



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: Alfred Transfer Station			
FACILITY LOCATION ADDRESS: 394 Satterlee Hill Rd	FACILITY CITY:	STATE: NY	ZIP CODE: 14804
FACILITY TOWN: Almond	FACILITY COUNTY: Allegany	FACILITY PHONE NUMBER: 5852685400	
FACILITY NYS PLANNING UNIT: (A list of NYS Planning Units can be found at the end of this report). Allegany County			NYSDEC REGION #: 9
360 PERMIT #: (Refer to DEC Permit)	DATE ISSUED:	DATE EXPIRES:	NYS DEC ACTIVITY CODE OR REGISTRATION NUMBER: (Refer to DEC Registration) 02R10013
FACILITY CONTACT: Dean Scholes	<input checked="" type="checkbox"/> public <input type="checkbox"/> private	CONTACT PHONE NUMBER: 585-268-9230	CONTACT FAX NUMBER: 585-268-9648
CONTACT EMAIL ADDRESS: scholed@alleganyco.com			
OWNER INFORMATION			
OWNER NAME: Allegany County	OWNER PHONE NUMBER: 585-268-9230	OWNER FAX NUMBER: 585-268-9648	
OWNER ADDRESS: 7 Court St., Room 210	OWNER CITY: Belmont	STATE: NY	ZIP CODE: 14813
OWNER CONTACT: Dean Scholes	OWNER CONTACT EMAIL ADDRESS: scholed@alleganyco.com		
OPERATOR INFORMATION			
OPERATOR NAME: <input checked="" type="checkbox"/> same as owner	<input checked="" type="checkbox"/> public <input type="checkbox"/> private		
PREFERENCES			
Preferred address to receive correspondence: <input type="checkbox"/> Facility location address <input type="checkbox"/> Other (provide):		<input checked="" type="checkbox"/> Owner address	
Preferred email address: <input type="checkbox"/> Facility Contact <input type="checkbox"/> Other (provide):		<input checked="" type="checkbox"/> Owner Contact	
Preferred individual to receive correspondence: <input type="checkbox"/> Facility Contact <input type="checkbox"/> Other (provide):		<input checked="" type="checkbox"/> Owner Contact	

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:

100 % 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)
Textiles	0	0.223	0.126	0.303	0.24	0.35	0.55	0.36
Electronics	0	0	0	0	1.45	0	0	0
Total Tons Received		11.248	11.151	11.328	12.715	11.375	11.575	11.385
Material	August (tons)	September (tons)	October (tons)	November (tons)	December (tons)	Total Year (tons)	Daily Avg. (tons)	
Textiles	0.30	0.39	0.18	0.23	0.17	7.240	0.847	
Electronics	0	0	1.1	0	0	2.55	0.016	
Total Tons Received		11.325	11.415	12.305	11.255	142.124	0.917	

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 4 – RESIDUE

Total residue (tons) = 0 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:

$\frac{100}{100}$ % Road: Material(s): All Materials % Rail: Material(s): _____
 % Water: Material(s): _____ % Other (specify: _____): Material(s): _____

PAPER RECOVERED

RECOVERED MATERIAL	DESTINATION (Name & Address)	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>	Lebanon Seaboard 7869 RTE 98S, Arcade, NY 14009	NY	Wyoming County	GLOW Region Solid Waste Ma	25,259
Corrugated Cardboard	WestRock LLC 1967 Wehrle Dr. Suite 1, Williamsville, NY 14221	NY	Erie County	Northwest Communities Solid W	48,839
Junk Mail					
Magazines					
Newspaper					
Office Paper					
Paperboard / Boxboard					
Other Paper (specify)					
TOTAL PAPER RECOVERED (tons):					74,098

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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	Recycall Inc. 4832 PA-155, Port Allegany, PA 16743	Pennsylvania			19.846
Industrial Scrap Glass					
Other Glass (specify)					
TOTAL GLASS RECOVERED (tons):					19.846
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	Weitsman of Hornell, LLC 6334 Cty Rte 64, Hornell, 14843	NY	Steuben County	Steuben County	16.84
Enameled Appliances / White Goods					
Industrial Scrap Metal					
Tin & Aluminum Containers	Weitsman of Hornell, LLC 6334 Cty Rte 64, Hornell, 14843	NY	Steuben County	Steuben County	6.026
Other Metal (specify)					
TOTAL METAL RECOVERED (tons):					22.866

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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)	NH Kelman, 41 Euclid St, Cohoes, NY, 12047	NY	Albany County	Capital Region Solid Waste	8.554
	Trigon Plastics, Orland Road, New Holland, PA 17557	PA			6.97
PET (plastic #1)					
HDPE (plastic #2)					
Other Rigid Plastics (#3 - #7)					
Industrial Scrap Plastic					
Plastic Film & Bags					
Other Plastics (specify)					
TOTAL PLASTIC RECOVERED (tons):					15.524

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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 - 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			
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

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SECTION 5 – RECYCLABLES & RECOVERED MATERIALS (continued)

MIXED MATERIAL 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 <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 (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. Owens Road, Brockport, NY 14420	NY	Monroe County	Monroe County	2.55
Textiles	St. Pauly Textile 1067 Gateway Dr, Farmington, NY	NY	Orleans County	Orleans County	7.240
Other <i>(specify)</i>					
TOTAL MISCELLANEOUS MATERIAL RECOVERED (tons): 9.79					

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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: SWMAnnualreport@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.

Dean Scholes
Signature

2/2/22
Date

DEAN SCHOLES
Name (Print or Type)

DEPUTY SUPERINTENDENT
Title (Print or Type)

Scholes Scholed@alleganyco.com
Email (Print or Type)

7 Court Street, Room 210
Address

Belmont
City

NY, 14813
State and Zip

(585) 260-9231
Phone Number

ATTACHMENTS: YES NO