfer of the state	y ji iku ji usi ngar		· · · · · · · · · · · · · · · · · · ·	emorno anno estado a para de segundo mociones de sua come de Segundo de Segun
360 REGISTRATION DATE ISSUED: (Refer to DEC Registration) 7/2/18 (Expires 7/1/23)  NYS DEC ACTIVITY CODE OR REGISTRATION NUMBER: (Refer to DEC Registration) 18T10003/18R100					T10003/18R10003		
FACILITY CONTACT:	public		ONTACT PHONE	T	CONTA	ACT	FAX NUMBER:
Cindy G. Livingston	□ private	51	<b>UMBER:</b> 8-736-5501		518-	-76	62-2859
CONTACT EMAIL ADDRESS: clivingston@fultoncountyny.gov							
1972年中央地方的海岸等的周围開展等時間的	OWNER	NF	ORMATION				
OWNER NAME:			ONE NUMBER:				JMBER:
Fulton County	518-73		-	518	-762·		
OWNER ADDRESS: 223 W. Main St.	OWNER C		γ:		STAT NY	TE:	<b>ZIP CODE:</b> 12095
OWNER CONTACT:			TACT EMAIL ADDRE	:00.	19 1		12093
Cindy G. Livingston			on@fultoncou		nv a	ΩV	
Parameter Company Company						_	
OPERATOR NAME:     Same as owner	OFENATO	X:II	APONIA SA		🗓 pub		SECTION CONTINUES AND CONTINUES OF CONTINUES
Fulton County Dept. of Solid Waste					□ priv		
Property and the state of the s					3, 40 N		KENGHEN WAR
Preferred address to receive correspondence  Other (provide):	): 🖭 Facility lo	ocat	ion address	LIC	Ownerad	ddres	s
Preferred email address: ☐ Facility Contact ☐ Owner Contact ☐ Other (provide):							
Preferred individual to receive correspondence:							
Did you operate in 2021?  Yes; Complete No; Complete relinquish your permit/registration associated Waste Management Facility or Activity Notific	e and submit with this soli	t Se id v		ivity, al	so com	plete	e the "Inactive Solid

### **SECTION 2 - SOLID WASTE RECEIVED**

Please provide the tonnages of solid waste received. Include all waste received. Report Recyclable Materials in Section 5. DO NOT REPORT IN CUBIC YARDS!

				YARDS	!				
Sį	ecify the methods used to measure the quantities disposed and the percentages measured by each method:								
10	Scale Weight		%	Estimated					
_	% Truck Count		%	Other (Specify:					
	Type of Solid Waste	January	February	March	April	May	June	July	

Type of Solid Waste	January (tons)	February (tons)	March (tons)	April (tons)	May (tons)	June (tons)	July (tons)
Construction & Demolition (C&D) Debris							
Mixed Municipal Solid Waste (MSW) (Residential, Institutional & Commercial)	139.75	140.50	205.13	266.93	220.60	242.48	219.27
Other (specify)							
Single Stream Recyclables	36.32	26.38	20.50	26.46	23.53	19.16	26.49
Total Tons Received	176.07	166.88	225.63	293.39	244.13	261.64	245.76

Type of Solid Waste	Tip Fee (\$/ton)	August (tons)	September (tons)	October (tons)	November (tons)	December (tons)	Total Year (tons)	Daily Avg. (tons)
Construction & Demolition (C&D) Debris		,						
Mixed Municipal Solid Waste (MSW) (Residential, Institutional & Commercial)	\$53	241.81	225.11	228.19	218.08	198.15	2,546.00	8.43
Other (specify)								
Single Stream Recyclables	\$20	19.52	13.45	22.20	18.99	24.85	277.85	.92
Total Tons Received		261.33	238.56	250.39	237.07	223.00	2,823.85	9.35

If the solid waste type is not listed, use one of the "Other" lines and fill in the name of the waste. If more "Other" lines are needed, cross out an unused type and fill in the other solid waste name. If still more "Other" lines are needed, attach another copy of this page, cross out an unused type, and fill in the other solid waste name.

#### SECTION 3 - SERVICE AREA OF SOLID WASTE RECEIVED

Please identify where the waste 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 waste 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 waste 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 waste was generated.

Specify transport method, list type of material(s) and percentages of total waste	transported by each:	
100 % Road: Waste Type(s): MSW, single stream recyclables	% Rail: Waste Type(s):	
% Water: Waste Type(s):	% Other (specify:): Waste Type(s):	

	SERVICE AREA OF SO	LID WASTER	ECEIVED (wheret	he waste is coming from	
TYPE OF SOLID WASTE	SOLID WASTE MANAGEMENT FACILITY FROM WHICH IT WAS RECEIVED (Name & Address) OR "Direct Haul"	STATE OR COUNTRY	COUNTY OR PROVINCE	NYS PLANNING UNIT (See Attached List of NYS Planning Units)	TONS RECEIVED
Construction & Demolition (C&D) Debris					
Municipal Solid Waste (MSW) (Residential, Institutional & Commercial)	Direct Haul	NY	Fulton County	Fulton County	2,546.00
Other (specify)					
Single Stream Recyclables	Direct Haul	NY	Fulton County	Fulton County	277.85
				TOTAL RECEIVED (ton	2,823.85

If the solid waste type is not listed, use one of the "Other" lines and fill in the name of the waste. If more "Other" lines are needed, cross out an unused type and fill in the other solid waste name. If still more "Other" lines are needed, attach another copy of this page, cross out an unused type, and fill in the other solid waste name.

#### SECTION 4 - TRANSFER OR DISPOSAL DESTINATION

Please identify destination of waste. Please only include waste sent off-site for disposal or further transfer prior to disposal. Exclude Recyclable Material amounts reported in Section 5. DO NOT REPORT IN CUBIC YARDS!

- If the waste is being sent to another facility for transfer or processing prior to disposal (e.g. Transfer facility or C&D debris handling and recovery facility),
  please identify name, <u>address</u>, corresponding State/Country, County/Province, and Destination Planning Unit of the transfer destination and the amount of
  waste transferred in the "Amount to Transfer Destination" column.
- If the waste is being sent to a landfill or combustor, please identify the name, <u>address</u>, corresponding State/Country, County/Province, and Destination Planning Unit of the disposal destination and the amount of waste being sent for disposal in the "Amount to Disposal Destination" column.

% Road: Was	ste Type(s): MSW, singe stream recyclables ste Type(s):		% Rail: Waste Type(s):): Waste Type(s):					
	TRANSF	ER OR DISPO	SAL DESTINA	ATION				
TYPE OF SOLID WASTE	SOLID WASTE MANAGEMENT FACILITY TO WHICH IT WAS SENT (Name & Address)	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	NYS PLANNING UNIT (See Attached List of NYS <u>Planning Units</u> )	AMOUNT TO TRANSFER DESTINATION (TONS)	AMOUNT TO DISPOSAL DESTINATION (TONS)	TOTAL YEAR (TONS)	
Construction & Demolition (C&D) Debris								
Municipal Solid Waste (MSW) (Residential, Institutional & Commercial)	Fulton County Landfill, 847 Mud Rd, Johnstown, NY 12095	NY	Fulton County	Fulton County		2,546.00	2,546.00	
Other (specify)	Oneida-Herkimer SWA, 80 Leland Ave Extension, Utica, NY 13502	NY	Oneida County	Oneide-Herkimer Solid V	277.85		277.85	
Single Stream Recyclables								
energy Steff militi		Ornic Pro Salin		Lankappiller,	TOTAL SEN	T (tons): 2,82	3.85	

If the solid waste type is not listed, use one of the "Other" lines and fill in the name of the waste. If more "Other" lines are needed, cross out an unused type and fill in the other solid waste name. If still more "Other" lines are needed, attach another copy of this page, cross out an unused type, and fill in the other solid waste name.

#### SECTION 5 - REGISTERED TRANSFER FACILITY RECYCLABLE & RECOVERED MATERIALS

#### Is your facility also a permitted or registered Recyclables Handling & Recovery Facility?

- Yes; Complete Section 5 for material recovered from the mixed solid waste stream. Complete a Recyclables Handling & Recovery Facility (RHRF) form for material received as source separated. The RHRF form is located at: <a href="http://www.dec.ny.gov/chemical/52706.html">http://www.dec.ny.gov/chemical/52706.html</a>.
- No; Complete Section 5 for material recovered from the mixed solid waste stream and for material received as source separated.

#### A. Service Area of Recyclable Material Received

Please identify where the recyclable materials are coming from. DO NOT REPORT IN CUBIC YARDS!

- If the materials WERE 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 materials WERE 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 recyclables were generated.

	SERVICE AREA OF REC	CLABLE MATE	RIAL RECEIVED	(where the material is non	ring 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	NY	Fulton County	Fulton County	277.85
Brush, Branches, Trees, & Stumps					
Food Scraps					
Yard Waste (curbside)					
Other (specify)					
			ТО	TAL RECEIVED (tons	277.85

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 - REGISTERED TRANSFER FACILITY RECYCLABLE & RECOVERED MATERIALS (continued) B. Material Recovered

Please identify destination of recovered materials, Indicate the name of the facility, address, corresponding State/Country, County/Province, Destination Planning Unit/Municipality and the amount of material transferred. DO NOT REPORT IN CUBIC YARDS!

100 % Road: Material(s): MSW	, Single Stream Recyclables	% Rail: Material(s):					
% Water: 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	3						
Other Paper (specify)							
			TOTAL BABER	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 - REGISTERED TRANSFER FACILITY RECYCLABLE & RECOVERED MATERIALS (continued)

B. Material Recovered GLASS RECOVERED **DESTINATION NYS** TONS DESTINATION DESTINATION PLANNING UNIT RECOVERED RECOVERED DESTINATION STATE OR COUNTY OR (See Attached List of MATERIAL COUNTRY PROVINCE (out of facility) (Name & Address) NYS Planning Units **Container Glass** Industrial Scrap Glass Other Glass (specify) TOTAL GLASS RECOVERED (tons): METAL RECOVERED **DESTINATION NYS** DESTINATION DESTINATION TONS PLANNING UNIT RECOVERED DESTINATION STATE OR COUNTY OR RECOVERED (See Attached List of MATERIAL COUNTRY PROVINCE (out of facility) (Name & Address) NYS Planning Units Aluminum Foil / Trays See Attachment A, Markets 2021 187.24 **Bulk Metal (from MSW)** Bulk Metal (from CD debris) Enameled Appliances / White Goods Industrial Scrap Metal **Tin & Aluminum** Containers Other Metal (specify)

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.

TOTAL METAL RECOVERED (tons): 187.24

# SECTION 5 - REGISTERED TRANSFER FACILITY RECYCLABLE & RECOVERED MATERIALS (continued) B. Material Recovered

	PLASTIC	ECOVERED			The state
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)					
		186 TSS	OTAL PLASTIC	I RECOVERED (tons):	
	MISCELLANEOUS M	ATERIAL RECOVI	ERED		
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	Sunnking, Inc., 4 Owens Rd., Brockport, NY 14420	NY	Monroe County	Monroe County	29.51
Textiles	American Clothing Recycling, Inc., PO Box 2386, Glens Falls, NY 12801	NY	Warren County	Warren County	10.46
Other (specify)					
		OTAL MISCELLA	NEOUS MATERI	AL RECOVERED (tons	39.97

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 - REGISTERED TRANSFER FACILITY RECYCLABLE & RECOVERED MATERIALS (continued) B. Material Recovered

	MIXED MATERIA	AL RECOVERED		4 m 4	14, 411
RECOVERED MIXED 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	Oneida-Herkimer SWA, 80 Leland Ave Extension, Utica, NY 13502	NY	Oneida County	Oneide-Herkimer Solid Was	277.85
Other (specify)				Oneide-Herkimer Solid Was	
escient of the	ORGANIC MATER			AL RECOVERED (tons)	277.85
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)
Brush, Branches, Trees, & Stumps					
Food Scraps					
Yard Waste (curbside)					
Other (specify)					
	1	TOTAL OF	GANIC MATERIA	L 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

 $\label{thm:constraints} \mbox{Has unauthorized solid was te been received at the facility during the reporting period?}$ 

☐ Yes ☐ No If yes, give information below for each incident (attach additional sheets if necessary):

Date Received	Type Received	Date Disposed	Disposal Method & Location			
	Radiation Monitoring					
e a fixed radiation monitor	fixed radiation monitor? Yes No					

		radiation monitoring		
Does your facility use a fixed radiation monitor? Yes No				
Identify Manufacturer	and Model	of fixed unit.		
Does your facility use a portable rad	liation monitor? YesYes	No		
Identify Manufacturer	and Model	of fixed unit.		
If the radiation monitors have been t	riggered give information below fo	er each incident:		

Incident	Received				Truck	Reading	Disposal	Removed	
Number	Date	Time	Hauler	Origin	Number	rouding	Status	Date	Time
									-

	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?

S	SECTION 8 - PROBLEMS			
Were any problems encountered during the facility procedures)?	reporting period (e.g., specific occurrent	ces which have led to changes in		
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 repo	orts, plans, specifications, and permit co	onditions?		
☐ Yes ■ No If yes, attach additional	sheets identifying changes with a justific	ation for each change.		
SECTION 10 - REGISTRATIO	N/CONSENT ORDER REPORTI	NG REQUIREMENTS		
Are there any additional registration/consent or	rder reporting requirements not covered b	y the previous sections of this form?		
☐ Yes ■ No If yes, attach additional stresponses.	sheets identifying the reporting requirem	ents with their respective		
SECTION 11 - SIGNAT	TURE AND DATE BY OWNER O	R OPERATOR		
Owner or Operator must sign, date and sub- attachment for Regional Office addresses, e				
The Owner or Operator must also submit one	copy by email, fax or mail to:			
Div Bure A	Department of Environmental Cons ision of Materials Management eau of Solid Waste Management 625 Broadway Ibany, New York 12233-7260 Fax 518-402-9041 ress: SWMFannualreport@dec.ny.g			
I certify, under penalty of law, that the data a direction and supervision in compliance with a gather and evaluate this information. I am aw section 71-2703(2) of the Environmental Cons	a system designed to ensure that qualific are that any false statement I make in s	ed personnel properly and accurately such report is punishable pursuant to		
Cindy & Sungston	2/22/2 Date	22		
Cindy G. Livingston	Deputy Director	<sub>,</sub> 518 <sub>,</sub> 736 <sub>-</sub> <b>5501</b>		
Name (Print or Type)	Title (Print or Type)	Phone Number		
PO Box 28	Johnstown	NY 12095		
Address	City	State and Zip		
clivingston@fultoncour	ntyny.gov			
Email (Print or Type)				
ATTACHMENTS: YES NO (Pleas	se check appropriate line)			

## ATTACHMENT A FULTON COUNTY RECYCLING MARKETS 2021

MATERIAL	COMPANY	ADDRESS	CITY, STATE, ZIP	PLANNING UNIT
CORRUGATED CARDBOARD	Recycle City	PO Box 50233	Newark, NJ 07105	
	NH Kelman, Inc.	41 Euclid St.	Cohoes, NY 12047	Town of Colonie, Region 4
	Continental Paper Grading of Canada	6790 Century Ave., Ste 400	Mississuga, ON, L5N 2V8	
	Canusa Hershman	45 Northeast Industrial Rd.	Branford, CT 06405	
ENAMELED APPLIANCES & BULK METAL	Sims Metal Management	140 Port Road	Albany, NY 12202	City of Albany, Region 4
	Planit Waste & Recycling	274 Greenfield Ave.	Ballston Spa, NY 12020	Saratoga Co., Region 5
	Ben Weitsman Recycling LLC (Upstate Shredding)	PO Box 420	Owego, NY 13827	Tioga Co., Region 7
COMMINGLED RECYCLING	Oneida-Herkimer SWA	80 Leland Ave Extension	Utica, NY 13502	Oneida Co., Region 6
TEXTILES	American Clothing Recyclers	9 Rogers St.	Glens Falls, NY 12801	Warren Co., Region 5
ELECTRONICS	Sunnking	4 Owens Road,	Brockport, NY, 14420	Monroe Co., Region 8
OTHER - RECHARGEABLE BATTERIES/CELL PHONES	Call 2 Recycle	100 Parkwood Circle, Suite 200	Atlanta, GA 30339	
FLOURESCENT BULBS	Complete Recycling Solutions LLC	1075 Airport Rd.	Fall River, MA 02720	
WASTE MOTOR OIL	Fulton Co. DSW	847 Mud Road	Johnstown, NY 12095	Fulton Co., Region 5
VEHICLE BATTERIES	NH Kelman, Inc.	41 Euclid St.	Cohoes, NY 12047	Town of Colonie, Region 4
TIRES	STTC Service Tires Truck Centers	766 Watervliet Shaker Rd.	Latham, NY 12110	Albany Co., Region 4
	Wheelabrator Hudson Falls	93 River St.	Hudson Falls, NY 12839	Washington Co., Region 5
	HTI Recycling	490 Ohio Street	Lockport, NY 14094	Niagara Co., Region 9
COMPOST	Fulton Co. DSW	847 Mud Road	Johnstown, NY 12095	Fulton Co., Region 5
FREON	JGS	4 Center Ct.	Troy, NY 12183	Rensselaer Co., Region 4
PROPANE TANKS	Bornt Waste & Metal	PO Box 1223	Gloversville, NY 12078	Fulton Co., Region 5