

Waste Management of New York, LLC 100 Boat Street, Albany, NY 12202

ELECTRONICALLY TRANSMITTED ORIGINAL by UPS NEXT DAY Tracking # 1Z56V3110100935205

February 22, 2022

New York State Department of Environmental Conservation Region 5 Division of Materials Management 1115 State Route 86 Ray Brook, NY 12977

Attn: Jessie Sangster

Re: Ft. Edward Annual Reports, Part 360 Pennit # 5-5330-00013/00004

Dear Jessie:

The following Annual Reports are being provided for the Waste Management of New York, L.L.C. (WMNY) transfer station on Wing Street in Fort Edward, New York. Enclosed please find the Construction and Demolition Debtis Processing Facility and Recyclables Handling and Recovery Facility Annual Reports. The annual reports are being submitted by email to the Central Office and to the Ray Brook office, per the directions in the annual report instructions.

Pursuant to Special Condition 7 of the referenced Part 360 permit, Waste Management of New York, L.L.C. (WMNY) submits the closure cost estimate, revised to account for inflation (Table 1.1.9, Implicit Price Deflators for Gross Domestic Product).

2021 Cost Estimate \$ 42,246 2021 Factor 1.059 2022 Cost Estimate \$ 44,739

The Surety Bond (RLB0002546) will be adjusted to demonstrate adequate coverage for the closure cost estimate.

If you have any questions, please call me at (413) 519-3916.

Sincerely,

Frank Sepiol

Environmental Protection Manager

Enclosures

Cc. Jim Casey, WMNY

Warren Harris, WMNY Joe Mazzelli, WMNY Connie Gaw, WM

PERMITTED C&D DEBRIS HANDLING AND RECOVERY FACILITY ANNUAL REPORT

(if you need assistance litting out this form plause small symfannusireport@dec.ny.gov or call 518-402-9678.)

Complete and submit this form by March T, 2022.

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

SECTION 1 - GENERAL INFORMATION

	100	FACILITY	INFORMATION				
FACILITY NAME: Waste Manager	nent of	New '	York, LLC				
FACILITY LOCATION ADDRESS:		FACILITY	CITY:		STATE:	ZIP CODE:	
12 Wing Street		Fort E	Edward		NY	12828	
FACILITY TOWN;		FACILITY	COUNTY:	FACILIT	Y PHONE	NUMBER:	
Fort Edward		Wash	ington	518-	378-9	165	
FACILITY NYS PLANNING UN Washington County	IIT: (A list of RY	S <u>Planning Un</u>	ils can his found at the ar	d of this repo		SDEC GION #:5	
360 PERMIT #: (Refer to DEC Permit) 5-5330-00013/00004	7/28/2		DATE EXPIRES: 7/31/2024				
FACILITY CONTACT: Warren Harris	□ public ■ private	CONTACT PHONE NUMBER: 518-636-2141		518-436-4255			
CONTACT EMAIL ADDRESS:							
		OWNER	INFORMATION				
OWNER NAME: Waste Management of Nev	v York, LLC	OWNER PHONE NUMBER: 518-636-2141		OWNER FAX NUMBER: 518-436-4255			
owner address: 100 Boat Street		OWNER O	ITY:		STATE:	ZIP CODE: 12202	
owner contact: Warren Harris		owner contact email address: wharri11@wm.com					
		OPERATO	R INFORMATION		111		
OPERATOR NAME:	same as owner				□ public □ private		
		PRE	FERENCES				
Preferred address to receive co. Other (provide):	rrespondence:	Facility los	callon eddress	Do	wner address		
Preferred email address; F	acility Contact	□ ov	vner Contact				
Preferred Individual to receive of Other (provide):	orrespondence	9: Facility	y Contact.	lwner Contect			

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.nv.gov/chemical/52706.html.

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 516-402-9041

Email address: SWMFannuairaport@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.

168	2/22/2022
Signature	Date
Frank Sepiol	Environmental Protection Manager
Name (Print or Type)	Title (Print or Type)
fsepiol@wm.com	
Email ((Print or Type)
WMNY, 100 Boat Street	Albany
Address	City
NY 12202	413 519 3916
State and Zip	Phone Number

ATTACHMENTS: YES NO (Please check appropriate line)



RECYCLABLES HANDLING & RECOVERY FACILITY ANNUAL REPORT

Department of RECYCLABLES HANDLING & RECOVERY FACILITY ANNUAL REPORT Systemmental (if you need Approximated Willing out 10th Natural Approximation of the State o Complete and enhand 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

	1 Lacutes 1 T	INFORMATION				
ent of	New '	York, LLC				
FACILITY LOCATION ADDRESS:			-7	STATE:	ZIP CODE:	
	Fort E	Edward		NY	12828	
	FACILITY	COUNTY:	FAC	LITYPHO	NE NUMBER:	
	Wash	ington	518	3-378	9165	
T: INTEREST MY	S Planning Ur	HE 21/1000 TOMOR OF REE	o viisini o		SDEC GION#:5	
U STATE OF THE		7/31/2024	program to make a part back to the bandward			
	□ public ⊡ private	CONTACT PHONE NUMBER: 518-638-2141	518-436-4255			
-			-			
LLC	OWNER PHONE NUMBER: 518-636-2141		OWNER FAX NUMBER: 518-436-4255			
	OWNER CITY: Albany			STATE:	ZP CODE: 12202	
	OWNER CONTACT EMAIL ADDRESS:					
ams as pwiner				□public □private		
respondence	Facility	ocalion address		Owner addres	ts.	
cility Contact	Ω¢	hynerContact				
mesponden	CO Facil	my Contact Dow	rner Conta	ti		
	DATE IS 7/28/	FACILITY Fort E FACILITY Wash T: INTEREST HYS Elemning Up DATE ISSUED; 7/28/2014 DATE ISSUED; 7/28/2014 Depublic Depu	Fort Edward FACILITY COUNTY: Washington T: IATLICE MYS. Planning Units: Street County of County	FACILITY CITY: Fort Edward FACILITY COUNTY: Vashington T: ACTUAL MYS. Planning Units: Street Foundation (1986) DATE ISSUED: 7/28/2014 7/31/2024 Date Issued: 7/31/2024 Dublic Contact Phone Register of the private Presented (1986) Date Information Contact Phone Presented (1986) Date Issued: Date Issued: Total MYS. Planning Units: Street Presented (1986) Date Issued: Total MYS. Planning Units: Street Presented (1986) Date Issued: Total MYS. Planning Units: Street Presented (1986) Date Issued: Date Issued: Total MYS. Planning Units: Street Presented (1986) Date Issued: Total MYS. Planning Units: Street Presented (1986) Date Issued: Total MYS. Planning Units: Street Presented (1986) Date Issued: Total MYS. Planning Units: Street Presented (1986) Date Issued: Total MYS. Planning Units: Street Presented (1986) Date Issued: Street Presented (1986) Date Issue	FACILITY CITY: FORT Edward FACILITY COUNTY: Washington T: INTERCL NYS. Planning Units and the standard will smooth the	

Dig Aon obesate in 50515 (7)	Yes; Complete this form.
to relinquish your permit/regist	No; Complete and submit Sections 1 and 11. If you no longer plan to operate and wish ration associated with this solid waste management activity, also complete the "Inactive lifty or Activity Notification Form" located at: http://www.dec.nv.gov/chemical/52706.html .

SECTION 2 - MATERIAL RECEIVED

Committee the committee of the committee	Sucol robust		DO NOT REPOR	TIM CUBIC YA	RDS		tneir destination	after processing.
Specify the methods used to	measure the qua	malies received	and the percentag	ges measured b	w each method:			
100 % Scale Weight			% Estimated		4 19 Date 1			
Truck Count			% Other (Specif	y				
Monarchi	Tip Fas	January	February	March	April	May	June	July

Mitterlal	(S/Ton)	January (tons)	February (tons)	March (tons)	April (fons)	(tons)	June (tens)	you (anal)
Commingled Containers Inetal, glass, plants)					1		10,	1
foots, glass, glastic) Commingled Paper (all grades)								1
Single Streen (loss)		(L	1					
Other (apacity)	- 113413							
Cardboard		37.80	37.50	58.74	50.55	53.33	50.44	33.45
		-1111121						
Total Tons Roce	Ned	37.80	37.50	58.74	50.55	53.33	50.44	33,45
Minter(s)	August (tons)	Saptember (lons)	October (tom)	Novamber (lons)	December (tons)		lal Year lons)	Cally Avg. (Kons)
Commingled Containers (nots), wass, please; Commingled Paper (au grades)		-				-none		
Bingle Birnam (Ioth)							-	
Other (spectly)					1.00			
Cardboard	32.27	55.00	52,52	44.48	50.57	55	6,65	4.12
		1						
Total Total Received	32.27	55.00	52,52	44.48	50.57	556.65		4.12

If the metarial type is not listed, uperone of the "Other" lines and fill in the name of the material. If more "Other" lines are medied, cross out or unused type and fill in the other metarials name. If all more "Other" lines are national, intached another copy of the page, cross and on unused type, and fill in the other meterials name.

SECTION 3 - SERVICE AREA OF MATERIAL RECEIVED

Please I sently, where the mainties is coming from The total tone received reported below should equal the total tone received in Section 2 (Solid Wasse Received). DO NOT REPORT IN CUBIC YARDS!

- If the material WAS received from another splid waste management facility, please write in the name and <u>address</u> of the facility along with the appropriate state; county and planning unit/municipality.
- If the material WASHCF received from another solid waste management facility, please write in "Direct Hauf" along with the appropriate state county and platering unit/municipality where the material was generated.

190 % Road Matefal(s):	% Rail: Material(5):
% vymer, Material(s).	% Other (apedly:). Matternal(a);
8	SERVICE AREA OF MATERIAL RECEIVED

	SERVICE AREA OF	MATERIAL RE	CENED/	resorti e sontra i e	
MATERIAL	SOLID WASTE MANAGEMENT FACILITY FROM WHICH IT WAS RECEIVED (Name & Address) OR "Direct Hauf"	SERVICE AREA STATE OR COUNTRY	SERVICE AREA COUNTY OR PROVINCE	SERVICE AREA NYS PLANVING UNIT (See Altached List of NYS Planving Units)	TONS RECEIVED
Commingled Containers (melsi, glass, plastic)					
Commingled Paper (all grades)					- Anna
5 ingle Stream					
Other (specify)			i	Ť	
Cardboard	Direct Haul	104	Estatoge County	Saminga County	164.08
	Direct Healt	MY	Warran Canally	Werren County	371,38
	Direct Haul	NV	wastington County	Washington County	21.19
- 4		4	TOTAL MATE	RIAL RECEIVED (CONT	s); 558,55

If the material type is not falled, one one of the "Other" lines, and fill in the mane of the material. If more "Other" lines, are needed, cross out arrupused type and fill in the other materials name. If still more "Other" lines, are needed, ellected another copy of this page, cross out an unused type, and fill in the other materials

name: Reprinted (12/21)

SECTION 4 - RESIDUE

Total residue (lons) = Percent Residue Calc	Residue destination in Mador: Total tons residue/Total tons malerial in	nor S Addyese) nostyed x Too =	_		
	SECTION 5 - RECYCL	ABLES & RECOVER	RED MATERIAL	s	
Planting date Destin	ation Planning Unit/Nunicipality and the a	s name of the facility, ; mount of material reco	address, corresp vered. DO NOT	onding State/County, REPORT IN CUBIC YAR	County/Province, DSI
	od, list type of material(s) and percentages of tota ((s)	il material transported by a	sach eil: Material(s):		
/o eagen; lythusite	11(4)-		ther (specify:	j: Material(s):	
The second second	N	APER RECOVERED			
RECOVERED MATERIAL	DESTINATION (Name & Address)	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	DESTINATION NYS PLANNING UNIT (See Attached List of MYS) Planning Units)	TONS RECOVERED (out of melity)
Commingled Paper (all grades)				-	
Corrugated Cardboard	Waste Management Respose Entends, Liverpool	MA	Oremotage Canaly	Owendaga County (except Ski	6)2:32
Junk Mail					
Magazines				- intra-	
Kewspapor					
Office Paper		1307100			
Paperboard! Boxboard		uai X			4000
Olims Paper (specify)					
		_	TOTAL PAPE	ER RECOVERED (tons):	1204)

If the material type is not listed, use one of the "Cities" lines and fill in the name of the meants. If more "Cities" sines are needed, to so and the meants of the cities page, cruss put on unused type, and the other meants name. If all more "Cities" tries are needed, introduced entities page, cruss put on unused type, and then the other meants name.

SECTION 5 - RECYCLABLES & RECOVERED MATERIALS (continued)

	GL	ASS RECOVERED			
RECOVERED MATERIAL	DESTINATION (Name & Address)	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	DESTINATION NVS PLANNING UNIT (See Attached Dat of BYS Planning Units)	TONS RECOVERED
Container Glass	Islan		11121		
Industrial Scrap Glass				1710	
Other Glass (specing					
		ETAL RECOVERED	OTAL GLASS R	SCOVERED (tons): 6	
	IVIII)	TAL MEGUYERED			
RECOVERED MATERIAL	DESTINATION (Name 2 Address)	STATE OR EQUATRY	COUNTY OR PROVINCE	PLANNING UNIT (See Ausched Lister 1979 Planning Linux)	TONS RECOVERED (out of facility)
Aiuminum Foli / Trays				1	
Bulk Motal					
Enameled Appliances / White Goods					
Industrial Scrap Metal		100			-100
Tin & Aluminum Containers		1911			
Other Metal (specify)			·vini	_	

Fithe material type is not listed, use one of the "Other" lines and iff in the name of the material. If more "Other" lines are needed, orms out an unused type and fill in the other materials mans. If util more "Other" lines are needed, extended extended copy of this page, provide an unused type, and if it is the other materials mans.

SECTION 5 - RECYCLABLES & RECOVERED MATERIALS (positioned)

	PL	STIC RECOVERED			
RECOVERED MATERIAL	DESTINATION (Name & Address)	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	DESTINATION NYS PLANNING LINIT (See Attacled Livi of hys flenning units)	TOKS RECOVERED (out at latelling)
Comminglad Physic. (#1-#7)					
PET (plastic P1)		-121 - 101-			
HDPE (plestic #2)					
Other Rigid Plastics (#3 - #7)					
Industrial Screp Plastic					
Plestic Film & Bags					
Other Flushes (seesily)	a sa sivilyana na				
		76	OTAL PLASTIC R	ECOVERED (tons): #	- Control March 1877

If the material type is not listed, use one of the "Other" lines and fill in the name of the material. If more "Other" inco are needed, cross out an unused type and till in the other materials mane. I still more "Other" lines are needed, second-or copy of this page, cross out an unused type, and fill in the other materials mane.

VOLUME TO WEIGHT CONVERSION FACTORS

MATERIAL EQUIVALENT		LENT	MATERIAL	EQUIVALENT		MATERIAL	EQUIVALENT	
GLASS —whole bottles	1 cube yard	0.35 forts	GLASS - cruthed mechanically	Feable yard 10,88 to		ALLENBURY - cans - whole	1 cubic yard	0.03 tons
GLASS - sent orushed	1 cubic yeard	0.70 tons	GLASS - unchashed manually	55 gallen drum	D, 18 lone	ALUMBUM - cans - Italianati	t catalo yard	0,125 tons
PARENT - nigh grade logsa	1 cubic yard	0.18 tons	FLASTIC - PET - whole	T cubic yard	0,015 (pes	1.70-10,000		
FAPER - high grade balled	1 cultic yeard	0.36 tons	FLASTIC - PET - (Ismened	1 cubic yand	0.04 font			
PAPER - mixed loose	1 cubic yard	0.15 Iona	PLASTIC - PET - balled) cubic yard	0.38 tons	WHITE GOCKES - uncompacted	1 caddo yard	D. 10 tons
NEWSPRINT - loans	1 cubic yard	0.29 Jons	PLASTIC - stylofosin	1 cubic yard	0.02 lans	WHITE GOODS - compacted	1 culdo yard	0.5 tons
MEMBER INT - compacted	I curbic yard	Q.43 ions	PLASTIC - HOTE - Whole	Y came yard	3.012 tises			
CORRUGATED - loose	1 cubic yard	0.045 Jans	PLASTIC - HOPE - Gallered 1	1 cubic yard	0,03 tans			
CORRUGATED - baled	i cuide yard	O.SS Your	PLASTIC - HOPE - baled	I cubic yard	0,38,4005	FERROLE METAL -cans whole	1 cubic yard	0.08 kms
			PLASTIC - mixed (grocony bags)	45 gelon bag	0.01 tans	FERROLIS METAL - cans	1 cubic yard	Q.43 (cms

SECTION 5 - RECYCLABLES & RECOVERED MATERIALS (continued)

	MIXED	MATERIAL RECOVERED			
RECOVERED MATERIAL	DESTINATION (Name & Address)	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	DESTINATION MYS PLANNING UNIT (See Attached List of MYS Planning Units)	TONS RECOVERED (and of facility)
Committigled Containers (metal, gless, plusite)			- No	1510000000	-000
Commingled Paper & Containers					
Single Stream					
Other (specie)		111.01.0		- THINK	
	MISCELLAND	TOTAL	affiliation of the second second second second	L RECOVERED (tons):	1
	MISGELANE			DESTINATION HYS	- COMPANY
RECGYERED MATERIAL	DESTINATION Disma & Address)	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	PLANNING UNIT (See Attached Lister MYS Planning Units)	TONS RECOVERED (out of facility)
Electronics					
Textites	i unicon				-
Othor (specify)		THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TW			
- Valle		TOTAL MISCELLA	MEDIIS MATERIA	L RECOVERED (tons):	-0

If the material type is not lasted, take 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 eith more "Other" lines are needed, attached shother copy of this page, cross out an unused type, and fill in the other materials name.

SECTION 6 - UNAUTHORIZED SOLID WASTE

Date Regu	elved	Type Received	Date Disposed	Disposal Method & Location
				Composer Western & Assessment
		> 10		
SECT	ION 7 -	COST ESTIMAT	ES AND FINANCIA	L ASSURANCE DOCUMENTS
Are there require	d cost esti	mates and financia	assurance documents for	or closure?
Ves No	lf yes, s Closure	ttach additional she	els reflecting annual adju	stments for inflation and any changes to the
	Olusuie	: Maile		
	_			
		SE	CTION 8 - PROBLE	MS
Were any proble facility procedure	ms encour is)?	nered during the rep	porting period (e.g., spec	ific occurrences which have led to changes in
Ves No	lf yes, a problem	ttach additional she I.	ets identifying each prob	lem and the methods for resolution of the
	-	pi	ECTION 9 - CHANG	ES
		St		dr.
Were there any c	hanges fro		s, plans, specifications, a	nd permit conditions?
Wereithere any o ∐Yes ⊑No		m approved report		nd permit conditions?
		m approved report		
Yes No	If yes, a	om approvad report	ets identifying changes w	
]Yes [No SE	If yes, a	om approvad report tlach additional she 0 - PERMIT/CO	ets identifying changes w	rith a justification for each change.

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 amail, 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 cartify, 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 talse 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.

nhe	2/22/2022	
Signature	Date	
Frank Sepiol	Environmental Protection Manager	
Name (Print or Type)	Title (Print or Type)	
fsepiol@wm.com	2 4 4 4 4	
Email (F	Print or Type)	
WMNY, 100 Boat Street	Albany	
Address	City	
NY 12202	,413,519_3916	
State and Zip	Phone Number	

ATTACHMENTS D YES D NO