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 <u>January 01, 2017</u> to <u>December 31, 2017</u>

SECTION 1 – FACILITY INFORMATION						
	FACILITY INFORMATION	CRISTON OF	ρ			
FACILITY NAME:		× 65.				
PETE Mosha USED'	Panb	Enew,	1			
FACILITY LOCATION ADDRESS:	FACILITY CITY:	STATE: ZIP CODE:				
44 PASCO ANT	QUEEN'S BURY	NY 12804				
FACILITY TOWN:	FACILITY TOWN: FACILITY COUNTY: FACILITY PHONE NUMBER:					
QUEEN BURY	warrer	518 79276h				
FACILITY NYS PLANNING UNIT: (A list of NYS	Planning Units can be found at the end of th	.				
WARREN	County	REGION #:				
NYS DEPARTMENT OF MOTOR VEHICLE REGISTRATION TYPE (Vehicle Dismantler, Mobile Crusher, etc.): NYS DEC ACTIVITY CODE:						
FACILITY CONTACT:	□ public CONTACT PHONE □ private NUMBER: SAME	CONTACT FAX NUMBER:				
CONTACT EMAIL ADDRESS:	ushen usfo Part @	Hot MAIL COA				
	OWNER INFORMATION					
OWNER NAME:	OWNER PHONE NUMBER:	OWNER FAX NUMBER:				
PETER MUSHA	519 792 7612					
OWNER ADDRESS: 44 PASCU AVI	OWNER CITY:	STATE: ZIP CODE:				
OWNER CONTACT:	OWNER CONTACT EMAIL ADDRES	•				
PETE		+ P Holmail.com	<u>, </u>			
OPERATOR NAME: Same as owner	OPERATOR INFORMATION	□public				
OFERATOR NAME.		☐ private				
PREFERENCES						
Preferred address to receive correspondence: Other (provide):	☐ Facility location address	☐ Owner address				
Preferred email address:	Owner Contact					
Preferred individual to receive correspondence:						
Did you operate in 2017? Yes; Complete this form.						
☐ No; Complete	and submit Sections 1 and 11.		[

	SECTION 2 - END-OF-LIFE VEHICLES (ELVs) F	PROCESSED
• Prov	vide the number of ELVs received from January 1 to December 31:	80
	vide the number of ELVs crushed and/or removed from the facility January 1 to December 31:	95
• Prov	vide the number of ELVs stored at the facility as of December 31:	316
	vide the highest number of ELVs stored at the facility ny one time from January 1 to December 31:	3i6
• Prov	vide the approximate area used for the storage of vehicles (acres):	acres
• Pro	vide the names of scrap metal processors to which you sold or sent de	ecommissioned ELVs:
1) _	Pennsalear 1204 2 Steel	
2)	Cohens	
3) _	RAYS Upstate Shredding	
	If your facility has received 25 or fewer ELVs during the year A 50 ELVs at any one time check this box and complete only section If not, leave this box blank.	
	→ Please, write "Not Applicable" on sections that do not perta	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 → Please, write "Not Applicable" on sections that do not pertain	

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. $\sqrt[4]{s}$ or X's) are not acceptable</u>. Report only fluids generated from dismantling operations (not general car repair, etc.)

		Fluid	Destination Name & Address			
Waste Fluid Recovered	Used on-site (oil heater, etc.)	Stored on-site at year-end	Sold/ Recycled off-site	Disposed off-site*	(Indicate permitted facility or permitted Part 364 transporter accepting waste fluids.)	
Refrigerant (pounds)						
Used Oil** 170 (gallons)						
Diesel Fuel 30	+/					
Gasoline 90	*					
Engine Coolant/ 170 Antifreeze (gallons)	*/	*				
Window Washing Fluid (gallons) 15	K					
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.

Received	Stored On Site	Sent Off Site	Destination			
(tons)	(tons)	(tons)	NYS <u>Planning Unit</u> (or state if other than New York)	Me	Scrap etal essor	
		24.72 Ton		Yes	No	
		465		Yes	No	
		Ostoliting colecting		Yes	No	
		175.43		Yes	No	
		BRASI 331.12 RS Flecticic Motors		Yes	No	
		930 PUS COPPER		Yes	No	
	Received (tons)	(tons) (tons)	(tons) (tons) 24.72 TON 465 Colection Colection	Received (tons) Stored On Site (tons) NYS Planning Unit (or state if other than New York) 24.72 TON 465 O Stored On Site (tons) 24.72 TON 465 O Stored On Site (tons) A 7.72 TON BRACU 17.815	Received (tons) Stored On Site (tons) Sent Off Site (tons) NYS Planning Unit (or state if other than New York) Yes Ves Ves Ves Ves Ves Ves Ves	

SECTION 5 - MERCURY SWITCHES COLLECTED

Provide the number of (H&TS) and antilock br		 Including but not limited to hood & trunk lighting switches
	H&TS () (Number)	ABS <u>U</u> (Number)
Indicate permitted facili	ity or permitted transporter accepting r	nercury 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.	_	Total CAIZS
Number of Lead-Acid Batteries collected from ELVs	64.5	Total CARY A DROPPED
Indicate permitted facility or permitted transporter accepting lead-acid batteries:		
Catalieic RECOVERI		·
Any materials disposed must undergo a hazardous waste determination and prophazardous.	per handling,	storage and disposal if
SECTION 7 – WASTE TIRES COLLEG	CTED	
Number of waste tires stored on-site:	900	as of December 31
Number of used tires available for sale on-site:	320	as of December 31
Number of used tires sold:	60	during operating year
Number of waste tires shipped off-site for recycling, disposal, other:	175	during operating year
Indicate name of facility(ies) accepting waste tires:		
Bobs tires		
SECTION 8 - PROBLEMS		
Were any problems encountered during the reporting period (e.g., specific occur facility procedures)?	rences whic	h have led to changes in
☐ Yes ☐ No If yes, attach additional sheets identifying each problem and problem.	the methods	for resolution of the
SECTION 9 – CHANGES		
Were there any changes from approved reports, plans, specifications, and perm	it conditions	?
☐ Yes ☐ No If yes, attach additional sheets identifying changes with a jus	tification for	each change.

SECTION 10 - COMPLIANCE CERTIFICATION

As of December 31, 2017:

						Date of Return to
		Waste Management Compliance Checklist	NA	Yes	No	Compliance
1. MO		our facility stores LESS THAN 1,000 tires, check NA. If your facility stores THAN 1,000 tires, do you have a PART 360 permit for tire storage?	_			
2.		system in place to control vegetation and prevent it from encroaching onto e access lanes or driveways?		-		
3.	Hav	ve you recorded the date of receipt for all end-of-life vehicles received?				
4.	Are	the end-of-life vehicle records available on-site?		_		
5.		ve all end-of-life vehicles been inspected, upon arrival, for leaking fluids and nauthorized wastes?	1	1		
6.	Hav	ve all observed leaks been remedied or contained?		_		
7.	Doe	es your facility have a written Contingency Plan?		~		
8.	Are	facility personnel trained to implement the Contingency Plan?		\	·	
9.	Doe	es your Contingency Plan include actions to be taken in the event of the followi	ng?			
	9a.	Fire.		•		
	9b.	Spill or release of vehicle waste fluids.		(
	9c.	Unauthorized material received at facility.		1		
10.		spills of waste fluids, if any occur, reported to the NYSDEC bills Hotline within two hours of detection?		1		
11.	Are	all vehicle residues prevented from migrating from or running off your operty?		`		
12.	ls d	lust controlled to prevent interference with facility operations or from leaving cility site?		\		
13.	Are	vectors (mosquitoes, rats, mice, etc.) controlled to prevent interference with cility operations?		\		
14.	Are	waste fluids kept from being discharged onto the ground or into surface aters?		١		
15.		ccess to your facility controlled by: fences, gates, sign and/or natural barriers ot vehicles)?		1		
	15a	. Are the access controls working (i.e. controlling access)?		,		
16.		fluids drained from end-of-life vehicles on a pad constructed of concrete or uivalent material?		1		
17.	Are	you doing the following with your concrete (or equivalent surface) pad that is uaining, crushing, etc.?	ised for	vehicle	e disma	intling, fluid
	17a.	Cleaning daily.				
	17b.	Cleaning spills as they occur.		1		
	17c.	Collecting and properly disposing of absorbent materials.		/		

					Date of Return to
	Waste Management Compliance Checklist	NA	Yes	No	
					Compliance
18.	Have the following wastes been drained, removed, deployed, collected and/or storactices, prior to vehicle crushing or shredding?	red 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.		_	•	
	18d. Refrigerants, if any.		_		
	18e. Air bags.		-		
	18f. PCB capacitors, if any.	1	1		
19.	Are fluids stored separately & in containers that are compatible with their contents?		1		
20.	Are fluids stored in closed containers?		-		
21.	Are containers which contain waste fluids in good condition and not visibly leaking?		1		
22.	Are containers clearly and legibly labeled to describe their contents?		·		
23.	Are containers stored on a bermed pad constructed of concrete or equivalent material?		1		
24.	Are lead-acid batteries stored upright and off the ground?		-		
25.	Are lead-acid batteries covered to protect them from precipitation?		1		
26.	Are all lead-acid batteries sent for recycling within one-year of receipt?		1		
27.	Are <u>leaking</u> lead-acid batteries, if any are encountered, stored in leak-proof containers separated from intact batteries?		1		
	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?	_			
29.	Are PCB capacitors, if any are encountered, removed and stored in appropriate, labeled containers for recycling or disposal?	_			
30.	Is used oil stored in accordance with local building codes, local fire codes, and the NYS Uniform Fire Prevention & Building Code?				
31.	If sent off-site, is used oil transported via a permitted hauler?				
32.	If you do not burn used oil onsite check NA for 32a., 32b., 32c. If you do, then answer	wer 32a	., 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?		_		
	32b. Do on-site space heaters burn only used oil that is generated on-site or received from household do-it-yourself generators?		_		
	32c. Are combustion gases from used oil space heaters vented to the outside ambient air?				

Waste Management Compliance Checklist	NA	Yes	No	Date of Return Compliance	
33. Is waste oil kept from being mixed with brake cleaner, carb cleaner, antifreeze, solvents, gasoline, or degreasers?		_			
34. Are sludges from sumps and oil/water separators stored in covered, closed and labeled containers?		^			
35. Are sludges properly recycled or disposed?		-			
36. Are used oil filters properly drained, crushed or dismantled?		_			
37. Are drained oil filters properly recycled or disposed?		_			
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?		/			
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?		1			
38c. Has the facility's Annual Certification Report for the SPDES MSGP been submitted within the previous year?		1			
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 month?				pounds	
	<u> </u>	<u> </u>		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.

Class A/misdemeanor pursuant to Section 210.45 of the Penal Law.						
Ma Vh	5 27 17					
Signature	Date					
PETE Moshe	ounl					
Name (Print or Type)	Title (Print or Type)					
Mosher USE PAND Email (F	Print or Type)					
44 PASCU AU Address	<u>OSEEN (BURY</u> City					
	(5/8) 752 - 76/7 Phone Number					

ATTACHMENTS: YES NO