Chenango County Annual Report Brisben RHRF



January 1, 2021 - December 31, 2021



RECYCLABLES HANDLING & RECOVERY FACILITY ANNUAL REPORT

Conservation

(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: | | 171012111 | THE CHARLES | | | |
| Brisben Recycling Facility | | | | | | |
| FACILITY LOCATION ADDRESS |): | FACILITY | CITY: | | STATE: | ZIP CODE: |
| 177 Coutermarsh R | load | Green | ne | | NY | 13778 |
| FACILITY TOWN: | | FACILITY | COUNTY: | FACI | LITY PHO | NE NUMBER: |
| Greene | | Chen | ~ | | | 5-7718 |
| FACILITY NYS PLANNING UNIT Chenange County | (A list of N | /S <u>Planning Ur</u> | <u>iits can be found at the end o</u> | f this rep | ort), NY | SDEC GION#:7 |
| 360 PERMIT #: (Refer to DEC Permit) 7-0842-00048-0003 | 02/20 | SSUED: 0/2019 | DATE EXPIRES: 02/20/2024 | REGI | STRATION | VITY CODE OR NUMBER: (Refer to |
| | 02,20 | 72010 | OZ/ZO/ZOZ | DEC R | egistration) (| 9R10008 |
| FACILITY CONTACT: Shawn G. Fry P.E., | L.S. | ■ public □ private | CONTACT PHONE NUMBER: (607)337-1710 | | | FAX NUMBER: 36-8988 |
| CONTACT EMAIL ADDRESS: Sh | awnf@c | o chenano | O DV US | | | |
| 5.1 | 411111690 | | INFORMATION | | | |
| OWNER NAME: | | OWNER P | OWNER FAX NUMBER; | | | |
| Chenango County | | (607)337-1710 | | (607)336-8988 | | |
| OWNER ADDRESS: 79 Rexford Street | | OWNER CITY: Norwich | | | STATE: NY | ZIP CODE; 13815 |
| OWNER CONTACT: | | | OWNER CONTACT EMAIL ADDRESS: | | | |
| Shawn G. Fry P.E., | | | nf@co.chena | ngo | .ny.us | S |
| OPERATOR NAME: sam | | OPERATOR | RINFORMATION | | | |
| Sam | e as owner | | | | ■ public ■ private | |
| PREFERENCES | | | | | | |
| Preferred address to receive correspondence: Facility location address | | | | | | |
| Preferred email address: Facility Contact | | | | | | |
| Preferred individual to receive correspondence: | | | | | | |
| 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 | omplete n associat | and submit ed with this | Sections 1 and 11. If yo solid waste managemen | u no lo t activit | nger plan to y, also com | o operate and wish nplete 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!

| Total Tons Received | 34.065 | 34.065 | 34.065 | 34.065 | 34.065 | 408.78 | | 1.34 |
|--|---------------------|---------------------|--------------------------------|--------------------|--------------------|---------------|------------------|----------------------|
| | | | | | | | | |
| Source Separated | 34.065 | 34.065 | 34.065 | 34.065 | 34.065 | 40 | 8.78 | 1.34 |
| Other (specify) | | | | | | | | |
| Single Stream (total) | | | | | | | | |
| Commingled Paper (all grades) | | | | | | | | |
| Commingled Containers (metal, glass, plastic) | | | | | | | | |
| Material | August (tons) | September (tons) | October (tons) | November (tons) | December (tons) | | al Year tons) | Daily Avg. (tons) |
| Total Tons Rece | ived | 34.065 | 34.065 | 34.065 | 34.065 | 34.065 | 34.065 | 34.065 |
| | | | | | | | | |
| Source Separated | \$0 | 34.065 | 34.065 | 34.065 | 34.065 | 34.065 | 34.065 | 34.065 |
| Other (specify) | | | | | | | | |
| Single Stream (total) | | | | | | | | |
| Commingled Paper (all grades) | | | | | | | | |
| Commingled Containers (metal, glass, plastic) | | | | | | | | |
| Material | Tip Fee (\$/Ton) | January (tons) | February (tons) | March (tons) | April (tons) | May (tons) | June (tons) | July (tons) |
| 0% Scale Weight % Truck Count | | | _% Estimated _% Other (Spec | cify: | |) | | |

If the material type is not listed, use one of the "Other" lines and fill in the name of the material. If more "Other" fines 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 | d, list type of material(s) and percentages of total material tra | ansported by eac | :א: | | |
|---|--|--|--|--|---------------|
| 100 % Road: Material | (s): | % Rail: | | | |
| % Water: Materia | % Other (specify: | |): Material(s): | | |
| | SERVICE AREA OF | MATERIAL REC | | | |
| 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) | | | | | |
| | | | | | |

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

NY

Direct Haul

~

408.78

Chenango County - Chenango County

TOTAL MATERIAL RECEIVED (tons): 408.78

Single Stream

Other (specify)

Source Separated

(total)

SECTION 4 - RESIDUE

| Total residue (tons) = 0 Percent Residue Calculation: Total tons res | Residue destination (Name & Address) N/A idue/Total tons material received x 100 = 0 | _ |
|--|--|---|
| SI | ECTION 5 - RECYCLABLES & RECOVERED MATERIALS | |

Please identify destination of recyclable materials. Indicate the name of the facility, address, corresponding State/Country, County/Province

| 100 % Road: Materia | | | ail: Material(s): | | |
|-------------------------------|--|------------------------------------|--------------------------------------|---|----------------------------------|
| % Water: Materia | al(s): | %0 | ther (specify: |): Material(s): | |
| | P | APER 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 | NH Kelman, Cohoes | NY | Albany County | Capital Region Solid Waste | 68.14 |
| Junk Mail | NH Kelman, Cohoes | NY | Albany County | Capital Region Solid Waste | 20.92 |
| Magazines | | | | | |
| Newspaper | North Norwich Recycling and Recovery Facility 6701 NYS 12, Norwich | NY | Chenango County | Chenango County | 6.00 |
| Office Paper | | | | | |
| Paperboard/ Boxboard | | | | | |
| Other Paper (specify) | | | | | |

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TOTAL PAPER RECOVERED (tons): 95.06

SECTION 5 - RECYCLABLES & RECOVERED MATERIALS (continued)

| | GLAS | S RECOVERED | | | | |
|--------------------------------------|---|------------------------------------|--------------------------------------|---|--|--|
| RECOVERED MATERIAL | DESTINATION (Name & Address) | SIAILOR | | DESTINATION NYS PLANNING UNIT (See Attached List of NYS Planning Units) | TONS RECOVERED (out of facility) | |
| Container Class | North Norwich Recycling and Recovery Facility | NY | Chenango County | Chenango County | 47.89 | |
| Container Glass | 6701 NYS 12, Norwich | | | | | |
| Industrial Scrap Glass | | | | | | |
| Other Glass (specify) | | | | | | |
| | | | TOTAL GLASS R | ECOVERED (tons): 47. | 89 | |
| | META | L RECOVERED | 701712 02110011 | (101.0). | | |
| 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 | Weitsman Shredding, 1 Recycle Drive, Owego | NY | Tioga County | Tioga County | 20.57 | |
| Industrial Scrap Metal | Weitsman Shredding, 1 Recycle Drive, Owego | NY | Tioga County | Tioga County | 138.48 | |
| Tin & Aluminum | North Norwich Recycling and Recovery Facility | NY | Chenango County | Chenango County | 10 | |
| Containers | 6701 NYS 12, Norwich | | | | | |
| Other Metal (specify) | | | | | | |
| Lead Acid Batteries | Otsego Auto Crushers, Norwich | NY | Chenange County | Cheпango County | 2.24 | |
| | | | TOTAL METAL R | RECOVERED (tons): 17 | 1.20 | |

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SECTION 5 - RECYCLABLES & RECOVERED MATERIALS (continued)

| | PLAST | TIC RECOVERED | | | |
|---------------------------------|---|------------------------------------|--------------------------------------|----------------------|------|
| RECOVERED MATERIAL | DESTINATION (Name & Address) | DESTINATION STATE OR COUNTRY | DESTINATION COUNTY OR PROVINCE | R PLANNING UNIT RECO | |
| Commingled Plastic (#1 - #7) | | | | | |
| DET | North Norwich Recycling and Recovery Facility | NY | Chenango County | Chenango County | 4.06 |
| PET (plastic #1) | 6701 NYS 12, Norwich | | | | |
| HDPE (plastic #2) | North Norwich Recycling and Recovery Facility | NY | Chenango County | Chenango County | 2.75 |
| | 6701 NYS 12, Norwich | | | | |
| Other Rigid Plastics | North Norwich Recycling and Recovery Facility | NY | Chenango County | Chenango County | 4.38 |
| (#3 - #7) | 6701 NYS 12, Norwich | | | | |
| Industrial Scrap Plastic | | | | | |
| Plastic Film & Bags | | | | | |
| Other Plastics (specify) | | | | | |
| - | | T | OTAL PLASTIC F | RECOVERED (tons): 1 | 1.19 |

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 | EQUIVA | LENT | MATERIAL | EQUIVALENT | | MATERIAL | EQUIVALENT | |
|---------------------------|--------------|------------|--------------------------------|----------------|------------|-----------------------------|--------------|------------|
| GLASS - whole 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 balled | 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 - whole | 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 - balled | 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 MA | TERIAL 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) | | | | | |
| | MICOTALANICOL | | | L RECOVERED (tons | ;): |
| | MISCELLANEOU | IS MATERIAL RECOVE | KED | | |
| 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, 4 Owens Road, Brockport | NY | Monroe County | Monroe County | 24.24 |
| Textiles | Salvation Army, Binghamton | NY | Broome County | Broome County | 3.96 |
| Other (specify) | | | | | |
| Waste Tires | SGS Recovery | NY | Niagara County | Niagara County | 38.42 |
| Household Batteries | Battery Solutions, Wixom | MI | | | .73 |
| | | TOTAL MISCELLA | NEOUS MATERIA | AL RECOVERED (tons | 5): 67.36 |

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SECTION 6 – UNAUTHORIZED SOLID WASTE

| Has una Yes | uthorized No | | | the facility during the | reporting period? ttach additional sheets if necessary): |
|-----------------------|--------------------------|----------------------|----------------------------------|-------------------------|--|
| | Date Rece | | Type Received | Date Disposed | Disposal Method & Location |
| | | | | | |
| | <u> </u> | | | | |
| : | | | | | |
| | SECT | ION 7 - | COST ESTIMAT | ES AND FINANC | CIAL ASSURANCE DOCUMENTS |
| | | d cost es | limates and financia | assurance documer | nts for closure? |
| Yes | ■ No | If yes, o | attach additional she e Plan? | ets reflecting annual | adjustments for inflation and any changes to the |
| | | | | | |
| | | | SE | CTION 8 – PROE | BLEMS |
| Were ar facility p | ny problem procedure: | ns encou s)? | ntered during the rep | porting period (e.g., s | pecific occurrences which have led to changes in |
| Yes | ■ No | If yes, a | attach additional she n. | ets identifying each p | problem and the methods for resolution of the |
| _ | _ | | SE | ECTION 9 - CHA | NGE\$ |
| Were th | ere any cl | nanges fr | om approved reports | s, plans, specification | s, and permit conditions? |
| Yes | No | If yes, a | attach additional she | ets identifying chang | es with a justification for each change. |
| | | | | | _ |
| | \$EC | CTION 1 | 0 - PERMIT/CO | NSENT ORDER F | REPORTING REQUIREMENTS |
| Are then orm? | e any add | itional pe | rmit/consent order re | eporting requirements | s not covered by the previous sections of this |
| Yes | ■No | If yes, a respons | | ets identifying the rep | porting 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:

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.

| 3(2) of the Environmental Conservation La | w and section 210.45 of the Penal Lav |
|---|---------------------------------------|
| Sham H. Ty Signapure | 2/24/2022 Date |
| Shawn G Fry P.E., L.S. | Director, Department of Public Works |
| Name (Print or Type) | Title (Print or Type) |
| shawnf@co.chenango. | .ny.us |
| Email (| (Print or Type) |
| 79 Rexford Street | Norwich |
| Address | City |
| NY, 13815 | 607,337,1710 |
| State and Zip | Phone Number |

ATTACHMENTS: Tyes I NO