Clear Form

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

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	Y INFORMATION		,	8 9
FACILITY NAME:	55 <b>5</b> ] 38-9				
Lamberts Auto Par	cts	Inc			s
FACILITY LOCATION ADDRESS:	FACILITY	CITY:		STATE:	ZIP CODE:
8552R+ 14	Fran	Klinville	gr E	NY	14737
FACILITY TOWN:		COUNTY:	FACIL	ITY PHON	E NUMBER:
Machias	Cat		716	-353	Decis
FACILITY NYS PLANNING UNIT:					
NYS DEPARTMENT OF MOTOR VEHICLE REGISTRATION NUMBER:		GISTRATION TYPE (Vehic mantler, Mobile Crusher, (		NYS DE CODE:	CACTIVITY 05506
FACILITY CONTACT:	√ public	CONTACT PHONE	С	ONTACT	FAX NUMBER:
Michael Lambert	private	NUMBER: 716-353-8348)		141	
CONTACT EMAIL ADDRESS: Lambert	stowi	ng@yahoo.com			
		INFORMATION			
OWNER NAME:	OWNER	PHONE NUMBER:	OWNE	R FAX N	JMBER:
Michael Lambert	716-35	53-3481			
OWNER ADDRESS:	OWNER			STATE:	ZIP CODE:
8552 R+ 16		linville		NY	14737
OWNER CONTACT:		CONTACT EMAIL ADDRE		•	
Lambertstowing@yahoo.com					
	OPERATO	OR INFORMATION			
OPERATOR NAME:  same as owner			<u>.</u>	□ public □ private	*
Defendant in the second		FERENCES			
Preferred address to receive correspondence:	✓ Facility Id	ocation address	□ Ow	ner address	
Preferred email address: Facility Contact  Other (provide):	Zo	wner Contact			
Preferred individual to receive correspondence  Other (provide):	e: □Facil	ity Contact 🗹 Owner	Contact		
Did you operate in 2017? Yes; Complete	this form.				
☐ No; Complete	and submi	t Sections 1 and 11.			

	SECTION 2 - END-OF-LIFE VEHICLES (ELVs) PROCESSED
• Pro	ovide the number of ELVs received from January 1 to December 31: 304
	ovide the number of ELVs crushed and/or removed from the facility in January 1 to December 31:
• Pro	ovide the number of ELVs stored at the facility as of December 31:
	ovide the highest number of ELVs stored at the facility any one time from January 1 to December 31:
• Pro	ovide the approximate area used for the storage of vehicles (acres):
• Pro	ovide the names of scrap metal processors to which you sold or sent decommissioned ELVs:
1) .	Meteliza
2)	
3)	
	If your facility has <b>received 25 or fewer ELVs</b> during the year AND <b>stored no more than 50 ELVs</b> at any one time check this box and complete only sections 3, 4, and 11.
is .	If not, leave this box blank.  →▶ Please, write "Not Applicable" on sections that do not pertain to your facility.
	Please, write Not Applicable on sections that do not pertain to your facility.
	If your facility has <b>not processed or stored ANY ELVs</b> 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							
(Indicate permitted facility or permitted Part 364 transporter accepting waste fluids.)	Disposed off-site*	Sold/ Recycled off-site	Stored on-site at year-end	Used on-site (oil heater, etc.)	Waste Fluid Recovered		
			36	2	Refrigerant		
			300	500	Used Oil**		
			50		Diesel Fuel		
			60		Gasoline		
			100	ζó	Engine Coolant/ Antifreeze		
		40	30	20	Window Washing Fluid		
					Other		
					Other		

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.

		24 10 0'4 0 4 0ff C'4		Destination					
Material Types	Received	Stored On Site	Sent Off Site	NYS (or state if other than New York)	To Scrap Metal Processo				
Ferrous Scrap Metal					Yes	No			
Aluminum Scrap Metal		2,000	13,200	Andolico	Yes	No 			
Lead Weights		75 LBS			Yes	No 🗆			
Non – Ferrous Scrap Metal					Yes	No □			
Other					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	ABS 45 (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 recovered and their disposition.				
Number of Lead-Acid Batteries collected from ELVs	220			
Indicate permitted facility or permitted transporter accepting lead-acid batteries:				
Any materials disposed must undergo a hazardous waste determination and prohazardous.	per handling, s	torage and disposal if		
SECTION 7 - WASTE TIRES COLLE	CTED			
Number of waste tires stored on-site:	850	as of December 31		
Number of used tires available for sale on-site:	137	as of December 31		
Number of used tires sold:	82	during operating year		
Number of waste tires shipped off-site for recycling, disposal, other:	800	during operating year		
Indicate name of facility(ies) accepting waste tires:		0 , 0 ,		
mer some of Allegenzy				
SECTION 8 - PROBLEMS				
Were any problems encountered during the reporting period (e.g., specific occurrence)?	ırrences which	have led to changes in		
☐ Yes ☐ No If yes, attach additional sheets identifying each problem and problem.	I the methods t	for 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 e	ach change.		

# SECTION 10 - COMPLIANCE CERTIFICATION

## As of December 31, 2017:

	200		,	٠
	ه <i>مو</i> 	NO	NA	
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?	K			v.
6. 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.	1			
9b. Spill or release of vehicle waste fluids.	9			
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?	7			
11. Are all vehicle residues prevented from migrating from or running off your property?	X			
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?	×			
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)?	x			
15a. Are the access controls working (i.e. controlling access)?	Y			
16. Are fluids drained from end-of-life vehicles on a pad constructed of concrete or equivalent material?	4			
17. Are you doing the following with your concrete (or equivalent surface) pad that is draining, crushing, etc.?	used fo	r vehicl	e disma	antling, fluid
17a. Cleaning daily.	X			
17b. Cleaning spills as they occur.	1			
17c. Collecting and properly disposing of absorbent materials.	1			

		yes	16	who		
18.	Have the following wastes been drained, removed, deployed, collected and/or storpractices, prior to vehicle crushing or shredding?				agement	
	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.	Y			1	
	18c. Mercury switches or other mercury containing devices, if any.	¥				
	18d. Refrigerants, if any.	4				
	18e. Air bags.	オ				
	18f. PCB capacitors, if any.	4				
19.	Are fluids stored separately & in containers that are compatible with their contents?	4				
20.	Are fluids stored in closed containers?	K				
21.	Are containers which contain waste fluids in good condition and not visibly leaking?	K				
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?	Y				
24.	Are lead-acid batteries stored upright and off the ground?	K				
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?	K				
27.	Are <u>leaking</u> lead-acid batteries, if any are encountered, stored in leak-proof containers separated from intact batteries?	Y				
	27a. Are provisions in place to absorb any acid leakage?	X				
28.	Are mercury switches and other mercury containing devices stored in appropriate, labeled containers and then sent for recycling?	4				36
29.	Are PCB capacitors, if any are encountered, removed and stored in appropriate, labeled containers for recycling or disposal?	4				
30.	Is used oil stored in accordance with local building codes, local fire codes, and the NYS Uniform Fire Prevention & Building Code?	Y				
31.	If sent off-site, is used oil transported via a permitted hauler?			Y		
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?	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?	Y				

	Jes	10	NA	
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?	¥			
35. Are sludges properly recycled or disposed?	4			
36. Are used oil filters properly drained, crushed or dismantled?	*			
37. Are drained oil filters properly recycled or disposed?	X			
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:				
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?	Y			
38c. Has the facility's Annual Certification Report for the SPDES MSGP been submitted within the previous year?	Y			
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?		-	2,500 b	pounds gallons
Do you have any other Environmental Conservation Law or regulatory violations? (Attach additional sheets as necessary.)				
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.

Signature	2-25-18 Date
Michael Lambert	owner
Name (Print or Type)	Title (Print or Type)
Lamberts towing @1	yahoo.com int or Type)
8552 R+10 Address	Franklinville City
NY 14737 State and Zin	(716)353-348

ATTACHMENTS: \_\_\_\_ YES \_\_\_ NO