

RECYCLABLES HANDLING & RECOVERY FACILITY ANNUAL REPORT

Department of Environmental (If you need assistance filling out this form please email swmfannualreport@dec.ny.gov or call 51 8-402-8678.)

Complete and submit this form by March 4, 2023 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:								
West County Transf	er Sta	ation						
FACILITY LOCATION ADDRESS	:	FACILITY	CITY:		STATE:	ZIP CODE:		
121 Osborne Stre	et	Sherr	nan		NY	14781		
FACILITY TOWN:		FACILITY	COUNTY:	FACI	LITY PHO	NE NUMBER:		
Sherman		Chau	tauqua	716	6-761	-6565		
FACILITY NYS PLANNING UNIT: Chautauqua County	(A list of NY	'S <u>Planning U</u> n	nits can be found at the end of	this rep		SDEC GION#: 9		
360 PERMIT #: (Refer to DEC	DATE IS	SSUED:	DATE EXPIRES:	NYS [DEC ACTIV	/ITY CODE OR		
Permit) 9-066600019/00003	1/25/	2018	1/24/2028	REGIS DEC R	STRATION egistration)	N NUMBER: (Refer to 07M59		
FACILITY CONTACT:		• public	CONTACT PHONE		CONTACT	FAX NUMBER:		
Tracy Pierce "TJ" Derivate NUMBER: 716-985-4981								
CONTACT EMAIL ADDRESS: pie	ercet@ch	qgov.com						
	1		INFORMATION					
OWNER NAME:			HONE NUMBER:		ER FAX N			
Chautauqua County		716-66	1-8422	716	-985-49	981		
OWNER ADDRESS:		OWNER CITY:			STATE:	ZIP CODE:		
3889 Towerville Road		Jamesto			NY	14701		
OWNER CONTACT:			ONTACT EMAIL ADDRE					
Pantelis K. Panteli		panteli	p@chqgov.com	1				
The second secon		OPERATO	RINFORMATION					
OPERATOR NAME:	e as owner				■ public □ private			
		PRE	FERENCES	101				
Preferred address to receive corres Other (provide):	spondence	9: 🗖 Facility l	ocation address		Owner addres	ss		
Preferred email address: Facili	ity Contact		wner Contact					
Preferred individual to receive corre Other (provide):	esponden	Ce: 🔳 Facil	ity Contact 🔲 Own	erConta	ct			
Did you operate in 2021? Yes	s; Comple	te this form.						
□ No.	; Complete	e and submit	t Sections 1 and 11. If yo	ou no lo	nger plan	to operate and wish		
to relinquish your permit/registration Solid Waste Management Facility of	n associa	ted with this	solid waste managemen	nt activi	ty, also co	mplete 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 o	uantities received and the perce	entages measured by each method:
epoon, me monte de la monte de la martina de		,

open, me member and a member and	,
92 % Scale Weight	8 % Estimated
% Truck Count	% Other (Specify:

Material	Tip Fee (\$/Ton)	January (tons)	February (tons)	March (tons)	April (tons)	May (tons)	June (tons)	July (tons)
Commingled Containers (metal, glass, plastic)	Glass	7.58	0.0	0.0	5.88	0.0	0.0	6.42
Commingled Paper (all grades)		2.25	1.36	1.49	0.0	0.98	1.48	1.57
Single Stream (total)	Tires	0.21	0.11	0.79	0.87	0.95	1.42	0.78
Other (specify) Tins		0.0	0.0	0.0	1.79	0.0	0.0	0.0
Scrap		1.46	0.0	3.62	3.01	7.13	0.0	7.77
Cardboard		6.43	5.84	7.89	6.09	6.27	7.62	6.29
Plastic		0.0	0.0	0.0	1.44	1.32	1.64	1.74
Total Tons Rece	ived	17.93	7.31	13.79	19.08	16.65	12.16	24.57
Material	August (tons)	September (tons)	October (tons)	November (tons)	December (tons)	Total Year (tons)		Daily Avg. (tons)
Commingled Containers (metal, glass, plastic)	0.0	0.0	0.0	7.39	0.0	27	.27	0.26
Commingled Paper (all grades)	1.34	2.51	1.41	0.0	1.63	17	.56	0.17
Single Stream	1.43	1.10	1.62	0.42	0.33	10	0.01	0.10
Other (specify) Tins	0.0	1.19	0.0	0.0	0.0	2.98		0.03
Scrap	2.58	5.35	2.87	4.80	2.48	41.05		0.39
Cardboard	6.22	7.81	5.82	6.20	8.09	80.57		0.77
Plastic	1.78	1.92	1.84	3.22	2.24	17.14		0.16
Total Tons Received	13.35	19.88	13.56	22.03	14.77	196.58		1.89

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:	
	% Rail: Material(s):	
% Water: Material(s):	% Other (specify:): Material(s):

	SERVICE AREA OF	MATERIAL RE	CEIVED (where the	material is coming from)	
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)	Glass - Direct Haul		Chautauqua County	Chautauqua County	27.27
Commingled Paper	Direct Haul		Chautauqua County	Chautauqua County	17.56
Single Stream	Direct Haul - Tires		Chautauqua County	Chautauqua County	10.01
Other (specify)					
Cardboard	Direct Haul		Chautauqua County	Chautauqua County	80.57
Plastic	Direct Haul		Chautauqua County	Chautauqua County	17.14
Tins	Direct Haul		Chautauqua County	Chautauqua County	2.98
Scrap	Direct Haul		Chautauqua County	Chautauqua County	41.05

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SECTION 4 - RESIDUE

Percent Residue Calculation: To	tal tons residue/Total tons material received x 100 =		
	SECTION 5 - RECYCLABLES & R	ECOVERED MATERIAL	S
Please identify destination of Destination Plan	recyclable materials. Indicate the name of the ning Unit/Municipality and the amount of mate	facility, <u>address,</u> corresperial recovered. DO NOT I	onding State/Country, County/Province, REPORT IN CUBIC YARDS!
Specify transport method, list type	of material(s) and percentages of total material trans	ported by each:	
100 % Road: Material(s):		% Rail: Material(s):	
% Water: Material(s):		% Other (specify:): Material(s):
in the second of			

The second of the second	PAPER 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)	South County Transfer Station, South Work St, Falconer, NY	NY	Chautauqua County	Chautauqua County	17.56				
Corrugated Cardboard	South County Transfer Station, South Work St, Falconer, NY	NY	Chautauqua County	Chautauqua County	80.57				
Junk Mail									
Magazines									
Newspaper									
Office Paper									
Paperboard/ Boxboard									
Other Paper (specify)									
			TOTAL PAP	ER RECOVERED (tons):	98.13				

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SECTION 5 - RECYCLABLES & RECOVERED MATERIALS (continued)

	GLASS RE	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	Chautauqua County Landfill, 3889 Towerville Rd, Jamestown,NY	NY	Chautauqua County	Chautauqua County	27.27
Industrial Scrap Glass					
Other Glass (specify)					
· Share the second section is the second	METAL RE		TOTAL GLASS R	ECOVERED (tons):	27.27
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	Ben Weitsman of Jamestown, 8th St, Jamestown, NY	NY	Chautauqua County	Chautauqua County	41.05
Industrial Scrap Metal					
Tin & Aluminum Containers	Ben Weitsman of Jamestown, 8th St, Jamestown, NY	NY	Chautauqua County	Chautauqua County	2.98
Other Metal (specify)					
			TOTAL BETTER	RECOVERED (tons):	44.03

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SECTION 5 - RECYCLABLES & RECOVERED MATERIALS (continued)

And a second second	PLASTIC I	RECOVERED	and the same of th		a managalangan da si sa san a Maria San San san
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)	South County Transfer Station, South Work St, Falconer, NY	NY	Chautauqua County	Chautauqua County	17.14
PET (plastic #1)					
HDPE (plastic #2)					
Other Rigid Plastics (#3 - #7)					
Industrial Scrap Plastic					
Plastic Film & Bags					
Other Plastics (specify)					
		T	 OTAL PLASTIC F	RECOVERED (tons):	17.14

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VOLUME TO WEIGHT CONVERSION FACTORS

MATERIAL	EQUIVA	LENT	MATERIAL	EQUIVALENT		MATERIAL	EQUIVALEN	
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 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 M	ATERIAL 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)					
	MISCELLANEC	TOTAL		AL 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	EWaste+, Mendon Rd, Victor, NY	NY	Ontario County	Ontario County	12.99
Textiles	Salvation Army, Erie, PA	PA	Erie County	Erie County	5.00
Other (specify)					
		TOTAL MISCELLA	NEOUS MATERIA	AL RECOVERED (tons):	17,99

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SECTION 6 – UNAUTHORIZED SOLID WASTE

Has unauthorized solid waste been received at the facility during the reporting period? If yes, give information below for each incident (attach additional sheets if necessary): Yes **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)? ■ No If yes, attach additional sheets identifying each problem and the methods for resolution of the Yes 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? No If yes, attach additional sheets identifying the reporting requirements with their respective Yes 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: 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.

T. Layleir o	March 2, 2021
Signature	Date
Tracy Pierce	Solid Waste Analyst
Name (Print or Type)	Title (Print or Type)
piercet@chqgov.com	
Email ((Print or Type)
3889 Towerville Road	Jamestown
Address	City
New York 14701	716,661_8424
State and Zip	Phone Number

ATTACHMENTS: U YES NO