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

	FACIL	ITY INFORMATION					
FACILITY NAME:							
ERIC FARR + Sons							
FACILITY LOCATION ADDRESS:	FACIL	FACILITY CITY: STA			ZIP CODE:		
18991 Game FARMED		Dexter	51.16	N. Y.	13634		
FACILITY TOWN:	FACIL	ITY COUNTY:			E NUMBER:		
				2-11	76		
FACILITY NYS PLANNING UNIT: (A list of NYS	S <u>Planning</u>	Units can be found at the end of the	nis report).		SDEC GION #: 6		
NYS DEPARTMENT OF MOTOR VEHICLE REGISTRATION NUMBER:		REGISTRATION TYPE (Vehico) ismantler, Mobile Crusher,	etc.):	NYS DE CODE:	C ACTIVITY		
FACILITY CONTACT: Hilda A. FARR	☐ publi		-// a	ONTACT	FAX NUMBER:		
CONTACT EMAIL ADDRESS:							
	OWN	ER INFORMATION	Market				
OWNER NAME:		R PHONE NUMBER:	OWNE	R FAX NU	JMBER:		
Hilda A. FARR	31	5-782 - 1176					
OWNER ADDRESS:	-	R CITY:	<u> </u>	STATE:	ZIP CODE:		
18791 Game FARM Rd		DEXTER		14.X.	13654		
OWNER CONTACT:	OWNE	R CONTACT EMAIL ADDRE	SS:	,			
	OPERA	TOR INFORMATION			A CONTRACTOR OF THE CONTRACTOR		
OPERATOR NAME: Same as owner				public private			
Appenie mod or special		REFERENCES					
Preferred address to receive correspondence: Facility location address Other (provide):							
Preferred email address:							
Preferred individual to receive correspondence: Facility Contact Owner Contact							
a constant	AL YELL						
Did you operate in 2017?	e this form	n.					
□ No; Complete and submit Sections 1 and 11.							

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	SECTION 2 - END-OF-LIFE VEHICLES (ELVs) PROCESSED
• Prov	ide the number of ELVs received from January 1 to December 31:
	ide the number of ELVs crushed and/or removed from the facility January 1 to December 31:
ПОП	January 1 to December 31:
• Prov	ide the number of ELVs stored at the facility as of December 31:
• Prov	ide the highest number of ELVs stored at the facility
	y one time from January 1 to December 31:
	- War
• Prov	ide the approximate area used for the storage of vehicles (acres):
• Prov	ide the names of scrap metal processors to which you sold or sent decommissioned ELVs:
1) _	NA.
2)	NA.
	To proportion to the second se
3) _	N. A.
	green in a Marine State State State of the s
Tertura S.	
	If your facility has received 25 or fewer ELVs during the year AND stored no more than 50 ELVs at any one time <u>check this box and complete only sections 3, 4, and 11</u> .
	If not, leave this box blank.
	→ Please, write "Not Applicable" on sections that do not pertain to your facility.
(many	If your facility has not processed or stored ANY ELVs during the year, check this box and
	complete only section 9.
	If not, leave this box blank

SECTION 3 - WASTE FLUIDS RECOVERED

Complete this table by reporting volumes of End-of-Life Vehicle (ELV) waste fluids managed at the facility during the reporting period. Qualitative responses (i.e. $\sqrt[4]{s}$ or X's) are not acceptable. Report only fluids generated from dismantling operations (not general car repair, etc.)

1		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)			ddd	ddd	
Used Oil** (gallons)			1		40 10 1
Diesel Fuel (gallons)			11		P= 1
Gasoline (gallons)			1	10	<u></u>
Engine Coolant/ Antifreeze (gallons)		V	\ -	Cab	
Window Washing Fluid (gallons)			0		110
Other (specify)		NP			
		r//			

^{*} 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.

general transfer or	Received	Stored On Site	Sent Off Site	Destination			
Material Types	(tons)	(tons)	(tons)	NYS <u>Planning Unit</u> (or state if other than New York)	te if To Scrap Metal Processor		
Ferrous Scrap Metal					Yes	No	
Aluminum Scrap Metal			V		Yes	No	
Lead Weights		\.	. cal	Se	Yes	No	
Non – Ferrous Scrap Metal		~ ~	1		Yes	No	
Other (specify):	Pr				Yes	No	
	j				Yes	No	

SECTION 5 - MERCURY SWITCHES COLLECTED						
Provide the number of mercury-containing devices <u>recovered</u> . (H&IS) and antilock brake assembles (ABS).	Including but not limited to hood & trunk lighting switches					
H&TS	(Number)					
Indicate permitted facility or permitted transporter accepting m	ercury containing devices:					

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

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SECTION 6 - LEAD-ACID BATTERIES COLLECTED

Provide the number of lead-acid batteries recovered and their disposition.	
Number of Lead-Acid Batteries collected from ELVs	
Indicate permitted facility or permitted transporter accepting lead-acid batter	ries:
a var e en ambantar il se sel	
Any materials disposed must undergo a hazardous waste determination and	d proper handling, storage and disposal if
hazardous	propositioning, clorage and disposal in
SECTION 7 - WASTE TIRES CO	LLECTED
Number of waste tires stored on-site:	45 -80 as of December 31
Number of used tires available for sale on-site:	as of December 31
Number of used tires sold:	during operating year
Number of waste tires shipped off-site for recycling, disposal, other:	O during operating year
ndicate name of facility(ies) accepting waste tires:	
SECTION 8 - PROBLEMS	S
Were any problems encountered during the reporting period (e.g., specific facility procedures)?	occurrences which have led to changes in
☐ Yes ☐ No If yes, attach additional sheets identifying each problem problem.	and the methods for resolution of the
SECTION 9 – CHANGES	
Were there any changes from approved reports, plans, specifications, and	
☐ Yes ☐ No If yes, attach additional sheets identifying changes with	a justification for each change.

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SECTION 10 - COMPLIANCE CERTIFICATION

As of December 31, 2016:

S					1
					Date of Return to
	Waste Management Compliance Checklist	NA	Yes	No	Compliance
1. MO	If your facility stores LESS THAN 1,000 tires, check NA. If your facility stores RE THAN 1,000 tires, do you have a PART 360 permit for tire storage?	NA			
2.	Is a system in place to control vegetation and prevent it from encroaching onto fire access lanes or driveways?		V		
3.	Have you recorded the date of receipt for all end-of-life vehicles received?	NA			
4.	Are the end-of-life vehicle records available on-site?	NA			N =0
5.	Have all end-of-life vehicles been inspected, upon arrival, for leaking fluids and unauthorized wastes?	NA			
6.	Have all observed leaks been remedied or contained?	1	V		
7.	Does your facility have a written Contingency Plan?		/		
8.	Are facility personnel trained to implement the Contingency Plan?				di ii ig
9.	Does your Contingency Plan include actions to be taken in the event of the follow	ing?	la la	OF EN	B beaute of used 8
	9a. Fire.		/		100 1 1
9	9b. Spill or release of vehicle waste fluids.	/			
	9c. Unauthorized material received at facility.	V			
10.	Are spills of waste fluids, if any occur, reported to the NYSDEC Spills Hotline within two hours of detection?	NA			
11.	Are all vehicle residues prevented from migrating from or running off your property?	NA			
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?	NA			
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)?		/		
16.	Are fluids drained from end-of-life vehicles on a pad constructed of concrete or equivalent material?	NX			
17.	Are you doing the following with your concrete (or equivalent surface) pad that is draining, crushing, etc.?	used for	vehicle	e dism	antling, fluid
	17a. Cleaning daily.	NA			
	17b. Cleaning spills as they occur.	NK			
	17c. Collecting and properly disposing of absorbent materials.	NA			

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					Date of Return to
	Waste Management Compliance Checklist	NA			Compliance
18.	Have the following wastes been drained, removed, deployed, collected and/or storpractices, prior to vehicle crushing or shredding?	red follo	wing b	est mai	nagement
	18a. Fluids (including engine oil, transmission fluid, transaxle fluid, front and rear axle fluid, brake fluid, power steering fluid, coolant, and fuel).	NA			Meng na T
	18b. Lead acid batteries.	NA			
	18c. Mercury switches or other mercury containing devices, if any.	NA			
	18d. Refrigerants, if any.	NA			
	18e. Air bags.	NA			TAIT
	18f. PCB capacitors, if any.				
19.	Are fluids stored separately & in containers that are compatible with their contents?	NA			
20.	Are fluids stored in closed containers?	NA	- 1		
21.	Are containers which contain waste fluids in good condition and not visibly leaking?	NA			
22.	Are containers clearly and legibly labeled to describe their contents?	NA			nede
23.	Are containers stored on a bermed pad constructed of concrete or equivalent material?	NA			
24.	Are lead-acid batteries stored upright and off the ground?	NA			
25.	Are lead-acid batteries covered to protect them from precipitation?	NA			
26.	Are all lead-acid batteries sent for recycling within one-year of receipt?	NA			
27.	Are <u>leaking</u> lead-acid batteries, if any are encountered, stored in leak-proof containers separated from intact batteries?	NA		100 mg	16.250 16.400 - 19.55
	27a. Are provisions in place to absorb any acid leakage?	NA			
28.	Are mercury switches and other mercury containing devices stored in appropriate, labeled containers and then sent for recycling?	NA			
29.	Are PCB capacitors, if any are encountered, removed and stored in appropriate, labeled containers for recycling or disposal?	NA			
30.	Is used oil stored in accordance with local building codes, local fire codes, and the NYS Uniform Fire Prevention & Building Code?	NA	art F		
31.	If sent off-site, is used oil transported via a permitted hauler?	NA			
32.	If you do not burn used oil onsite check NA for 32a., 32b., 32c. If you do, then ans	wer 32a	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?	NA			
	32b. Do on-site space heaters burn only used oil that is generated on-site or received from household do-it-yourself generators?	NX			
	32c. Are combustion gases from used oil space heaters vented to the outside ambient air?	NA			

Waste Management Compliance Checklist	NA			Date of Return to
33. Is waste oil kept from being mixed with brake cleaner, carb cleaner, antifreeze, solvents, gasoline, or degreasers?	NA			
34. Are sludges from sumps and oil/water separators stored in covered, closed and labeled containers?	NA			
35. Are sludges properly recycled or disposed?	NA			
36. Are used oil filters properly drained, crushed or dismantled?	NA			
37. Are drained oil filters properly recycled or disposed?	NA			
 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: 	NA			Le T
38a. If required by the SPDES MSGP, has a Stormwater Pollution Prevention Plan been prepared for this facility?	NA			
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?	NA			
38c. Has the facility's Annual Certification Report for the SPDES MSGP been submitted within the previous year?	NA			uiin u
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?		-	Nr.	pounds gallons

Do you nave any other Environmental Conservation Law or regulatory violations? (Attach additional sheets as necessary.)

Not that I know of.

COMMENTS? (Attach additional sneets 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.

Ailda A. Farr Signature	
Hisda A. FARR	Responsible perso
Name (Print or Type)	Title (Print or Type)
Email (Prin	nt or Type)
18991 Game FARMRd	Dex Lac
Address	City
13634	(3/5) 282 - 1/96
State and Zip	Phone Number

ATTACHMENTS: YES NO

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