Clear Form

# MANDATORY ANNUAL REPORT INCLUDING SELF-CERTIFICATION FOR VEHICLE DISMANTLING FACILITIES

(If you need assistance filling out this form please email <a href="mailto:swmfannualreport@dec.ny.gov">swmfannualreport@dec.ny.gov</a> 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

		ACILITY INFORMATIO	N		
FACILITY NAME:	FACILIT	TY INFORMATION			
Beutel Recyclers					
FACILITY LOCATION ADDRESS:	T 2				
To the Automotive Service Serv	FACILIT			STATE	: ZIP CODE:
17950 County Route 63	Wate	ertown	12	NY	13601
FACILITY TOWN:		Y COUNTY:	FACIL	ONE NUMBER:	
Hounsfield	Jeffe	rson	315-788-4080		
FACILITY NYS PLANNING UNIT: (A list of NYS Development Authority of the North Cou	Planning Un I <b>ntry</b>	nits can be found at the end of th	s report).	. N	IYSDEC REGION #: 6
NYS DEPARTMENT OF MOTOR VEHICLE REGISTRATION NUMBER: 7103446	Disi	GISTRATION TYPE (Vehiclemantler, Mobile Crusher, ep Collector, Scrap Processor	e tc.):	NYS E	DEC ACTIVITY
FACILITY CONTACT:	_ public	CONTACT PHONE	C	ONTACT	Γ FAX NUMBER:
Ann Beutel	private	NUMBER: 315-439-2906	The Constant		93-7102
CONTACT EMAIL ADDRESS:		313-439-2906	J	10-40	93-7 102
	OWNER	INFORMATION			
OWNER NAME:	OWNER F		OWNER	REAXN	IUMBER:
	315-493			93-71	
36880 Old Martin Street Road	OWNER C	CITY:	5	STATE:	ZIP CODE: 13619
OWNER CONTACT:	OWNER C	ONTACT EMAIL ADDRESS	S:		10019
Ann Beutel	sales@	beutelrecyclers.c	om		
		RINFORMATION			
OPERATOR NAME: same as owner				public private	
Proformed address to the	PREF	ERENCES		private	
Preferred address to receive correspondence:   Other (provide):	Facility loca	ation address	Owne	r address	
Preferred email address:  Facility Contact Other (provide):	■ Owi	ner Contact	-		
Preferred individual to receive correspondence:  Other (provide):	☐ Facility	Contact   Owner Co.	ntact		
lid you operate in 2017? ■ Yes; Complete thi		Sections 1 and 11.			

	SECTION 2 - END-OF-LIFE VEHICLES (ELVs)	PROCESSED
• Provide	e the number of ELVs received from January 1 to December 31:	63
• Provide from Ja	e the number of ELVs crushed and/or removed from the facility nuary 1 to December 31:	61
• Provide	the number of ELVs stored at the facility as of December 31:	2
Provide     at any o	the highest number of ELVs stored at the facility ne time from January 1 to December 31:	5
• Provide	the approximate area used for the storage of vehicles (acres):	1 acres
• Provide 1) We	the names of scrap metal processors to which you sold or sent de	ecommissioned ELVs:
2)		
3)		
	our facility has <b>received 25 or fewer ELVs</b> during the year AN <b>ELVs</b> at any one time check this box and complete only sections	ID stored no more than s 3, 4, and 11.
If n	ot, leave this box blank.	
→>	Please, write "Not Applicable" on sections that do not pertain	to your facility.
If yo	our facility has <b>not processed or stored ANY ELVs</b> during the notes only section 9.	ne year, check this box and
If no	ot, leave this box blank	
$\rightarrow$	Please, write "Not Applicable" on sections that do not pertain	to your facility.
IF N	EITHER OF THESE DESCRIPTIONS APPLIES TO YOUR FAC MPLETE THE ENTIRE FORM BELOW:	

### **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.)

		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)	-0-	-0-	-0-	-0-	. G
Used Oil** (gallons)	30	20	-0-	50	Town of Hounsfield Town Barn
Diesel Fuel (gallons)	-0-	-0-	-0-	-0-	5
Gasoline (gallons)	15	-0-	-0-	-0-	Used in lot vehicle
Engine Coolant/ Antifreeze (gallons)	10	-0-	-0-	-0-	Used in lot vehicles
Window Washing Fluid <sub>(gallons)</sub>	-0-	-0-	-0-	-0-	
Other (specify)					

<sup>\*</sup> Any fluids disposed must undergo a hazardous waste determination and proper handling, storage and disposal if hazardous.

<sup>\*\*</sup> 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.

Material Types	Received	Stored On Site	Sent Off Site	Destination		
	(tons)	(tons)	(tons)	NYS <u>Planning Unit</u> (or state if other than New York)	To Scrap Metal Processo	
Ferrous Scrap Metal	623	18	605	Weitsman Shrodding LLC	Yes	No
				Weitsman Shredding, LLC		
Aluminum Scrap Metal	5.4	.4	5	Moitoman Charling a com	Yes	No
Corap Metal				Weitsman Shredding & CN\		
Lead Weights	93 lbs	0	93 lbs	CANV D	Yes	No
			00 100	CNY Resource Recovery, Ir		
Non – Ferrous Scrap	1.69	.5	1.29	CNY Resource Recovery, Ir	Yes	No
Metal		.0	1.29	The source Recovery, II		
Other (specify):					Yes	No
					Yes	No

SECTION 5 - MERCURY	SWITCHES 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 2 (Number)	ABS(Number)
Indicate permitted facility or permitted transporter accepting m We still have on-site in a container marked a	nercury containing devices: as Hazardous Waste - not enough to ship

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

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### SECTION 6 - LEAD-ACID BATTERIES COLLECTED

Provid	e the num	ber of lead-acid batterie	es <u>recovered</u> and their dis	position.		
		-Acid Batteries collected			40	
Indicat	e permitte rstate E	d facility or permitted tra Battery	ansporter accepting lead-	acid batteries:		
Any ma	aterials dis	posed must undergo a l	nazardous waste determi	nation and pro	per handling, s	storage and disposal if
		SECT	TION 7 – WASTE TIF	RES COLLE	CTED	
Number	r of waste	tires stored on-site:			950	as of December 31
Number	of used to	res available for sale or	n-site:		10	as of December 31
Number	of used ti	res sold:			4	during operating year
Number	of waste	tires shipped off-site for	recycling, disposal, other	·:	0	during operating year
Indicate	name of f	acility(ies) accepting wa	ste tires:			g spotating your
			SECTION 8 - PRO	BLEMS		
Were ar	ny problen procedure:	ns encountered during t s)?	he reporting period (e.g.,	specific occur	rences which h	nave led to changes in
□ Yes	■ No	If yes, attach additional problem.	al sheets identifying each	problem and t	the methods fo	r resolution of the
			SECTION 9 - CHA	NGES		
Were the	ere any ch	anges from approved re	eports, plans, specificatio	ns, and permit	conditions?	
□ Yes	■ No		ıl sheets identifying chanç			ch change.

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### SECTION 10 - COMPLIANCE CERTIFICATION

#### As of December 31, 2017:

Waste Management Compliance Checklist	NA	Yes	No	Date of Return  Compliance
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?  Is a system in place to control your total.  It is a system in place to control your total.	X			
<ol> <li>Is a system in place to control vegetation and prevent it from encroaching onto fire access lanes or driveways?</li> </ol>		X		
3. Have you recorded the date of receipt for all end-of-life vehicles received?		X		
4. Are the end-of-life vehicle records available on-site?  5. Have all end-of-life vehicles been increased.		X		
5. Have all end-of-life vehicles been inspected, upon arrival, for leaking fluids and unauthorized wastes?		X		
3. Have all observed leaks been remedied or contained?		X		
7. Does your facility have a written Contingency Plan?		X		
Are facility personnel trained to implement the Contingency Plan?		X		
<ol> <li>Does your Contingency Plan include actions to be taken in the event of the following</li> </ol>	 ng?			
9a. Fire.		Х		
9b. Spill or release of vehicle waste fluids.		X		
9c. Unauthorized material received at facility.		X		
Are spills of waste fluids, if any occur, reported to the NYSDEC     Spills Hotline within two hours of detection?		$\frac{X}{X}$		
<ol> <li>Are all vehicle residues prevented from migrating from or running off your property?</li> </ol>		X		
<ol><li>Is dust controlled to prevent interference with facility operations or from leaving facility site?</li></ol>		X		10-
Are vectors (mosquitoes, rats, mice, etc.) controlled to prevent interference with facility operations?		X		
Are waste fluids kept from being discharged onto the ground or into surface waters?		X		
<ul><li>Is access to your facility controlled by: fences, gates, sign and/or natural barriers (not vehicles)?</li></ul>		X	$\dashv$	
15a. Are the access controls working (i.e. controlling access)?		X	_	
Are fluids drained from end-of-life vehicles on a pad constructed of concrete or equivalent material?		v	+	
Are you doing the following with your concrete (or equivalent surface) pad that is us draining, crushing, etc.?	sed for v	ehicle d	lismant	ling, fluid
17a. Cleaning daily.		х		
17b. Cleaning spills as they occur.		X	+	
17c. Collecting and properly disposing of absorbent materials.	-+	X	+	

Waste Management Compliance Checklist	NA	Yes	No	Date of Return t
18. Have the following wastes been drained, removed, deployed, collected and/or si practices, prior to vehicle crushing or shredding?	ored follo	owing 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).		X		
18b. Lead acid batteries.		X		
18c. Mercury switches or other mercury containing devices, if any.	1	X		
18d. Refrigerants, if any.				
18e. Air bags.		X		
18f. PCB capacitors, if any.	+	X		
19. Are fluids stored separately & in containers that are compatible with their contents?		X		
20. Are fluids stored in closed containers?	+	X		
21. Are containers which contain waste fluids in good condition and not visibly leaking?		X		
22. Are containers clearly and legibly labeled to describe their contents?		X		
23. Are containers stored on a bermed pad constructed of concrete or equivalent material?		X		
24. Are lead-acid batteries stored upright and off the ground?		X		
25. Are lead-acid batteries covered to protect them from precipitation?		X		
26. Are all lead-acid batteries sent for recycling within one-year of receipt?		X	+	
27. Are <u>leaking</u> lead-acid batteries, if any are encountered, stored in leak-proof containers separated from intact batteries?		X	$\dashv$	
27a. Are provisions in place to absorb any acid leakage?		X		
8. Are mercury switches and other mercury containing devices stored in appropriate, labeled containers and then sent for recycling?		X		
<ol><li>Are PCB capacitors, if any are encountered, removed and stored in appropriate, labeled containers for recycling or disposal?</li></ol>		X		
<ol> <li>Is used oil stored in accordance with local building codes, local fire codes, and the NYS Uniform Fire Prevention &amp; Building Code?</li> </ol>		X		
<ol> <li>If sent off-site, is used oil transported via a permitted hauler?</li> </ol>	X		-	
2. If you do not burn used oil onsite check NA for 32a., 32b., 32c. If you do, then answ	ver 32a.	32b 33	).c.	
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?	X	020., 02		
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?		X		
34. Are sludges from sumps and oil/water separators stored in covered, closed and labeled containers?	X			
35. Are sludges properly recycled or disposed?	X			
6. Are used oil filters properly drained, crushed or dismantled?	A	X		
7. Are drained oil filters properly recycled or disposed?				
<ol> <li>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:</li> </ol>	X	X		
38a. If required by the SPDES MSGP, has a Stormwater Pollution Prevention Plan been prepared for this facility?	X			
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?	X			
38c. Has the facility's Annual Certification Report for the SPDES MSGP been submitted within the previous year?	X			
If your facility does not handles cleaning solvents, degreasers, battery acids or n-vehicle wastes write NA. If these materials are handled at your facility, what is emaximum amount of this material that your facility generates in any calendar onth?		N	[A	_ pounds
		NA	A	gallons

Do you have any other Environmental Conservation Law or regulatory violations? (Attach additional sheets as necessary.)
No

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.

s a Class A misdemeanor pursuant to Section	Part 360. If am aware that any false 210.45 of the Penal Law.
Lexing. Ben & Signature	) 2/28/18 Date
Ann Beutel	Owner
Name (Print or Type)	Title (Print or Type)
sales@beutelrecyclers	S.COM nt or Type)
36880 Old Martin Street Road	Carthage
Address	City
New York 13619 State and Zip	315 493 2906 Phone Number

	-		2	
ATTACHMENTS:		YES		NO