

## RECYCLABLES HANDLING & RECOVERY FACILITY ANNUAL REPORT

Conservation (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 January 01, 2021 to December 31, 2021 SECTION 1 – GENERAL INFORMATION

FACILITY INFORMATION							
FACILITY NAME:							
Five Points Trans	fer St	tation					
FACILITY LOCATION ADDRESS	:	FACILITY	CITY:		STATE:	ZIP CODE:	
6909 Toad Hollow	/ Rd	Little	Valley		NY	14755	
FACILITY TOWN:		FACILITY	COUNTY:	FACII	LITY PHO	NE NUMBER:	
Mansfield			augus County				
FACILITY NYS PLANNING UNIT: Cattaraugus County	(A list of NY	'S Planning Ur	its can be found at the end of	this repo	ort). NY:	SDEC GION #: 9	
360 PERMIT #: (Refer to DEC Permit)	DATE IS	SSUED:	DATE EXPIRES:	REGIS		VITY CODE OR I NUMBER:(Refer to	
FACILITY CONTACT:		• public	CONTACT PHONE	0	ONTACT	FAX NUMBER:	
Mark Shaw		☐ private	<b>NUMBER:</b> 716-938-2486	716-938-2753			
CONTACT EMAIL ADDRESS: me	schaw@	cattco.org					
			INFORMATION				
OWNER NAME: Cattaraugus County DPW			HONE NUMBER: 38-9121		-938-2		
OWNER ADDRESS: 8810 Route 242		OWNER CITY: Little Valley			STATE:	ZIP CODE: 14755	
OWNER CONTACT:			ONTACT EMAIL ADDRE	SS:			
Mark Shaw		mesh	aw@cattco.o	rg			
		OPERATOR	RINFORMATION				
OPERATOR NAME: Same	e as owner				□public □private		
			ERENCES				
Preferred address to receive corres  Other (provide):	pondence	e: 🏻 Facility l	ocation address	• 0	wner addres:	S	
Preferred email address:  Facili  Other (provide):	ty Contact		wner Contact				
Preferred individual to receive correl Other (provide):	spondend	e: 🗖 Facili	ty Contact	er Contact			
Did you operate in 2021?  Yes	; Complete	e this form.					
☐ No; to relinquish your permit/registration Solid Waste Management Facility or	n associat	ed with this	Sections 1 and 11. If yo solid waste management orm" located at: http://www	t activity	, also con	nplete the "Inactive	

#### **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 r	received and the percentages measured by each method:
00	

Material	Tip Fee (\$/Ton)	January (tons)	February (tons)	March (tons)	April (tons)	May (tons)	June (tons)	July (tons)
Commingled Containers (metal, glass, plastic)	0	0	.9415	1.3655	1.327	2.2765	2.358	2.646
Commingled Paper (all grades)	0	2.17	0	.95	2.22	2.39	1.05	1.96
Single Stream (total)								
Other (specify)								
Bulk Metal	0	3.0195	4.31	0	4.42	3.64	3.49	8.355
Electronics	0	1.232	0.272	0	0.4595	0	0.6365	0.824
Total Tons Recei	ived	6.4215	5.5235	2.3155	8.4265	8.3065	7.5345	13.785
Material	August (tons)	September (tons)	October (tons)	November (tons)	December (tons)		tal Year tons)	Daily Avg. (tons)
Commingled Containers (metal, glass, plastic)	2.451	1.484	.215	1.66415	1.023335	17.75198	5	.12
Commingled Paper (all grades)	1.27	0	1.07	1.95	0	15.03		.10
Single Stream (total)								
Other (specify)								
Bulk Metal	7.77	5.28	4.9445	4.91	0	50	).139	0.33
Electronics	0	0	0	0	1.3345	4.	7585	0.03
Total Tons Received	11.491	6.764	6.2295	8.52415	2.357835	87.67948	5	.58

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

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, list type of material(s) and percentages of total	material transported by each:		
100 _% Road: Material(s):	% Rail: Material(s):		
% Water: Material(s):	% Other (specify:	): Material(s):	

	SERVICE AREA OF	MATERIAL RE	CEIVED(where the	material is coming fro	om)	
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 ARE NYS PLANNIN UNIT (See Attached List NYS Planning Uni	TONS RECEIVE	
Commingled Containers (metal, glass, plastic)	Direct Haul	NY	Cattaraugus Coun	Cattaraugus County	<b>•</b>	17.751985
Commingled Paper (all grades)	Direct Haul	NY	Cattaraugus Coun	Cattaraugus County	✓	15.03
Single Stream (total)						
Other (specify)						
Bulk Metal	Direct Haul	NY	Cattaraugus Coun	Cattaraugus County	-	50.139
Electronics	Direct Haul	NY	Cattaraugus Coun	Cattaraugus County	~	4.7585
			TOTAL MATER	RIAL RECEIVED (1	tons	): <u>87.679485</u>

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### **SECTION 4 - RESIDUE**

Total residue (tons) = 0 Percent Residue Cald	Residue destination (Name & Ad culation: Total tons residue/Total tons material received  SECTION 5 – RECYCLABLE		— DED MATERIAL		
Desting Specify transport method 100 % Road: Materia	ination of recyclable materials. Indicate the name attion Planning Unit/Municipality and the amount od, list type of material(s) and percentages of total material(s):	e of the facility, of material reco	address, correspondered. DO NOT leach:	onding State/Country,	County/Province
	PAPER R	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)	Royal Oak Recycling, 22 Mechanic St, North Tonawanda, NY 14120 CE Consulting & Marketing, 555 S Cascade Drive Springville, NY 14141	NY NY		Not Affiliated - Buffalo (City  Not Affiliated - Buffalo (City	
Corrugated Cardboard	Salamanca Transfer Station, 289 Center St., Salamanca, NY 14779	NY			15.03
Junk Mail					
Magazines					
Newspaper					

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TOTAL PAPER RECOVERED (tons): 30.06

Office Paper

Paperboard/ Boxboard

Other Paper (specify)

# SECTION 5 - RECYCLABLES & RECOVERED MATERIALS (continued)

	GLASS RI	COVERED			
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	Salamanca Transfer Statio, 289 Center St. Salamanca, NY 14779	NY	Cattaraugus Coun	Cattaraugus County	5.3705
Industrial Scrap Glass					
Other Glass (specify)					
	METAL RE		TOTAL GLASS R	ECOVERED (tons): 5.3	705
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	Metalico, 286 High St., Bradford, PA 16701 Previty's, 11075 Galen Hill Rd, Freedom, NY 14065	PA NY	Cattaraugus Coun		24.3
Enameled Appliances / White Goods				- Canadagas Sounty	0
Industrial Scrap Metal					
Tin & Aluminum Containers	Metalico, 286 High St., Bradford, PA 16701  Ben Weitsman of Allegany, 34 Union St., Allegany, NY 14706	PA NY	Cattaraugus Coun	Cattaraugus County	0 2.939485
Other Metal (specify)	, , , , , , , , , , , , , , , , , , , ,		Sattaraugus Codii 1	Canal adgus County	2.838400
Bulk Metal	Ben Weitsman of Allegany, 34 Union St., Allegany, NY 14706	NY	Cattaraugus Coun	Cattaraugus County	25.839
			TOTAL METAL R	ECOVERED (tons): 53.	078485

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# SECTION 5 - RECYCLABLES & RECOVERED MATERIALS (continued)

	PLASTIC RI	ECOVERED			
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)	Salamanca Transfer Station, 289 Center St., Salamanca, NY 14779	NY	Cattaraugus Coun 💌	Cattaraugus County	7.327
PET (plastic #1)					
HDPE (plastic #2)					- ide
Other Rigid Plastics (#3 - #7)					
Industrial Scrap Plastic					
Plastic Film & Bags					
Other Plastics (specify)					
		T	OTAL PLASTIC R	ECOVERED (tons): 7.33	27

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### **VOLUME TO WEIGHT CONVERSION FACTORS**

MATERIAL	EQUIVALENT		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 - whole	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	
PAPER - high grade loose	1 cubic yard	0.18 tons	PLASTIC - PET - whole	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		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		4	
CORRUGATED - 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	AL 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)					
	MISCELLANEOUS MA			L RECOVERED (tons)	
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 Rd., Brockport, NY 14420	NY	Monroe County	Monroe County	1.504
LI GOLIOTII GS	E-Waste Plus 7318 Victor-Mendon Rd., Victor, NY 14564	NY	Ontario County		3.2545
Textiles	St. Pauly Textile, 1067 Gateway Dr., Farmington, NY 14425	NY	Ontario County	Ontario County	0
Other (specify)					
	Т	OTAL MISCELLA	NEOUS MATERIA	L RECOVERED (tons):	4.760C

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## **SECTION 6 – UNAUTHORIZED SOLID WASTE**

Has una ∐Yes	_	olid waste been received a	, ,	
_				ttach additional sheets if necessary):
	Date Receive	Type Received	Date Disposed	Disposal Method & Location
	SECTIO	ON 7 - COST ESTIMA	TES AND FINANC	CIAL ASSURANCE DOCUMENTS
Are the	re required o	cost estimates and financia	al assurance documer	nts for closure?
Yes		lf yes, attach additional sh Closure Plan?	neets reflecting annual	adjustments for inflation and any changes to the
		s	ECTION 8 – PRO	BLEMS
	ny problems procedures)?		eporting period (e.g., s	specific occurrences which have led to changes in
Yes		If yes, attach additional sh problem.	eets identifying each	problem and the methods for resolution of the
		s	SECTION 9 – CHA	NGES
Were th	ere any cha	nges from approved repo	rts, plans, specification	ns, and permit conditions?
Yes	■ No	If yes, attach additional sh	eets identifying chang	ges with a justification for each change.
		- 45		
	SECT	TION 10 - PERMIT/CO	ONSENT ORDER	REPORTING REQUIREMENTS
Are thei form?	re any additi	onal permit/consent order	reporting requiremen	ts not covered by the previous sections of this
∐Yes		If yes, attach additional sh responses.	neets identifying the re	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 property 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.

Mat Slaw Signature	2/17/2022 Date
Mark Shaw	Waste Mgmt. Coord.
Name (Print or Type)	Title (Print or Type)
meshaw@cattco.org	
Email (P	rint or Type)
8810 Route 242	Little Valley
Address	City
NY 14755	,716 ,938 <u>,</u> 2486
State and Zip	Phone Number

ATTACHMENTS: YES NO