

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, 2022.

This annual report is for the year of operation from January 01, 2021 to December 31, 2021 SECTION 1 – GENERAL INFORMATION

		FACILITY	INFORMATION	NYS DEC 1
FACILITY NAME:				JUN 16 2022
Lake Loverne	Tra	uster	Station	,
FACILITY LOCATION ADDRESS		FACILITY		STATE: ZIP CODE:
123 Towner Rd.				N.Y. 12846
FACILITY TOWN:		FACILITY	COUNTY:	FACILITY PHONE NUMBER:
Town of Lake Luze	me.	Warr	en	518-696-2105
FACILITY NYS PLANNING UNIT: Warren County	(A list of NY	S <u>Planning Un</u>	its can be found at the end of	this report). NYSDEC REGION #: 5
360 PERMIT #: (Refer to DEC Permit)	DATE IS	SUED:	DATE EXPIRES:	NYS DEC ACTIVITY CODE OR REGISTRATION NUMBER:(Refer to DEC Registration)
FACILITY CONTACT:		public	CONTACT PHONE	CONTACT FAX NUMBER:
Buildings + Grounds		☐ private	NUMBER: <i>513-616-3582</i>	3
CONTACT EMAIL ADDRESS:	\			
			INFORMATION	
OWNER NAME:			PHONE NUMBER:	OWNER FAX NUMBER:
Town of Lake Laz	enc		696-2711	518-696-2733
OWNER ADDRESS: 539 Lake Aver		OWNER C	enry: whotlike luze	STATE: ZIP CODE:
OWNER CONTACT: Building:	& Grains	OWNER	ONTACT EMAIL ADDRI	ESS:
Richard Carragal		Safer	rvisor Lake	Luzerne At Hotmail. Com
		OPERATO	RINFORMATION	Principal
OPERATOR NAME: san			□ public □ private	
PREFERENCES PREFERENCES				
Preferred address to receive correspondence: ☐ Facility location address ☐ Owner address ☐ Owner address				
Preferred email address: Facility Contact Owner Contact				
Preferred individual to receive correspondence:				
Did you operate in 2021? 🗯 Ye	s; Comple	te this form.		

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

☐ No; Complete and submit Sections 1 and 11. If you no longer plan to operate and wish

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:

<u>lôQ</u> % Scale Weight % Truck Count			% Estimated % Other (Spec	ify:))		
Material	Tip Fee (\$/Ton)	January (tons)	February (tons)	March (tons)	April (tons)	May (tons)	June (tons)	July (tons)
Commingled Containers (metal, glass, plastic)	No Charge To Constone					500		
Commingled Paper (all grades)	To Constone	15						<u> </u>
Single Stream (total)								
Other (specify)								
Total Tons Rece	ived							
Material	August (tons)	September (tons)	October (tons)	November (tons)	December (tons)	Total (tor	is) Plaster	Daily Avg. (tons)
Commingled Containers (metal, glass, plastic)						Glass 21 Metal 64	4 144	
Commingled Paper (all grades)						552		
Single Stream (total)					_			
Other (specify)			· · · · · · · · · · · · · · · · · · ·					
							<u> </u>	
Total Tons Received			<u> </u>			155-	 	

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 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: Materia	al(s):	% Rail:	Material(s):		
	ial(s):): Material(s):	
	データ (ASA) ASA (ASA) PROSERVICE AREA OF (MATERIAL RE	EVEDWARE	material is coming from)	t en en en en en en en
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	Virect Haul	N-Y.	Varren	Warren County	Metal 642
Containers (metal, glass, plastic)					Glass 21 Plastiz 144
Commingled Paper (all grades)	Pirect Haul	N-Y-	Warren	Warren County	554
Single Stream					
Other (specify)					
			· · · · · · · · · · · · · · · · · · ·		
				L	

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TOTAL MATERIAL RECEIVED (tons):

SECTION 4 – RESIDUE

Total residue (tons) =	Residue destination (Name & Ad	ldress)			
Percent Residue Calcu	liation: Total tons residue/Total tons material received	x 100 =	_ 		
	SECTION 5 - RECYCLABLE	S & RECOVER	ED MATERIAL	.S	
			_		
Please identify destination	nation of recyclable materials. Indicate the name ation Planning Unit/Municipality and the amount	e of the facility, <u>a</u> of material reco	<u>address,</u> corresp vered. DO NOT l	onding State/Country, (REPORT IN CUBIC YARI	County/Province, DS!
Specify transport metho	d, list type of material(s) and percentages of total mater	rial transported by e	each:		
	(s):				
% Water: Material		% O	ther (specify:): Material(s):	
	TO THE REPORT OF THE PAPER OF	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	Perkins Recycling Corint Rd. Blenns Falls NV.	Ne	Warren	Warren County	32 74
Junk Mail					······································
Magazines ⊀	Casella Waste Services 1392 Route 9	N-Y-	Washington	Warre County	2234
Newspaper ⊀	Fort Edward NY 12428				
Office Paper					
Paperboard/					
Boxboard					
Other Paper (specify)					
			TOTAL DAD!	P PECOVERED (tone):	ELF

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SECTION 5 - RECYCLABLES & RECOVERED MATERIALS (continued)

	A CONSTRE	OVERED SERVE			verse e
RECOVERED MATERIAL	GLASS REC 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	Warrensburg Toxy Pit	N.Y.	Warren	Warren County	21
Industrial Scrap Glass			·		
Other Glass (specify)					
			TOTAL GLASS R	ECOVERED (tons):	
	METABRE	OVERED		The state of the s	
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	Clenns Falls N-Y.	N-Y-	Warren	Warren County	59
Enameled Appliances / White Goods	Added in with Bulk Metal				
Industrial Scrap Metal					
Tin & Aluminum Containers	Cohen Scrap Metal Glenns Falls Nor	NXI	Warren	Warren County	52
Other Metal (specify)					
			TOTAL METAL R	RECOVERED (tons):	642

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SECTION 5 - RECYCLABLES & RECOVERED MATERIALS (continued)

	SEPTEMBER SEPTEMBER	MOVATRIENZAS			
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)	Hiran Hollow Regeneration 3 Washburn Rd Gay Sevourt NY	N-Y-	Saratoga	Waster County	144
PET (plastic #1)					
HDPE (plastic #2)					
Other Rigid Plastics (#3 - #7)					
Industrial Scrap Plastic					
Plastic Film & Bags					,
Other Plastics (specify)					
		T	I OTAL PLASTIC F	ECOVERED (tons):	144

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VOLUME TO WEIGHT CONVERSION FACTORS

MATERIAL	EQUIVALENT		NT MATERIAL EQUIVA		ENT	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			
CORRUGA TED - 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				F. State of the st
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)	Metal- R. Cohen Clenns Falls No. Glass - Warrensburg Tony Pit N.Y. Flastiz - Hiram Hollow Gansvoort M.	N.Y. N.Y. N.Y.	Warren Warren Saratoga	Warren County Warren County	645 21 144
Commingled Paper & Containers	Corrugated Cardboard - Perkins G.F. Magazines > Casalla Newspaper Fort Edward N.Y.	N.Y.	Warren Washington	Warren County Warren County	3234
Single Stream	None				
Other (specify)					
				AL RECOVERED (tons)	
A SECTION AND AND ASSESSMENT OF	A MISCELLANEOUS MA	redriada (con presidente presiden	REP		
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	Clement N.Y. 12077	N.Ye	Abany	Warren County	3,556 LBS
Textiles					
Other (specify)					
	то	OTAL MISCELLA	NEOUS MATERIA	AL RECOVERED (tons)	3,556LBS

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SECTION 6 – UNAUTHORIZED SOLID WASTE

Yes	_				the facility during the re	· - ·
Are there required cost estimates and financial assurance documents for closure? 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)? 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	_ 		<u> </u>			
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		ie ally aut	лиона р	CHIRCOHSCIL OIGE	reporting requirements	The second by the provided desirate of the
1 1690011363.	☐Yes	<u>⊯</u> No	•		eets identifying the repo	orting requirements with their respective

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:

ATTACHMENTS: Tyes I NO

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.

Mahal Signature	6/13/22 Date
Richard Carrajal Name (Print or Type) Supervisor Lake	Supervision of Transfer Station Title (Print or Type)
	Print or Type)
539 Lake Ave. Address	Lake Luzerne City
NN 12346 State and Zip	(518) 696 - 2-711 Phone Number