MANDATORY ANNUAL REPORT INCLUDING SELF-CERTIFICATION FOR VEHICLE DISMANTLING FACILITIES

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

Submit the Annual Report no later than March 1, 2018.

This annual report is for the year of operation from January 01, 2017 to December 31, 2017

SECTION 1 - FACILITY INFORMATION

FACILITY INFORMATION						
FACILITY NAME:						
FACILITY LOCATION ADDRESS: FACILITY CITY: STATE: ZIP CODE:						
FACILITY LOCATION ADDRESS:	FACILITY CITY:	STATE: ZIP CODE:				
100 Warburton Auc.	Yonlars	NY 10701				
FACILITY TOWN:	FACILITY COUNTY:	FACILITY PHONE NUMBER:				
	WESTCHESTER	914-969-9980				
FACILITY NYS PLANNING UNIT: (A list of NYS	<u>Planning Units</u> can be found at the end of th	NYSDEC REGION #:				
NYS DEPARTMENT OF MOTOR VEHICLE REGISTRATION NUMBER: 2601784	REGISTRATION TYPE (Vehic Dismantler, Mobile Crusher, Control of the Control of th					
DANNY NAPOletano	□ public CONTACT PHONE □ private NUMBER: 9/4-290-1263	CONTACT FAX NUMBER:				
	YTOWE aol.com					
	OWNER INFORMATION					
OWNER NAME:	OWNER PHONE NUMBER:	OWNER FAX NUMBER:				
Daniel Napoletano	914-290-1263					
owner address: 100 Warburton Avr.	owner city: You lurs	STATE: ZIP CODE:				
OWNER CONTACT:	OWNÉR CONTACT EMAIL ADDRE	SS:				
	DDANNYTOWEGOL.	om				
	OPERATOR INFORMATION					
OPERATOR NAME: Same as owner		□ public □ private				
PREFERENCES						
Preferred address to receive correspondence: Facility location address						
Preferred email address:						
Preferred individual to receive correspondence:						
Did you operate in 2017? Yes; Complete this form.						

	SECTION 2 - END-OF-LIFE, VEHICLES (ELVS)	PROCESSED
• Prov	ride the number of ELVs received from January 1 to December 31:	7
	ride the number of ELVs crushed and/or removed from the facility January 1 to December 31:	7_
• Prov	ide the number of ELVs stored at the facility as of December 31:	12
	ide the highest number of ELVs stored at the facility by one time from January 1 to December 31:	12
• Prov	ide the approximate area used for the storage of vehicles (acres):	lacres
	ide the names of scrap metal processors to which you sold or sent of the sent	
3)		
	If your facility has received 25 or fewer ELVs during the year of the second	AND stored no more than ons 3, 4, and 11.
	→ Please, write "Not Applicable" on sections that do not pert	ain to your facility.
	If your facility has not processed or stored ANY ELVs during complete only section 9. If not, leave this box blank	g the year, check this box and
	→ Please, write "Not Applicable" on sections that do not pert	ain to your facility.
	IF NEITHER OF THESE DESCRIPTIONS APPLIES TO YOUR FACOMPLETE THE ENTIRE FORM BELOW:	ACILITY,
	•	

SECTION 3 - WASTE FLUIDS RECOVERED

Complete this table by reporting <u>volumes</u> of End-of-Life Vehicle (ELV) waste fluids managed at the facility during the reporting period. <u>Qualitative responses (i.e. \sqrt{s} or X's) are not acceptable</u>. Report only fluids generated from dismantling operations (not general car repair, etc.)

Name & Address	Destination Name		, 			
rt 364 transporter	(Indicate permitted permilled Part 364 accepting waste flu	Disposed off-site*	Sold/ Recycled off-site	Stored on-site at year-end	Used on-site (oil heater, etc.)	Waste Fluid Recovered
						Refrigerant (pounds)
						Used Oil** (gallons)
						Diesel Fuel (gallons)
			-			Gasoline (gallons)
		0	13	5	13	Engine Coolant/ Antifreeze (gallons)
						Window Washing Fluid (gallons)
						Other (specify)
						Other (specify)

Any fluids disposed must undergo a hazardous waste determination and proper handling, storage and disposal if hazardous.

^{**} Includes Engine Oil, Transmission Fluid, Axle Fluids, Hydraulic Fluid, Power Steering Fluid, Brake Fluid, etc.

SECTION 4 – SCRAP METAL

Complete this table by reporting the amount of metal received, stored and sent off site, by the facility, during the reporting period.

		T						
Material Types	Received	Stored On Site				Destination		
	(tons)	(tons)	(tons)	NYS <u>Planning Unit</u> (or state if other than New York)	To Scrap Metal Processor			
Ferrous Scrap					Yes	No		
Metal					口			
Aluminum					Yes	No		
Scrap Metal								
Lead Weights					Yes	No		
Lead Weights								
Non – Ferrous					Yes	No		
Scrap Metal								
Other (specify):					Yes	No		
					Yes	No		
						I		
	SEC	ΓΙΟΝ 5 – MERC	CURY SWITC	HES COLLECTED				

Provide the number of mercury-containing devices <u>recovered</u> . (H&TS) and antilock brake assemblies (ABS).	Including but not limited to hood & trunk lighting switches
H&TS (Number)	ABS(Number)
Indicate permitted facility or permitted transporter accepting me	ercury containing devices:

Note: Use additional 8.5" x 11" sheets as needed.

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SECTION 6 - LEAD-ACID BATTERIES COLLECTED

Provide the number of lead-acid batteries <u>recovered</u> and their disposition.						
Number of Lead-Acid Batteries collected from ELVs						
Indicate permitted facility or permitted transporter accepting lead-acid batteries: A 1 Fa Recycling - 1644 E 233 rd St. Brong, NY						
Any materials disposed must undergo a hazardous waste determination and proper handling, storage and disposal if hazardous.						
SECTION 7 – WASTE TIRES COLLECTED						
Number of waste tires stored on-site: as of December 31						
Number of used tires available for sale on-site:						
Number of used tires sold:						
Number of waste tires shipped off-site for recycling, disposal, other: during operating year						
Indicate name of facility(ies) accepting waste tires:						
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 – COMPLIANCE CERTIFICATION

As of December 31, 2017:

Waste Management Compliance Checklist	NA	Yes	No	Date of Return to
 If your facility stores LESS THAN 1,000 tires, check NA. If your facility stores MORE THAN 1,000 tires, do you have a PART 360 permit for tire storage? 		V		
Is a system in place to control vegetation and prevent it from encroaching onto fire access lanes or driveways?		~		
3. Have you recorded the date of receipt for all end-of-life vehicles received?		~		
4. Are the end-of-life vehicle records available on-site?		1		
5. Have all end-of-life vehicles been inspected, upon arrival, for leaking fluids and unauthorized wastes?		/		
6. Have all observed leaks been remedied or contained?		L		
7. Does your facility have a written Contingency Plan?		/		
8. Are facility personnel trained to implement the Contingency Plan?		V		
9. Does your Contingency Plan include actions to be taken in the event of the follow	ing?			
9a. Fire.		~		
9b. Spill or release of vehicle waste fluids.		v		
9c. Unauthorized material received at facility.		~		
10. Are spills of waste fluids, if any occur, reported to the NYSDEC Spills Hotline within two hours of detection?		V		
11. Are all vehicle residues prevented from migrating from or running off your property?		~		
12. Is dust controlled to prevent interference with facility operations or from leaving facility site?		V		
13. Are vectors (mosquitoes, rats, mice, etc.) controlled to prevent interference with facility operations?		V		
14. Are waste fluids kept from being discharged onto the ground or into surface waters?		V		
15. Is access to your facility controlled by: fences, gates, sign and/or natural barriers (not vehicles)?		V		
15a. Are the access controls working (i.e. controlling access)?		V		
16. Are fluids drained from end-of-life vehicles on a pad constructed of concrete or equivalent material?		V		
17. Are you doing the following with your concrete (or equivalent surface) pad that is draining, crushing, etc.?	used fo	r vehicl	e dism	antling, fluid
17a. Cleaning daily.		1		
17b. Cleaning spills as they occur.		~		
17c. Collecting and properly disposing of absorbent materials.		V		

	Waste Management Compliance Checklist	NA	Yes	No	Date of Return to
18.	Have the following wastes been drained, removed, deployed, collected and/or storpractices, prior to vehicle crushing or shredding?	ed follo	wing be	est mar	nagement
	18a. Fluids (including engine oil, transmission fluid, transaxle fluid, front and rear axle fluid, brake fluid, power steering fluid, coolant, and fuel).	~		-	
	18b. Lead acid batteries.		/		
	18c. Mercury switches or other mercury containing devices, if any.	v			
	18d. Refrigerants, if any.	V			
	18e. Air bags.	V			
	18f. PCB capacitors, if any.	V			
19.	Are fluids stored separately & in containers that are compatible with their contents?	V			
20.	Are fluids stored in closed containers?		~		
21.	Are containers which contain waste fluids in good condition and not visibly leaking?		~		
22.	Are containers clearly and legibly labeled to describe their contents?		1/		
23.	Are containers stored on a bermed pad constructed of concrete or equivalent material?		V		
24.	Are lead-acid batteries stored upright and off the ground?		V		
25.	Are lead-acid batteries covered to protect them from precipitation?		V		
26.	Are all lead-acid batteries sent for recycling within one-year of receipt?	-	V		
27.	Are <u>leaking</u> lead-acid batteries, if any are encountered, stored in leak-proof containers separated from intact batteries?		-		
	27a. Are provisions in place to absorb any acid leakage?		~		
28.	Are mercury switches and other mercury containing devices stored in appropriate, labeled containers and then sent for recycling?	V			
29.	Are PCB capacitors, if any are encountered, removed and stored in appropriate, labeled containers for recycling or disposal?	1			
30.	Is used oil stored in accordance with local building codes, local fire codes, and the NYS Uniform Fire Prevention & Building Code?		0		
31.	If sent off-site, is used oil transported via a permitted hauler?		1	<u></u>	
32.	If you do not burn used oil onsite check NA for 32a., 32b., 32c. If you do, then ans	wer 32	a., 32b.	, 32c:	
	32a. Is used oil burned in a used oil space heating unit, with a maximum capacity of 0.5 million BTU's per hour or less?	1			
	32b. Do on-site space heaters burn only used oil that is generated on-site or received from household do-it-yourself generators?	V			
	32c. Are combustion gases from used oil space heaters vented to the outside ambient air?	/			

				Date of Return	
Waste Management Compliance Checklist	NA	Yes	No	Compliance	
33. Is waste oil kept from being mixed with brake cleaner, carb cleaner, antifreeze, solvents, gasoline, or degreasers?		V			
34. Are sludges from sumps and oil/water separators stored in covered, closed and labeled containers?	V				
35. Are sludges properly recycled or disposed?	V				
36. Are used oil filters properly drained, crushed or dismantled?		V			
37. Are drained oil filters properly recycled or disposed?		V			
38. If your facility does not require an SPDES Multi-Sector General Permit (MSGP) for Stormwater Discharge, check NA for 38a, 38b, 38c. If your facility requires an SPDES MSGP answer 38a, 38b, 38c:	/				
38a. If required by the SPDES MSGP, has a Stormwater Pollution Prevention Plan been prepared for this facility?	V				
38b. Is the information provided in the facility's original Notice of Intent or Termination submission for the SPDES MSGP still accurate and up to date?	~				
38c. Has the facility's Annual Certification Report for the SPDES MSGP been submitted within the previous year?	V				
39. If your facility does not handles cleaning solvents, degreasers, battery acids or non-vehicle wastes write NA. If these materials are handled at your facility, what is the maximum amount of this material that your facility generates in any calendar		pounds			
month?		_		gallons	
Do you have any other Environmental Conservation Law or regulatory violations? (Attach additional sheets as necessary.)					
COMMENTS? (Attach additional sheets if necessary)					

SECTION 11 - SIGNATURE AND DATE BY OWNER, OPERATOR, OR RESPONSIBLE REPRESENTATIVE

Owner or Operator must sign, date and submit the completed form by email or mail to the appropriate Regional Office (See attachment for Regional Office email & mailing addresses and Solid Waste Contacts.)

The Owner, Operator, or Responsible Representative must also submit one copy by email, fax or mail to:

New York State Department of Environmental Conservation
Division of Materials Management
Bureau of Permitting and Planning
625 Broadway
Albany, New York 12233-7260
Fax 518-402-9041

Email address: SWMFannualreport@dec.ny.gov

I hereby affirm under penalty of perjury that information provided on this form and attached statements and exhibits was prepared by me or under my supervision and direction and is true to the best of my knowledge and belief, and that I have the authority to sign this report form pursuant to 6 NYCRR Part 360. I am aware that any false statement made herein is punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

	3/15/18
Signature	Date
Daniel Napaletano Name (Print or Type)	Pre5 Title (Print or Type)
DOANNYTOWCO Email (Prin	at or Type)
	it of Type)
100 Warburton Ave	<u>Yonlyrs</u> City
Address	City
New York 10701 State and Zip	(914) 969- 9980 Phone Number
· State and Alb	rnone number

ATTACHMENTS: YES NO