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

(If you need assistance filling out this form please small swmfannuaireport@dec.ny.uov 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

3LU I			CILITYINFORMATIO	<u>N</u>	
	FAC	HLITT	INFORMATION		
FACILITY NAME: SCULLY					
FACILITY LOCATION ADDRESS:	FACI	LITY	CITY:		STATE: ZIP CODE:
11146 Stan 16	+40	<u> </u>	Brook biel		MY /3 UC
FACILITY TOWN:	FACI	LITY	COUNTY:		
Brook field	0	ΠY	Judisa	ļ	ITY PHONE NUMBER:
FACILITY NYS PLANNING UNIT: A SALOOD		/ /	veczen	115	899 8-495
B 7	~		and the state of t	t no ettera é	NYSDEC REGION#: B7
NYS DEPARTMENT OF MOTOR VEHICLE	···	REG	ISTRATION TYPE (Vehic	ie	NYS DEC ACTIVITY
REGISTRATION NUMBER:		Disn	nantier, Mobile Crusher, o	etc.);	CODE:
FACILITY CONTACT:	() pub	die	CONTACT PHONE		ONTAGE
Kerih Sully	Opriv		NUMBER:		ONTACT FAX NUMBER:
CONTACT EMAIL ADDRESS:				10	7 67
	014/	NED	MEGEMATION		
OWNER NAME: /			INFORMATION HONE NUMBER:	OWNE	R FAX NUMBER:
Keuch Sully	1 _		99 8995	3/*	
OWNER ADDRESS:	OWN	ER C	ITY;		STATE: ZIP CODE:
11146 SKencatlas trp		3 F.O.	ob Yield		NY 13485
OWNER CONTACT:			ONTACT EMAIL ADDRES	38:	
	ODED	ATO	RINFORMATION	mbullidadus ab	57700 M 2 5 10 10 10 10 10 10 10 10 10 10 10 10 10
OPERATOR NAME: Same as owner	<u> </u>	OI V			2 public
J. Samo as Omici) private
		PREF	ERENCES		
Preferred address to receive correspondence: Other (provide):	- Saci	lity loc	ation address	□ Owr	ner Address
Preferred email address: D Facility Contact Other (provide):		Ow	ner Contact		
Preferred individual to receive correspondence Other (provide):	e: 🗖 /	Facility	Contact Owner of	Contact	
4 1 1 100000000000000000000000000000000			100 HOLD 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Did you operate in 2017? O Yes; Complete	this for	m.			
No; Complete	and sul	bmit :	Sections 1 and 11.		, 'n
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reprinted (12/17)					

 Provide the number of ELVs received from January 1 to December 31; 	
Provide the number of ELVs crushed and/or removed from the facility	

SECTION 2 - END-OF-LIFE VEHICLES (ELVs) PROCESSED

 Provide the number of ELVs crushed and/or removed from the facility from January 1 to December 31: 	
Provide the number of ELVs stored at the facility as of December 31:	90
 Provide the highest number of ELVs stored at the facility at any one time from January 1 to December 31: 	80
Provide the approximate area used for the storage of vehicles (acres):	acres
Provide the names of scrap metal processors to which you sold or sent	
1)	
2)	
3)	

	f your facility has received 25 or fewer ELVs during the year AND stored πο 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.							
a	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

Please, write "Not Applicable" on sections that do not pertain to your facility. IF NEITHER OF THESE DESCRIPTIONS APPLIES TO YOUR FACILITY,

COMPLETE 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.)

		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 point de					
Used Oil**		0	7		
Diesel Fuel				27	
Gasoline galiche		// (
Engine Coolant/ Antifreeze gallons					
Window Washing Fluid agailars			MAIN 90 / MAIN 100 MAIN 114 MA		
Other specific					

- 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		
Material Types (tons)		(tons)	(tons)	NYS <u>Planning Unit</u> (or state if other than New York)	To Scrap Metal Processor	
Ferrous Scrap		70			Yes	No
Metal		100			0	0
Aluminum			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Yes	No
Scrap Metal					O	Ω
					Yes	No
Lead Weights					O	O
Non – Ferrous	entermonente de la companya de la 1989 de la 1980 de la 1989 de la 1980 de la 1980 de la 1980 de la	AND THE RESERVE THE PARTY OF TH			Yes	No
Scrap Metal					O	0
					Yes	No
Other aparts					0	O
# P					Yes	No
					0	0

SECTION 5 - MERCURY SWITCHES COLLECTED

Provide the number of mercury-containing devices recovered (H&TS) and antilock brake assemblies (ABS). H&TS (Number)	Including but not limited to hood & trunk lighting switches ABS (Number)
Indicate permitted facility or permitted transporter accepting m	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:
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: as of December 31
Number of used tires sold: during operating year
Number of waste tires shipped off-site for recycling, disposal, other:
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 DNo 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 PNo If yes, attach additional sheets identifying changes with a justification for each change.

SECTION 10 - COMPLIANCE CERTIFICATION

As of December 31, 2017:

1	If your facility stores LESS THAN 1,000 tires, check NA. If your facility stores	NA.	Yes		Date of Seturn to Compliance
MO 2.	RE THAN 1,000 tires, do you have a PART 360 permit for tire storage? Is a system in place to control vegetation and prevent it from encroaching onto		7		:
<u> </u>	fire access lanes or driveways?			8	
3.	Have you recorded the date of receipt for all end-of-life vehicles received?			7	
4.	Are the end-of-life vehicle records available on-site?			X	
5.	Have all end-of-life vehicles been inspected, upon arrival, for leaking fluids and unauthorized wastes?	X			
6.	Have all observed leaks been remedied or contained?	8			
7.	Does your facility have a written Contingency Plan?			7	
8.	Are facility personnel trained to implement the Contingency Plan?	8			
9.	Does your Contingency Plan include actions to be taken in the event of the following	ing?		1 1111	
	9a. Fire.	~			(1311)) 1-1
	9b. Spill or release of vehicle waste fluids.	1			
	9c. Unauthorized material received at facility.	7			
10.	Are spills of waste fluids, if any occur, reported to the NYSDEC Spills Hotline within two hours of detection?	1			, ,
11.	Are all vehicle residues prevented from migrating from or running off your property?	3	,		
12.	Is dust controlled to prevent interference with facility operations or from leaving facility site?	X			
13.	Are vectors (mosquitoes, rats, mice, etc.) controlled to prevent interference with facility operations?	X			
14.	Are waste fluids kept from being discharged onto the ground or into surface waters?	X			
15.	Is access to your facility controlled by: fences, gates, sign and/or natural barriers (not vehicles)?		8		
	15a. Are the access controls working (i.e. controlling access)?	***************************************	75		
	Are fluids drained from end-of-life vehicles on a pad constructed of concrete or equivalent material?	X			11 11 0 0000
17.	Are you doing the following with your concrete (or equivalent surface) pad that is u draining, crushing, etc.?	sed for	vehicle	disma	ntling, fluid
	17a. Cleaning daily.	X			
	I7b. Cleaning spills as they occur.	X			1 116/8/11/11/11/11
	7c. Collecting and properly disposing of absorbent materials.	X			

				Date of Return to
Waste Management Compliance Checklist	M	Yas	No	Compliance.
18. Have the following wastes been drained, removed, deployed, collected and/or storactices, prior to vehicle crushing or shredding?	red folic	wing b	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.				
19. Are fluids stored separately & in containers that are compatible with their contents?				
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?	15	1		
23. Are containers stored on a bermed pad constructed of concrete or equivalent material?		<i>()) t</i>		
24. Are lead-acid batteries stored upright and off the ground?				
25. Are lead-acid batteries covered to protect them from precipitation?				
26. Are all lead-acid batteries sent for recycling within one-year of receipt?				THE THE PARTY NAMED IN COLUMN
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?			1	
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?				- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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 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?				
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?				

				Date of Return
Weste 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?				1
34. Are sludges from sumps and oil/water separators stored in covered, closed and labeled containers?	7	:		
35. Are sludges properly recycled or disposed?	13			
36. Are used oil filters properly drained, crushed or dismentled?	12	· · · · · ·		* ""
37. Are drained oil filters properly recycled or disposed?	T			
 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. 			X	1111 to 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
38a. If required by the SPDES MSGP, has a Stormwater Pollution Prevention Plan been prepared for this facility?			7	
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?			8	. ,
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
				_ gallons
Do you have any other Environmental Conservation Law or regulatory violations? (Attach additional sheets as necessary.)				
				10 to
COMMENTS? (Attach additional sheets if necessary)				

SCULLY

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
626 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.

Signature

Nevin D Scully
Name (Print or Type)

Email (Print or Type)

Email (Print or Type)

Skan cafas trp
Address

NV 13456

315,899, 8995

ATTACHMENTS: O YES NO