

RECYCLABLES HANDLING & RECOVERY FACILITY ANNUAL REPORT

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:										
FACILITY LOCATION ADDRESS	:	FACILITY	CITY:		STATE:	ZIP CODE:				
FACILITY TOWN:		FACILITY	COUNTY:	FACII	LITY PHOI	NE NUMBER:				
FACILITY NYS PLANNING UNIT:	(A list of NY	S <u>Planning Un</u>	<u>its</u> can be found at the end o	f this repo		SDEC GION#:				
360 PERMIT #: (Refer to DEC Permit) DATE ISSUED: DATE EXPIRES: NYS DEC ACTIVITY CODE OR REGISTRATION NUMBER:(Refer to DEC Registration)										
FACILITY CONTACT:	11	□ public □ private	CONTACT PHONE NUMBER:	C	CONTACT	FAX NUMBER:				
CONTACT EMAIL ADDRESS:										
		OWNER	INFORMATION							
OWNER NAME:		OWNER P	OWNER FAX NUMBER:							
OWNER ADDRESS:		OWNER C			STATE:	ZIP CODE:				
OWNER CONTACT:		OWNERC	ONTACT EMAIL ADDR	ESS:						
		OPERATOR	RINFORMATION							
OPERATOR NAME: Sam	e as owner				□public □private					
			FERENCES							
Preferred address to receive correct Other (provide):	spondence	9: 🔲 Facility l	ocation address		Owner addres	es				
Preferred email address: ☐ Facil☐ Other (provide):			wner 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 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 .										
Solid vvaste ivialiagement Facility C	ACTIVITY I	NULLIICALIUII F	onn located at. nttp://ww	www.uec.i	ry.gov/criel	mcai/527 00.Html.				

SECTION 2 - MATERIAL RECEIVED

<u>Please provide the tonnages of materials received.</u> 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:

% Scale Weight	·		_% Estimated		•			
% Truck Count			_% Other (Spec	ify:)			
Material	Tip Fee (\$/Ton)	January (tons)	February (tons)	March (tons)	April (tons)	May (tons)	June (tons)	July (tons)
Commingled Containers (metal, glass, plastic)								
Commingled Paper (all grades)								
Single Stream (total)								
Other (specify)								
Total Tons Recei	ved							
Material	August (tons)	September (tons)	October (tons)	November (tons)	December (tons)		l Year ons)	Daily Avg. (tons)
Commingled Containers (metal, glass, plastic) Commingled Paper (all								
grades)								
Single Stream (total)								
Other (specify)								
Total Tons Received								

SECTION 3 - SERVICE AREA OF MATERIAL RECEIVED

<u>Please identify where the material is coming from.</u> 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 methor	od, list type of material(s) and perce	entages of total material tran	sported by eac	h:		
% Road: Materia	al(s):		% Rail:	Material(s):		
% Water: Mater	al(s):		% Othe	er (specify:): Material(s):	
		SERVICE AREA OF M	ATERIAL REC	EIVED(where the r	material is coming from)	
			SERVICE	SERVICE	SERVICE AREA	

	SERVICE AREA OF M	MATERIAL RE	CEIVED(where the I	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)					
Commingled Paper (all grades)					
Single Stream (total)					
Other (specify)					
			TOTAL MATER	RIAL RECEIVED (tons):

SECTION 4 – RESIDUE

lotal residue (tons) =	Residue destination (Name & Ad	dress)			
Percent Residue Calci	ulation: Total tons residue/Total tons material received	x 100 =			
	SECTION 5 - RECYCLABLE	S & RECOVER	ED MATERIAL	S	
Please identify destination	ination of recyclable materials. Indicate the name ation Planning Unit/Municipality and the amount	e of the facility, a of material reco	address, corresp vered. DO NOT I	onding State/Country, REPORT IN CUBIC YARI	County/Province, DS!
% Road: Material	od, list type of material(s) and percentages of total material(s): ll(s):	% Ra	each: ail: Material(s):		
% Water: Materia	al(s):	% Ot	her (specify:): Material(s):	
	PAPER R	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 Paper (all grades)					
Corrugated					
Cardboard					
Junk Mail					
Magazines					
magazineo					
Newspaper					
Office Paper					
Omee r aper					
Paperboard / Boxboard					
Other Paper (specify)					
			TOTAL PAPE	ER RECOVERED (tons):	

SECTION 5 - RECYCLABLES & RECOVERED MATERIALS (continued)

	GLA	SS 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					
Industrial Scrap Glass					
Other Glass (specify)					
			TOTAL GLASS R	ECOVERED (tons):	
	MET	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)
Aluminum Foil / Trays					
Bulk Metal					
Enameled Appliances / White Goods					
Industrial Scrap Metal					
Tin & Aluminum Containers					
Other Metal (specify)					
			TOTAL METAL D	ECOVERED (tons):	

SECTION 5 - RECYCLABLES & RECOVERED MATERIALS (continued)

	PLASTIC 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)					
Commingled Plastic (#1 - #7)										
PET (plastic #1)										
HDPE (plastic #2)										
Other Rigid Plastics (#3 - #7)										
Industrial Scrap Plastic										
Plastic Film & Bags										
Other Plastics (specify)										
	TOTAL PLASTIC RECOVERED (tons):									

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	EQUIV <i>A</i>	LENT	MATERIAL	EQUIVAL	_ENT	MATERIAL	EQUIV <i>A</i>	LENT
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			
CORRUGA TED - 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	L 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)					
		TOTAL	MIVED MATERIA	L RECOVERED (tons):	
	MISCELLANEOUS MA			L RECOVERED (tolls).	
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					
Textiles					
Other (specify)					
	т,	OTAL MISCELLA	NEOLIS MATERIA	AL RECOVERED (tons):	
		JIAL WIISCELLA	NEGUS IVIA I ERIA	L RECOVERED (LOIS).	

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

 ${\bf Email\,address: SWMF annual report@dec.ny.gov}$

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.

					_
	Signatur	е		Date	_
	Name (Print or	Type)		Title (Print or Type)	
		En	nail (Print or	Type)	_
	Address			City	_
				(
	State and	d Zip	- 	Phone Number	
ATTACHMENTS:	YES	NO			

			New York	k Destination NYS				Section 2 - Ma	aterial Receiv	red (tons); an	d Section 5 - I	Recyclables 8	& Recovered I	Materials (ton	ıs)*		
Commodity Type	Customer	Delivery Address	County	Planning Unit	January	February	March	April	May	June	July	August	September	October	November	December	Grand Total
GLASS	TOMRA New York Recycling, LLC- Farmington	5923 Loomis Road, Farmington, NY 14425			429	284	420	354	207	455	801	412	195	257	583	615	5,012
GLASS	Strategic Materials - Indianapolis	2550 W. Minnesota St Indianapolis, IN 46241			125	149	125	100	25			205	52	75			856
PET	Ultrepet	136C Fuller Rd Albany , NY 12205			164	143	205	205	184	287	228	246	232	228	180	204	2,506
PET	Clean Tech Inc.	500 Dunham St, Dundee, MI 48131			21	20	82	41	42	42	62	23	62	0	62	41	497
PET	Marglen	1748 Ward Mountain Rd, NE, Rome, GA 30161			42	20	83	21	41	41	21						270
PET	Unifi Manufacturing	2920 Vance Street Ext. Reidsville , NC 27320			43	41		83	40	20	82	103	105	84	83	60	742
ALUM	Constellium	4805 E. 2nd Street, Muscle Shoals, AL 35661			82	61	60	40	61	61	20	82	61	42	41	20	632
ALUM	Novelis Berea	302 Mayde Berea , KY 40403			163	83	222	222	136	204	265	186	246	228	207	224	2,386
ALUM	Novelis Oswego	448 County Route 1A Oswego, NY 13126				20			41	21							82
ALUM	Real Alloy Morgantown	805 Gardner Lane Rd, Morgantown, KY 42261					20			20		21					62
LDPE	New Age	900 North Stuart Street, Arlington, VA 22203							20								20
LDPE	Petoskey Plastics	1100 West Grant Street, Hartford City, IN 47248				19	18				21		20				79
LDPE	Transcontinental Packaging	11060 Boul. Pkway, Anjou, QB, H1J 1R6, Canada												19	22		40
Grand Total					1,068	842	1,236	1,066	798	1,151	1,500	1,276	973	932	1,177	1,164	13,183
		100% of volume moved by truck.															

Depot Name	State	Stop Primary Route County Desc	Can	Glass	PET
BICS	NY	CATTARAUGUS	2,927	2,647	4,551
BICS	NY	CHAUTAUQUA	643,516	1,775,927	1,417,791
BICS	NY	ERIE	4,657,386	14,875,400	6,099,824
BICS	NY	NIAGARA	1,224,642	3,044,596	1,483,119
BICS	NY	ORLEANS	2,954	2,004	2,943
BICS	NY	WYOMING	26,011	68,806	20,168
BICS	NY	Sub Total	6,557,437	19,769,379	9,028,395