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**

	FACIL	ITY INFORMATION				
FACILITY NAME:						
Goldwing Used Saab Parts						
FACILITY LOCATION ADDRESS:	FACILITY CITY: STATE: ZIP CODE:					
2008 US Rt 11	Has	tings		NY	13076	
FACILITY TOWN:	FACILI	TY COUNTY:	FACIL	ITY PHO	NE NUMBER:	
Hastings		/ego			5-5800	
FACILITY NYS PLANNING UNIT: (A list of NYS	S <u>Planning</u> I	<u>Units</u> can be found at the end of th	nis report		YSDEC EGION #:	
NYS DEPARTMENT OF MOTOR VEHICLE REGISTRATION NUMBER: 7050130	Ri Di	EGISTRATION TYPE (Vehic ismantler, Mobile Crusher,	etc.):	NYS D CODE	EC ACTIVITY :	
FACILITY CONTACT:	public		С	ONTACI	FAX NUMBER:	
Eric Stooks	☐ privat	te NUMBER: 315-374-7761	3	15-66	68-5805	
CONTACT EMAIL ADDRESS:goldwingsaal	o.rover@					
		ER INFORMATION				
OWNER NAME: Eric Stooks		R PHONE NUMBER: 374-7761	100 11 15	ER FAX N 668-58	iumber: 305	
OWNER ADDRESS: 31 Ward Dr	OWNER Parish		- 0	STATE:	<b>ZIP CODE:</b> 13131	
OWNER CONTACT:		R CONTACT EMAIL ADDRE tooks@nnymail.co				
		TOR INFORMATION				
OPERATOR NAME: same as owner	5			□ public □ private		
	The state of the s	REFERENCES				
Preferred address to receive correspondence:						
Preferred email address: Facility Contact United Distriction	Ammer	Owner Contact			-	
Preferred individual to receive correspondence:						
Did you operate in 2017?  Yes; Complete	this form	1.				
□ No; Complete and submit Sections 1 and 11.						

	SECTION 2 - END-OF-LIFE VEHICLES (ELVs)	PROCESSED
• Prov	ide the number of ELVs received from January 1 to December 31:	254
	ide the number of ELVs crushed and/or removed from the facility January 1 to December 31:	195
• Prov	ide the number of ELVs stored at the facility as of December 31:	1474
	ide the highest number of ELVs stored at the facility yone time from January 1 to December 31:	1474
• Prov	ide the approximate area used for the storage of vehicles (acres):	acres
• Prov	ide the names of scrap metal processors to which you sold or sent o	lecommissioned ELVs:
1) _		-
2)		
3)		
	If your facility has <b>received 25 or fewer ELVs</b> during the year A 50 ELVs at any one time check this box and complete only section	AND <b>stored no more than</b> ons 3, 4, and 11.
	If not, leave this box blank.	
	→ Please, write "Not Applicable" on sections that do not perta	ain to your facility.
	If your facility has <b>not processed or stored ANY ELVs</b> during complete only section 9.  If not, leave this box blank	the year, check this box and
	→ Please, write "Not Applicable" on sections that do not perta	ain to your facility.
	IF NEITHER OF THESE DESCRIPTIONS APPLIES TO YOUR FACOMPLETE 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)			ddd	ddd		
Used Oil** (gallons)	266					
Diesel Fuel (gallons)						
Gasoline (gallons)	790					
Engine Coolant/ Antifreeze (gallons)		150				
Window Washing Fluid (gallons)	40					
Other (specify)						
	11					

<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.

N4-1-1-1-1-	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 Metal					Yes	No	
Aluminum Scrap Metal					Yes	No	
Lead Weights					Yes	No	
Non – Ferrous Scrap Metal					Yes	No	
Other (specify):					Yes	No	
					Yes	No	

(H&TS) and antilock brake assemblies (ABS).	switches
H&TS O (Number)	ABS (Number)
Indicate permitted facility or permitted transporter accepting	mercury 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	300	
Indicate permitted facility or permitted transporter accepting lead-acid batteries:  Interstake Buttery Syracuse		,
Any materials disposed must undergo a hazardous waste determination and pro-	anor bondling of	
hazardous.	per nandling, si	orage and disposal it
SECTION 7 – WASTE TIRES COLLE	CTED	
Number of waste tires stored on-site:	0	as of December 31
Number of used tires available for sale on-site:	20	as of December 31
Number of used tires sold:	100	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 occufacility procedures)?	urrences which h	ave led to changes in
☐ Yes ☑ No If yes, attach additional sheets identifying each problem and problem.	d the methods fo	r resolution of the
SECTION 9 – CHANGES		
Were there any changes from approved reports, plans, specifications, and perm	nit conditions?	
☐ Yes ☑No If yes, attach additional sheets identifying changes with a ju	stification for eac	ch change.

## **SECTION 10 – COMPLIANCE CERTIFICATION**

### As of December 31, 2016:

Waste Management Compliance Checklist	NA			Date of Return to
If your facility stores LESS THAN 1,000 tires, check NA. If your facility stores	NA	Yes	No	Compliance
MORE THAN 1,000 tires, do you have a PART 360 permit for tire storage?	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?		X		
5. Have all end-of-life vehicles been inspected, upon arrival, for leaking fluids and unauthorized wastes?		X		
Have all observed leaks been remedied or contained?		X		
7. Does your facility have a written Contingency Plan?	X			
8. Are facility personnel trained to implement the Contingency Plan?		X		
9. Does your Contingency Plan include actions to be taken in the event of the follow	/ing?			
9a. Fire.		7		
9b. Spill or release of vehicle waste fluids.		ス		
9c. Unauthorized material received at facility.		X		VII.
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?		7		
12. Is dust controlled to prevent interference with facility operations or from leaving facility site?		+		
13. Are vectors (mosquitoes, rats, mice, etc.) controlled to prevent interference with facility operations?		7		
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)?		X		
15a. Are the access controls working (i.e. controlling access)?		メ		
16. Are fluids drained from end-of-life vehicles on a pad constructed of concrete or equivalent material?		$\lambda$		
17. Are you doing the following with your concrete (or equivalent surface) pad that is draining, crushing, etc.?	used for	vehicle	disma	ntling, fluid
17a. Cleaning daily.		X		
17b. Cleaning spills as they occur.		+		
17c. Collecting and properly disposing of absorbent materials.		+		
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	Waste Management Compliance Checklist	NA	Yes	No	Date of Return to
18	Have the following wastes been drained, removed, deployed, collected and/or sto practices, prior to vehicle crushing or shredding?	red follo	owing 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).		7		
	18b. Lead acid batteries.		X		
	18c. Mercury switches or other mercury containing devices, if any.	X			
	18d. Refrigerants, if any.		X		
	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?		7		
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?		7		¥
23.	Are containers stored on a bermed pad constructed of concrete or equivalent material?		f		
24.	Are lead-acid batteries stored upright and off the ground?		Ť		
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?		7		
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?			×	
28.	Are mercury switches and other mercury containing devices stored in appropriate, labeled containers and then sent for recycling?		λ		
	Are PCB capacitors, if any are encountered, removed and stored in appropriate, labeled containers for recycling or disposal?	$\lambda$			
30.	Is used oil stored in accordance with local building codes, local fire codes, and the NYS Uniform Fire Prevention & Building Code?		X		
31.	If sent off-site, is used oil transported via a permitted hauler?	X			
32.	If you do not burn used oil onsite check NA for 32a., 32b., 32c. If you do, then answ	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?		4		
****	32b. Do on-site space heaters burn only used oil that is generated on-site or received from household do-it-yourself generators?	4			. ,
	32c. Are combustion gases from used oil space heaters vented to the outside ambient air?		X		

Waste Management Compliance Checklist	NA	Yes	No	Date of Return
33. Is waste oil kept from being mixed with brake cleaner, carb cleaner, antifreeze, solvents, gasoline, or degreasers?		入		
34. Are sludges from sumps and oil/water separators stored in covered, closed and labeled containers?		7		
35. Are sludges properly recycled or disposed?		+		-
36. Are used oil filters properly drained, crushed or dismantled?		メ		
37. Are drained oil filters properly recycled or disposed?		7		
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:	$\lambda$			
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?	$\lambda$			
38c. Has the facility's Annual Certification Report for the SPDES MSGP been submitted within the previous year?	入			
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?	NA			pounds
				gallons
Do you have any other Environmental Conservation Law or regulatory violations? (Attach additional sheets as necessary.)				
				5
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.

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	9178/18					
Signature	Date					
Eric Stooks	owner					
Name (Print or Type)	Title (Print or Type)					
ericstooks@nnymail.com  Email (Print or Type)						
PO Box 315	Hastings					
Address	City					
NY 13131	()					
State and Zip	Phone Number					

	\$	<b>*******</b>
ATTACHMENTS:	LYES	NO