

RECYCLABLES HANDLING & RECOVERY FACILITY ANNUAL REPORT

(If you need assistance filling out this form please small swmfannuaireport@dec.ny.gov or call 518-402-8678.)

Complete and submit this form by March 1, 2023.

This annual report is for the year of operation from January 01, 2022 to December 31, 2022 SECTION 1 – GENERAL INFORMATION

FACILITY INFORMATION							
FACILITY NAME:							
Royal Recycling S	Royal Recycling Services, Inc.						
FACILITY LOCATION ADDRESS	:	FACILITY	CITY:		STATE:	ZIP CODE:	
187-10 Jamaica A	ve	Jama	ica		NY	11423	
FACILITY TOWN:		FACILITY	COUNTY:	FACI	LITY PHO	NE NUMBER:	
New York City		Quee	ns	718	3-468-		
FACILITY NYS PLANNING UNIT: New York City	(A list of NY	S <u>Planning Ur</u>	nits can be found at the end of	this rep	ort). NY:	SDEC GION#:2	
360 PERMIT #: (Refer to DEC Permit) DATE ISSUED: DATE EXPIRES: NYS DEC ACTIVITY CODE REGISTRATION NUMBER DEC Registration) 41MA8					NUMBER:(Refer to		
FACILITY CONTACT:		□ public	CONTACT PHONE		CONTACT	FAX NUMBER:	
Michael Reali II		• private	1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		N/A		
CONTACT EMAIL ADDRESS: Mi	keR@roy	/alwaste.c	om				
			INFORMATION				
owner name: Royal Recycling Se	rvices		PHONE NUMBER: 68-8679	N/A	IER FAX N	UMBER:	
OWNER ADDRESS:		OWNER CITY:		1	STATE:	ZIP CODE:	
187-10 Jamaica Ave		Jamaica			NY	11423	
OWNER CONTACT:		OWNER C	ONTACT EMAIL ADDR	ESS:			
Michael Reali II		MikeF	R@royalwast	e.co	om		
		OPERATO	RINFORMATION				
OPERATOR NAME: Same	e as owner				□public • private		
		PRE	FERENCES		Pilvate	100000000000000000000000000000000000000	
Preferred address to receive correspondence: Facility location address Other (provide):							
Preferred email address: Facility Contact							
Preferred individual to receive correction Other (provide):	espondend	ce: 🗆 Facil	ity Contact 🗖 Own	ner Conta	ict		

Did you operate in 2022? 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;

	Tip Fee	January	_% Other (Spec	March	April	May	June	July
Material	(\$/Ton)	(tons)	(tons)	(tons)	(tons)	(tons)	(tons)	(tons)
Commingled Containers (metal, glass, plastic)								
Commingled Paper (all grades)								
Single Stream (total)	N/A	4244.37	4538.3	4802.56	5326.52	4623.14	4613.23	3644.14
Other (specify)								
			_					
Total Tons Race	ived	4244.37	4538.3	4802.56	5326.52	4623.14	4613.23	3644.14
Material	August (tons)	September (tons)	October (tons)	November (tons)	December (tons)		tal Year tons)	Daily Avg. (tons)
Commingled Containers (metal, glass, plastic)								
Commingled Paper (all grades)								
Single Stream (total)	4841.41	4837.99	4538.93	4979.74	4614.52	55604.85		152.34
Other (specify)			-					

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, 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.

	hod, list type of material(s) and percentages of total material to	ansported by ea	ich:					
100 % Road: Mater	ial(s):	% Rali: Material(s):						
% Water: Mate	rial(s):): Material(s):				
	SERVICE AREA OF	MATERIAL RE	CEIVED(where th	e material is coming from	n)			
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)								
	Direct Haul	NY	Queens County	New York City	27802.43			
Single Stream (total)	Direct Haul	NY _	New York County	New York City	13901.21			
	Direct Haul	NY	Kings County	New York City	8340.73			
Other (specify)	Direct Haul	NY	Bronx County	New York City	5560.48			
4			1	1				

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

TOTAL MATERIAL RECEIVED (tons): 55604.85

SECTION 4 - RESIDUE

Total residue (tons) = 8071	Residue destination (Name & Address) (Covanta Energy, Garden City, NY		
Percent Residue Calculation: To	tal tons residue/Total tons material received x 100 = 15%	*	_

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!

% Road: Material		% Rail: Material(s):					
% Water, Maleria	l(s):	% Ot	her (specify:): Material(s):			
	PAPE	R RECOVERED					
RECOVERED MATERIAL	DESTINATION (Name & Address)	DESTINATION STATE OR COUNTRY	COUNTY OR PROVINCE	DESTINATION MYS PLANNING UNIT (See Attached List of NYS Planning Units)	RECOVERED (out of facility)		
Commingled Paper (all grades)							
Corrugated Cardboard	Various Overseas & Domestic Mills	N/A	N/A	N/A <u> </u>	40629		
Junk Mail							
Magazines							
Newspaper							
Office Paper							
Paperboard/ Boxboard							
Other Paper (specify)	Various Overseas & Domestic Mills SOP, SWL, Mix Paper & #9 News	N/A			6439		
			TOTAL FAP	R RECOVERED (tons):	47068		

If the material type is not listed, use one of the "Other" lines and fill in the same 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 5 - RECYCLABLES & RECOVERED MATERIALS (continued)

	<u> </u>	LASS 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):	
	M	ETAL RECOVERED	3	2.10	
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	Various Domestic Mills	N/A	N/A	N/A	286
Tin & Aluminum Containers					
Other Metal (specify)					

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 5 - RECYCLABLES & RECOVERED MATERIALS (continued)

	PL	ASTIC 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)					
PET (plastic #1)					
HDPE (plastic #2)					
Other Rigid Plastics					
Industrial Scrap Plastic					
Plastic Film & Bags	Various Domestic & Overseas Mills	N/A	N/A 🔽	N/A	148
Other Plastics (specify)					
		T	OTAL PLASTIC R	RECOVERED (tons): 14	8

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 EQUIVALEN		QUIVALENT 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 - 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	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 - 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	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 (metal, glass, plastic)					
Commingled Paper & Containers					
Single Stream					
Other (specify)					
	MISCELLANE	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					
Textiles					
Other (specify)					
		TOTAL MISCELLA	NEOUS MATERIA	AL 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.

SECTION 6 - UNAUTHORIZED SOLID WASTE

Has unad ∐Yes	_	olid waste been received at yes, give information below		porting period? In additional sheets if necessary):			
	ate Receive	ed Type Received	Date Disposed	Disposal Method & Location			
	SECTIO	ON 7 - COST ESTIMA	TES AND FINANCIA	L ASSURANCE DOCUMENTS			
Are ther	e required o	cost estimates and financia	i) assurance documents f	or closure?			
Yes		If yes, attach additional sho Closure Plan?	eets reflecting annual adj	ustments for inflation and any changes to the			
_							
			ECTION 8 - PROBLE				
	y problems rocedures):		porting period (e.g., spec	ific occurrences which have led to changes in			
∐Yes 		If yes, attach additional sho problem.	eets identifying each prob	olem and the methods for resolution of the			
		s	ECTION 9 – CHANG	BES			
Were the	ere any cha	nges from approved report	ts, plans, specifications, a	and permit conditions?			
Yes	■No	if yes, attach additional she	eets identifying changes	with a justification for each change.			
	SEC1	TION 10 - PERMIT/CO	NSENT ORDER RE	PORTING REQUIREMENTS			
Are there	e any additi	onal permit/consent order	reporting requirements n	ot covered by the previous sections of this			
Yes	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:

ATTACHMENTS: Tyes I NO

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 Law a	and section 210.45 of the Penal Lav
Auullarke Signature	3/1/2023 Date
Janice Clarke	Director Commodity Sales
Name (Print or Type)	Title (Print or Type)
Janice@royalwaste.com	
Email (Pri	int or Type)
187-10 Jamaica Ave	Jamaica
Address	City
NY 11423	,718 <u>,</u> 468 <u>.</u> 8679
State and Zip	Phone Number

This page for reference only. Please do not return with submittal.

Division of Materials Management New York State Department of Environmental Conservation Albany, New York 12233-7260

RECYCLABLES HANDLING & RECOVERY FACILITY

A Recyclable Handling and Recovery Facility is a facility that receives source-separated recyclables. Further information and a listing of the recyclable handling and recovery facilities are available online at http://www.dec.ny.gov/chemical/50793.html.

If your facility is authorized to operate a construction and demolition debris handling and recovery facility you need to submit a Construction and Demolition Debris Handling and Recovery Facility Annual Report.

If your facility is authorized to operate as a transfer facility you need to submit a Transfer Facility Annual. If your facility is authorized to operate as a recyclables handling & recovery facility and a transfer facility you must submit both annual reports.

Forms for all solid waste management facilities can be found at http://www.dec.ny.gov/chemical/52706.html and a brief description of each type of facility can be found at http://www.dec.ny.gov/chemical/8495.html.

Annual Report

Submit the Annual Report no later than March 1, 2023.

Reporting of the information indicated on this Recyclables Handling and Recovery Facility Annual Report form is required pursuant to 6 NYCRR Part 360. Failure to provide the required information requested is a violation of Environmental Conservation Law. Timely submission of a properly completed form to the Department's Regional Office that has jurisdiction over your facility and to the Department's Central Office is required to meet the Annual/Quarterly Report requirements of 6 NYCRR Part 360.

Where the Annual Report requirements have been modified, appropriate Sections (as necessary to reflect the modification) must be completed and submitted with a copy of the Department's written notification which allows the modification.

Entries on the report forms should be either typewritten or neatly printed in black ink. Attach additional sheets if space on the pages is insufficient or supplementary information is required or appropriate.

SECTION 3 – SERVICE AREA OF MATERIAL RECEIVED

Identify the facility's service area by indicating the type and amount of material received, the Solid Waste Management facility (SWMF) from which it was received by your facility (or Direct Haul), the corresponding State/Country, the County/Province, and the NYS Planning Unit from which waste was received. Refer to the list of NYS Planning Units that can be found at the end of this report. The Total Tons Received reported below should equal the Total Tons Received in Section 2. DO NOT REPORT IN CUBIC YARDS!

Additional Service Area Guidance:

- 1) <u>Diract hauled from the generator of the recyclables</u>. In the case where the recyclables are hauled to your recycling facility from the generator (i.e., hauled from residences, commercial establishments, etc.), "<u>Direct Haul</u>" would be the appropriate response in Column 2 under "Service Area". Please report the tonnage by material type and identify the state, county and planning unit where it was generated; or
- 2) <u>Sent to your recycling facility from another solid waste management facility</u>. Recyclables may be sent to your recycling facility from another solid waste management facility. In this case, please report the tonnage by material type from each sending solid waste management facility, as well as the sending facility's name, address, county, and the planning unit where the sending facility is located.