



Department of
Environmental
Conservation

RECYCLABLES HANDLING & RECOVERY FACILITY ANNUAL REPORT

(If you need assistance filling out this form please email symfannualreport@dec.ny.gov or call 518-402-8878.)

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: CNY RESOURCE RECOVERY INC			
FACILITY LOCATION ADDRESS: 5879 FIRESTONE DR.	FACILITY CITY: SYRACUSE	STATE: NY	ZIP CODE: 13206
FACILITY TOWN: DEWITT	FACILITY COUNTY: ONONDAGA	FACILITY PHONE NUMBER: 315-471-0254	
FACILITY NYS PLANNING UNIT: (A list of NY Planning Units can be found at the end of this report)			NYSDEC REGION #: 7
360 PERMIT #: (Refer to DEC Permit)	DATE ISSUED:	DATE EXPIRES:	NYS DEC ACTIVITY CODE OR REGISTRATION NUMBER: (Refer to DEC Registration) 34R20016
FACILITY CONTACT: Russell Gower	<input type="checkbox"/> public <input checked="" type="checkbox"/> private	CONTACT PHONE NUMBER: 315-471-0254	CONTACT FAX NUMBER: 315-471-0218
CONTACT EMAIL ADDRESS:			
OWNER INFORMATION			
OWNER NAME: Russell Gower	OWNER PHONE NUMBER: 315-471-0254	OWNER FAX NUMBER: 315-471-0218	
OWNER ADDRESS: 5879 FIRESTONE DR.	OWNER CITY: SYRACUSE	STATE: NY	ZIP CODE: 13206
OWNER CONTACT:	OWNER CONTACT EMAIL ADDRESS: CNYResourceRecovery@yahoo.com		
OPERATOR INFORMATION			
OPERATOR NAME:	<input checked="" type="checkbox"/> same as owner	<input type="checkbox"/> public <input checked="" type="checkbox"/> private	
PREFERENCES			
Preferred address to receive correspondence: <input checked="" type="checkbox"/> Facility location address <input type="checkbox"/> Owner address <input type="checkbox"/> Other (provide):			
Preferred email address: <input checked="" type="checkbox"/> Facility Contact <input type="checkbox"/> Owner Contact <input type="checkbox"/> Other (provide):			
Preferred individual to receive correspondence: <input checked="" type="checkbox"/> Facility Contact <input type="checkbox"/> Owner Contact <input type="checkbox"/> Other (provide):			

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/52703.html>

This page n/a - Please see next page for material breakdown

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:

% Scale Weight
 % Truck Count

 % Estimated
 % Other (Specify: N/A)

Material	Tip Fee (\$/ton)	January (tons)	February (tons)	March (tons)	April (tons)	May (tons)	June (tons)	July (tons)
Commingled Containers (metal, glass, plastic)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Commingled Paper (all grades)								
Single Stream (total)								
Other (specify)								
Total Tons Received								
Material	August (tons)	September (tons)	October (tons)	November (tons)	December (tons)	Total Year (tons)	Daily Avg. (tons)	
Commingled Containers (metal, glass, plastic)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
Commingled Paper (all grades)								
Single Stream (total)								
Other (specify)								
Total Tons Received								

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.

Additional Information for CNY Resource Recovery
 DEC REG# 34R20016

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.

% Scale Weight _____
 % Truck Count _____
 % Estimated _____
 % Other (Specify: _____)

Material	Tip Fee (\$/Ton)	January (tons)	February (tons)	March (tons)	April (tons)	May (tons)	June (tons)	July (tons)
		September (tons)	October (tons)	November (tons)	December (tons)	Total Year (tons)	Daily Avg. (tons)	
Paper-Print Waste	N/A	43.34	20.07	64.86	41.98	22.88	61.91	61.76
CARD BOARD		95.30	78.51	118.65	47.48	101.90	76.26	63.61
PLASTIC		NO LONGER						
BATTERIES/LEAD		19.85	18.85	22.27	19.84	20.57	0	44.32
STEEL		9.23	11.77	12.95	15.74	13.95	12.99	13.84
STAINLESS STEEL		0	0	33.92	17.59	0	15.53	20.87
MIXED NON-FERROUS		44.52	61.09	57.93	91.98	41.93	42.86	56.76
Total Tons Received		212.14	190.29	310.58	234.81	209.23	209.55	261.16
Material	August (tons)	September (tons)	October (tons)	November (tons)	December (tons)	Total Year (tons)	Daily Avg. (tons)	
Paper-Print Waste	64.56	42.12	73.72	22.52	63.74	583.16	1.87	
CARD BOARD	99.80	66.36	77.41	67.46	19.17	911.91	2.92	
PLASTIC		NO LONGER						
BATTERIES/LEAD	21.26	21.62	62.73	43.20	0	294.51	1.98	
STEEL	25.02	6.83	0	2.66	20.64	145.82	1.77	
STAINLESS STEEL	0	18.61	0	18.06	0	124.58	.4	
MIXED NON-FERROUS	51.92	38.46	64.92	48.15	27.94	636.36	2.04	
Total Tons Received	262.56	194	278.78	202.05	131.19	2696.34	8.64	

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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:

N/A % Road: Material(s): N/A N/A % Rail: Material(s): N/A
 N/A % Water: Material(s): N/A N/A % Other (specify: _____): Material(s): _____

SERVICE AREA OF MATERIAL RECEIVED					
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 <small>(See Attached List of NYS Planning Units)</small>	TONS RECEIVED
Commingled Containers <small>(metal, glass, plastic)</small>	N/A	N/A	N/A	N/A	N/A
Commingled Paper <small>(all grades)</small>					
Single Stream <small>(total)</small>					
Other (specify)					
TOTAL MATERIAL RECEIVED (tons):					

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SECTION 4 - RESIDUE

Total residue (tons) = _____ 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:

100 % Road: Material(s): _____ % Rail: Material(s): _____
 _____ % Water: Material(s): _____ % Other (specify: _____): Material(s): _____

PAPER RECOVERED					
RECOVERED MATERIAL	DESTINATION <small>(Name & Address)</small>	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>	N/A				
Corrugated Cardboard	West Rock, Solway	NY	Dorchester		911.91
Junk Mail	N/A				
Magazines	N/A				
Newspaper	N/A				
Office Paper	N/A				
Paperboard/ Boxboard	N/A				
Other Paper (specify)	Southernview, Putney	VT	}	Combined	583.16
Print Waste	CASCADES	CANADA			
TOTAL PAPER RECOVERED (tons)					

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SECTION 5 - RECYCLABLES & RECOVERED MATERIALS (continued)

GLASS RECOVERED					
RECOVERED MATERIAL	DESTINATION <small>(Name & Address)</small>	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>
Container Glass	N/A ↓		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Industrial Scrap Glass			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Other Glass (specify)			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
TOTAL GLASS RECOVERED (tons)					
METAL RECOVERED					
RECOVERED MATERIAL	DESTINATION <small>(Name & Address)</small>	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>
Aluminum Foil / Trays			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Bulk Metal			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Enameled Appliances / White Goods	Metallco - Syracuse	NY	Greene Co	<input checked="" type="checkbox"/>	145.82
	Steel / Elec. Motors			<input checked="" type="checkbox"/>	
MIXED Non Ferrous Industrial Scrap Metal	Salomon's Metals - Lynn	MA		<input checked="" type="checkbox"/>	506.37
Alum / Copper / BRASS	Chase BRASS - Montpelier	VT		<input checked="" type="checkbox"/>	147.81
Tin & Aluminum Containers	Creekwood Metal - Tanna	CANADA		<input checked="" type="checkbox"/>	214.16
	acid batteries RSR - Middletown	NY		<input checked="" type="checkbox"/>	19.85
Other Metal (specify)				<input checked="" type="checkbox"/>	
Stainless Steel	Dominion Nickel	Canada		<input checked="" type="checkbox"/>	124.58
	Barlington			<input checked="" type="checkbox"/>	
TOTAL METAL RECOVERED (tons)					1158.97

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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 518-402-8041
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.

Russell W. Gowat 1/30/2023
Signature Date

Russell W. Gowat President
Name (Print or Type) Title (Print or Type)

anyresourcecovery@yahoo.com
Email (Print or Type)

5879 FIRESTONE DR. Syracuse
Address / City

NY 13206 (315) 471-0154
State and Zip Phone Number

ATTACHMENTS: YES NO

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)	N/A		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
			<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
PET (plastic #1)			<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
			<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
HDPE (plastic #2)			<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
			<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
Other Rigid Plastics (#3 - #7)			<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
			<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
Industrial Scrap Plastic			<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
			<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
Plastic Film & Bags			<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
			<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
Other Plastics (specify)			<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
			<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
TOTAL PLASTIC RECOVERED (tons):					

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VOLUME TO WEIGHT CONVERSION FACTORS

MATERIAL	EQUIVALENT		MATERIAL	EQUIVALENT		MATERIAL	EQUIVALENT	
GLASS - whole 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	0.125 tons
PAPER - high grade loose	1 cubic yard	0.15 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 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	0.05 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)	N/A		☐	☐	
			☐	☐	
			☐	☐	
Commingled Paper & Containers			☐	☐	
			☐	☐	
			☐	☐	
Single Stream (total)			☐	☐	
			☐	☐	
			☐	☐	
Other (specify)			☐	☐	
			☐	☐	
			☐	☐	
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	N/A		☐	☐	
			☐	☐	
Textiles			☐	☐	
			☐	☐	
Other (specify)			☐	☐	
			☐	☐	
TOTAL MISCELLANEOUS MATERIAL RECOVERED (tons):					

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