FAX

KUBIS AUTO PARTS

172 N. DIVISION STREET AUBURN, NY 13021

PHONE: 315.253.4400 | FAX: 315.253.4338 |

FAX NUMBER :

FROM: KUBIS AUTO PARTS

DATE:

2-27-18

REGARDING:

annual report

TOTAL NUMBER OF PAGES INCLUDING COVER

PHONE NUMBER FOR FOLLOW-UP: 1-800-233-3799

Chaig

COMMENTS:

Dmv# 7002527

Clear Form

MANDATORY ANNUAL REPORT INCLUDING SELF-CERTIFICATION FOR VEHICLE DISMANTLING FACILITIES

(If you need assistance filling out this form please email <u>swmfannualreport@dec.ny.gov</u> 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		a depol Varia	
FACILITY NAME:	1				
Kubis Auto tor	15				
FACILITY LOCATION ADDRESS:	FACILITY	CITY:		STATE:	ZIP CODE:
172 N. Division St	A	DUYIN		NX	13021
FACILITY TOWN:	FACILITY	COUNTY:	FACIL	ITY PHON	E NUMBER:
	Cay	U92	315	-253	-4400
FACILITY NYS PLANNING UNIT: (A list of NYS	S <u>Planning Unit</u>	s can be found at the end of th	ils report		SDEC SION #: 7
NYS DEPARTMENT OF MOTOR VEHICLE REGISTRATION NUMBER: 70025		ISTRATION TYPE (Vehicle antier, Mobile Crusher, & Disman LEC		NYS DE CODE:	C ACTIVITY
FACILITY CONTACT:	∏ public	CONTACT PHONE	C	CONTACT	AX NUMBER:
Crain & Gallace	private	NUMBER: 315 2534400		315 25	3 <i>4338</i>
CONTACT EMAIL ADDRESS:	allace	, <u> </u>	ראר.		
	OWNER	INFORMATION			
OWNER NAME:	OWNER P	HONE NUMBER:	OWNE	ER FAX NU	IMBER:
Craia S. Gallace	31520	53-4400	315	253	4338
OWNER ADDRESS:	OWNER C	CITY:		STATE:	ZIP CODE:
172 U. Division St.	<u> </u>	<u> </u>		NY.	13021
OWNER CONTACT:	OWNER C	ONTACT EMAIL ADDRE	SS:	.)	
Craire Gallace	dga	llace @ hot	ma	I.COY	\cap
	OPERATO	RINFORMATION		All Control of the Co	Andrew Company
OPERATOR NAME: same as owner				□ public □ private	
Preferred address to receive correspondence. Other (provide):	Facility loc	cation address	Out Out	vner address	
Preferred email address: Facility Contact	Пo	mer Cantact	,		
Preferred individual to receive correspondenc Other (provide):	e: ÆFacilli	y Contact 🔲 Owner	Contact		
Did you operate in 2017? Yes; Complet	e this form.				
☐ No; Complete	e and submit	Sections 1 and 11.			

	SECTION 2 - END-OF-LIFE VEHICLES (ELVs)	PROCESSED
- Pro	vide the number of ELVs received from January 1 to December 31:	110
	vide the number of ELVs crushed and/or removed from the facility n January 1 to December 31:	362
• Prov	vide the number of ELVs stored at the facility as of December 31:	1587
	vide the highest number of ELVs stored at the facility ny one time from January 1 to December 31:	1949
• Prov	vide the approximate area used for the storage of vehicles (acres):	/2 acres
1)	Upstate Shredding-Den Wi	Man - Owlg
1) <u> </u> 2) 3)	Upstate Shredding-Den Wi	
	If your facility has received 25 or fewer ELV s during the year	
3)	· · · · · · · · · · · · · · · · · · ·	
3)	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	ons 3, 4, and 11.
3)	If your facility has received 25 or fewer ELV s during the year 50 ELV s at any one time <u>check this box and complete only section</u> If not, leave this box blank.	ons 3, 4, and 11.
3) _	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 of the first leave this box blank. Please, write "Not Applicable" on sections that do not perform the foliation of the first leave the first leave this box blank. If your facility has not processed or stored ANY ELVs during complete only section 9.	ons 3, 4, and 11. tain to your facility. g the year, check this box and

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 \	/olume		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)		12183					
Used Oil** (gallons)	900	730					
Diesel Fuel (gallons)		0					
Gasoline (gallons)	300				USED IN EMPLOYEE VEHICLE		
Engine Coolant/ Antifreeze (gallons)		330					
Window Washing Fluid (gallons)	15	10			USED IN COMPANY VEHICLE		
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

·	Received	Stored On Site	D OF O'	Destination			
Material Types	(tons)	(tons)	Sent Off Site (tons)	NYS <u>Planning Unit</u> (or state if other than New York)	Me	To Scrap Metal Processor	
Ferrous Scrap Metal					Yes	20 L	
Aluminum Scrap Metal					Yes	No	
Lead Weights		M		, riches and	Yes	No	
Non – Ferrous Scrap Metal					Yes	No	
Other (specify):					Yes	No	
					Yes	No	
	SECT	TION 5 - MERC	URY SWITCH	HES COLLECTED			
d&TS) and antilock	brake assembli H&TS <u>50</u> (Number)	es (ABS). <u>STORED</u> C	DNSITE	g but not limited to hood & trunk lig ABS <u>O</u> (Number)	ghting sw	itches	
dicate permitted fa	cility or permitte	d transporter acce	pting mercury co	ontaining 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.	CA
Number of Lead-Acid Batteries collected from ELVs	93
Indicate permitted facility or permitted transporter accepting lead-acid batteries: 25 USED BATTERIES SOLD TO CUSTOMER.	
5,869 LBS OF JUNK BATTERIES SOLD TO	UTSTATE SHREED
30 JUNK BATTERIES STORED IN	
Any materials disposed must undergo a hazardous waste determination and proper hazardous.	SEE ENCLOSED IN handling, storage and disposal if
SECTION 7 - WASTE TIRES COLLECT	ED
Number of waste tires stored on-site:	200 as of December 31
Number of used tires available for sale on-site:	250 as of December 31
	238 during operating year
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 occurred facility procedures)?	nces which have led to changes in
☐ Yes ■ No If yes, attach additional sheets identifying each problem and the problem.	e methods for resolution of the
SECTION 9 - CHANGES	
Were there any changes from approved reports, plans, specifications, and permit of	conditions?
☐ Yes @ No If yes, attach additional sheets identifying changes with a justifi	cation for each change.

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SECTION 10 – COMPLIANCE CERTIFICATION

As of December 31, 2017:

					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?	W PATRICULAR PARTY		ALTHY SERVICE STATE	So Maridian de la completa del la completa de la completa de la completa del la completa de la completa del la completa de la completa de la completa del l
2.	Is a system in place to control vegetation and prevent it from encroaching onto fire access lanes or driveways?	1	V		
3.	Have you recorded the date of receipt for all end-of-life vehicles received?		V		
4.	Are the end-of-life vehicle records available on-site?		V		
5.	Have all end-of-life vehicles been inspected, upon arrival, for leaking fluids and unauthorized wastes?		$\sqrt{}$		
6.	Have all observed leaks been remedied or contained?		V		
7.	Does your facility have a written Contingency Plan?		$\sqrt{}$		
8.	Are facility personnel trained to implement the Contingency Plan?		$\sqrt{}$		
9.	Does your Contingency Plan include actions to be taken in the event of the follow	ring?			
	9a. Fire.		$\sqrt{}$		
	9b. Spill or release of vehicle waste fluids.		$\sqrt{}$		mi .
	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?				
11.	Are all vehicle residues prevented from migrating from or running off your property?		$\sqrt{}$		
	Is dust controlled to prevent interference with facility operations or from leaving facility site?		$\sqrt{}$		
	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?		/		
15.	Is access to your facility controlled by: fences, gates, sign and/or natural barriers (not vehicles)?		$\sqrt{}$		
	15a. Are the access controls working (i.e. controlling access)?		V.		
ł	Are fluids drained from end-of-life vehicles on a pad constructed of concrete or equivalent material?				
17.	Are you doing the following with your concrete (or equivalent surface) pad that is draining, crushing, etc.?	used for	r vehicl	e disma	entling, fluid
	17a. Cleaning daily.		<u> </u>		
	17b. Cleaning spills as they occur.				
	17c. Collecting and properly disposing of absorbent materials.		V		

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					Date of Return to Compliance
	Waste Management Compliance Checklist		Yes	No	
18.	Have the following wastes been drained, removed, deployed, collected and/or store practices, 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.				
	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?		\checkmark		WIII
	Are fluids stored in closed containers?		\checkmark		
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?		\checkmark		
23.	Are containers stored on a bermed pad constructed of concrete or equivalent material?		$\sqrt{}$		
24.	Are lead-acid batteries stored upright and off the ground?		<u> </u>	<u></u>	
25.	Are lead-acid batteries covered to protect them from precipitation?		\checkmark		
	Are all lead-acid batteries sent for recycling within one-year of receipt?			ļ	
27.	Are <u>leaking</u> lead-acid batteries, if any are encountered, stored in leak-proof containers separated from intact batteries?		V		
	27a. Are provisions in place to absorb any acid leakage?		V		
28.	Are mercury switches and other mercury containing devices stored in appropriate, labeled containers and then sent for recycling?		$\sqrt{}$		
	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?		<u> </u>		
	If sent off-site, is used oil transported via a permitted hauler?		V		
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:	1
	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?		\checkmark		
	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?		\checkmark		:

NΔ	Yes	Nσ	Date of Return to Compliance
		Profitation to the second	And all Vision and Control of the Co
	\checkmark		
	\checkmark		
	V		
	/		
	\checkmark		
	/		
	\checkmark		
			pounds gallons
	NA 	NA Yes	NA Yes No

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.

Laugh Holland 2/20/20/8

Signature Date Date

Crack Scalage Date

Nalme (Print or Type)

Title (Print or Type)

Address City

State and Zip

Phone Number

ATTACHMENTS: YES NO

Outlines 2017

Upstate Shredding Ben Weitsman of Syracuse

(315) 488-3171 333 Amidge Street Solvay NY

13209

Tick# 412973 Notes:	By jii Craig	w.c	7:26:52	AM	6/22/2017
Gross	Tare	Not	UOM	Price	Amount
SY302 - Batter:	ies (Lbs.)			
2,522.00	55.00	2,467.00	Lbs	0.350	863.450
Manual WT					
SY302 - Batter:	ies (Lbs.)			
3,447.00	4 5.00	3,402.00	Lbs	0.350	1,190.700
Manual WT					
					\$2,054.15
		Ticket	Total		2,054.150
* TWO THOUSAND	FIFTY-FO	JR AND 1	5 / 100		
Date	Mode	T:	sw. #		Amount
6/22/2017	CashDisp				2,054.150
Print Name: K	UBIS AUTO				
Address: 172 N	ORTH DIV	ts Mols			
City/ST/Zip: A	UBURN/NY/	13021			** 1.=-

In accordance with Section 608 of the 1990 Clean Air Act and 40 CFR Part 82, the undersigned cortifies that all CFC refrigerants have been properly evacuated from any recyclables contained in this transaction. I hereby state that I'm the lawful owner of the material described heron, that I have a right to sell same and that for payment received in full, hereby acknowledged, I sell and convey title of same to:

Ben Weitsman of Syraduse

х

Thank you for your Business www.upstateshredding.com