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>

Sal (2007)	SECTION OF THE PROPERTY OF THE	Control of the Contro	ACILITY INFORMATI	ON		3
EACH	ITY NAME:	FACILI	TY INFORMATION			
A A	tomotive Inc.					The state of the s
FACIL	ITY LOCATION ADDRESS:	FACILIT	Y CITY:		STATE:	ZIP CODE:
625	1 Honeysette Rd.	May	∕ille			>14757
FACIL	ITY TOWN:	FACILIT	Y COUNTY:	FACI	<u>i.</u>	NE NUMBER:
	autauqua	Chau	utauqua	716	S-753	-2367
Onduc	ITY NYS PLANNING UNIT: (A list of NYS augua County	S <u>Planning U</u>	nits can be found at the end of	this repor	t). N'	rsdec egion #: 9
NYS D REGIS 705038	EPARTMENT OF MOTOR VEHICLE TRATION NUMBER: 8	Dis	GISTRATION TYPE (Vehi mantler, Mobile Crusher cle dismantler	cle etc.):	NYS D CODE:	EC ACTIVITY
	TY CONTACT:	public	CONTACT PHONE	(CONTACT	FAX NUMBER:
Rox	anna Maytum	☐ private	NUMBER: 716-753-2367			53-2330
CONT	CT EMAIL ADDRESS:		110-100-2301			2000
		OWNER	UNFORMATION -			
Kevin	R NAME: C. Maytum	OWNER	PHONE NUMBER: 3-2367	оwи 716-	R FAX N 753-23	UMBER: 30
5950 \$	R ADDRESS: Springbrook Rd.	OWNER (Dewittvil	CITY: le		STATE:	ZIP CODE: 14728
owner Same	R CONTACT:		contact Email Addre		<u> </u>	
arpa h		Action to the Control of the Control	RINFORMATION			
OPERA	TOR NAME: same as owner				public private	(State (Main) (Constitution of State (State (St
Preferre	d addraga to	PRE	FERENCES			
Other (d address to receive correspondence: provide):	Facility lo	cation address	□ Owi	ner add r ess	
Preferre □ Other (d email address: ☐ Facility Contact provide):	⊡ ov	vner Contact			
Preferre □ Other (d individual to receive correspondence: provide):	■ Facilit	y Contact Owner	Contact		
Did you	operate in 2017? Yes; Complete a		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:	225					
		vide the number of ELVs crushed and/or removed from the facility 1 January 1 to December 31:	931					
	• Pro	vide the number of ELVs stored at the facility as of December 31:	1839					
		vide the highest number of ELVs stored at the facility ny one time from January 1 to December 31:	2545					
	• Prov	vide the approximate area used for the storage of vehicles (acres):	20acres					
	• Prov	vide the names of scrap metal processors to which you sold or sent d _iberty Iron & Metal LLC	ecommissioned ELVs:					
	2) <u>E</u>	Ben Weitsman of Jamestown	· · · · · · · · · · · · · · · · · · ·					
	3> _							
<u></u>								
		If your facility has received 25 or fewer ELVs during the year A 50 ELVs at any one time <u>check this box and complete only section</u> If not, leave this box blank. Please, write "Not Applicable" on sections that do not pertain	ns 3, 4, and 11.					
		If your facility has not processed or stored ANY ELVs during complete only section 9. If not, leave this box blank						
		→► Please, write "Not Applicable" on sections that do not perta	in to your facility.					
		IF NEITHER OF THESE DESCRIPTIONS APPLIES TO YOUR FA COMPLETE THE ENTIRE FORM BELOW:	ļ					
	L							

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	(on nearon,		Sold/ Recycled off-site	Disposed off-site*	(Indicate permitted facility or permitted Part 364 transporter accepting waste fluids.)	
Refrigerant (pounds)	10	10	40		Dennison Ent.	
Used Oil** (gallons)	150	131.25	0		burned on site	
Diesel Fuel (gallons)	120	0				
Gasoline (gallons)	1100	25				
Engine Coolant/ Antifreeze (gallons)	16	25	150		individuals in their containers	
Window Washing Fluid (gallons)	8	3	10		iven to employees or custome	
trans. fluid Other (specify)	300 gal	93.75			burned on site	
brake fluid	3 gal	1.5 gal			used on site yard vehicles	

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.

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

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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)	M	Scrap etal essor				
Ferrous Scrap Metal	n/a				Yes	No			
Aluminum Scrap Metal	n/a				Yes	No			
Scrap Metal									
Lead Weights	n/a				Yes	No 🖂			
Non – Ferrous Scrap	n/a				Yes	No			
Metal	Annual control of the state of								
Other (specify);					Yes	No			
					Yes	No			

SECTION 5 - MERCURY SWITCHES COLLECTED

Provide (H&TS	the the number of mercury-containing devices <u>recovered.</u> Inc and antilock brake assemblies (ABS).	cluding but not limited to hood & trunk lighting switches
:	H&TS 10 (Number)	ABS (Number)
Indicati EQ-/	te permitted facility or permitted transporter accepting merci Aus Ecology Co.	ury containing devices:
2000	East Ferry St.	
Detr	roit,Mi. 48211	

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	201	_
Indicate permitted facility or permitted transporter accepting lead-acid bar Lincoln Metals	tteries:	
Erie, Pa		
Any materials disposed must undergo a hazardous waste determination a hazardous.	and proper handling	i, storage and disposal if
SECTION 7 – WASTE TIRES C	OLLECTED	
Number of waste tires stored on-site:	400	as of December 3
Number of used tires available for sale on-site:	220	as of December 3
Number of used tires sold:	340	during operating yea
Number of used tires sold: Number of waste tires shipped off-site for recycling, disposal, other:	340 70 0	
Number of waste tires shipped off-site for recycling, disposal, other: Indicate name of facility(ies) accepting waste tires:		
Number of waste tires shipped off-site for recycling, disposal, other:		
Number of waste tires shipped off-site for recycling, disposal, other: Indicate name of facility(les) accepting waste tires: Liberty Iron and Metal LLC		
Number of waste tires shipped off-site for recycling, disposal, other: ndicate name of facility(les) accepting waste tires: Liberty Iron and Metal LLC Ben Weitsman of Jamestown SECTION 8 – PROBLEM	700	during operating yea
Number of waste tires shipped off-site for recycling, disposal, other: Indicate name of facility(les) accepting waste tires: Liberty Iron and Metal LLC Ben Weitsman of Jamestown	700	during operating year
Number of waste tires shipped off-site for recycling, disposal, other: Indicate name of facility(les) accepting waste tires: Liberty Iron and Metal LLC Ben Weitsman of Jamestown SECTION 8 – PROBLEM Were any problems encountered during the reporting period (e.g., specific	700 AS c occurrences which	during operating year
Number of waste tires shipped off-site for recycling, disposal, other: Indicate name of facility(ies) accepting waste tires: Liberty Iron and Metal LLC Ben Weitsman of Jamestown SECTION 8 – PROBLEM Were any problems encountered during the reporting period (e.g., specififacility procedures)? Yes No If yes, attach additional sheets identifying each problem problem. SECTION 9 – CHANGE	700 AS c occurrences which mand the methods S	for resolution of the
Number of waste tires shipped off-site for recycling, disposal, other: Indicate name of facility(les) accepting waste tires: Liberty Iron and Metal LLC Ben Weitsman of Jamestown SECTION 8 – PROBLEM Were any problems encountered during the reporting period (e.g., specififacility procedures)? Yes No If yes, attach additional sheets identifying each problem.	700 AS c occurrences which mand the methods S	h have led to changes in for resolution of the

SECTION 10 - COMPLIANCE CERTIFICATION

As of December 31, 2017:

						Dafe of Return to
1. Mo	lf y	Waste Management Compliance Checklist our facility stores LESS THAN 1,000 tires, check NA. If your facility stores	n/A ln/a			Compliance
2.	is a	THAN 1,000 tires, do you have a PART 360 permit for tire storage? system in place to control vegetation and prevent it from encroaching onto e access lanes or driveways?	111 / G	Υ		
3.	Ha	ve you recorded the date of receipt for all end-of-life vehicles received?		Υ	1	
4.		the end-of-life vehicle records available on-site?		Υ		
5.	Ha u	ve all end-of-life vehicles been inspected, upon arrival, for leaking fluids and nauthorized wastes?		Υ	<u> </u>	
6.	На	ve all observed leaks been remedied or contained?		Υ		
7.	Do	es your facility have a written Contingency Plan?		Υ		
8.	Аге	facility personnel trained to implement the Contingency Plan?		Y	 -	
9.	Do	es your Contingency Plan include actions to be taken in the event of the following	ng?		<u></u>	
	9a.	Fire.		Y		
	9b.	Spill or release of vehicle waste fluids.		Y		
	9c.	Unauthorized material received at facility.		Y		
	Sp	spills of waste fluids, if any occur, reported to the NYSDEC ills Hotline within two hours of detection?		Y		
	Are pr	all vehicle residues prevented from migrating from or running off your pperty?		Y		
	Iat	ust controlled to prevent interference with facility operations or from leaving cility site?		Y		
	180	vectors (mosquitoes, rats, mice, etc.) controlled to prevent interference with cility operations?		Υ		:
14.	Arei Wa	waste fluids kept from being discharged onto the ground or into surface ters?		Y		
15.	ls a	cess to your facility controlled by: fences, gates, sign and/or natural barriers of vehicles)?		Y		
	15a	Are the access controls working (i.e. controlling access)?	- 	Y		
16.	Аге еа	fluids drained from end-of-life vehicles on a pad constructed of concrete or uivalent material?		Y		
17.	Are	you doing the following with your concrete (or equivalent surface) pad that is us ining, crushing, etc.?	sed for	vehicle	disma	ntling, fluid
		Cleaning daily.		γ.		
•	17b.	Cleaning spills as they occur.		Y		
	17c.	Collecting and properly disposing of absorbent materials.		· Y		
				·		

				Date of Return to
	Waste Management Compliance Checklist	HA II	ia di Wi	Complane.
18. Ha	ve the following wastes been drained, removed, deployed, collected and/or stocking or shredding?			
18	. Fluids (including engine oil, transmission fluid, transaxle fluid, front and rear axle fluid, brake fluid, power steering fluid, coolant, and fuel).	Y		
18t	Lead acid batteries.	Y		
180	Mercury switches or other mercury containing devices, if any.	Y	 	
	Refrigerants, if any.	Y		
	Air bags.	Y		
	PCB capacitors, if any.	Y		· ·
	fluids stored separately & in containers that are compatible with their ntents?	Υ		
	fluids stored in closed containers?	Y		
21. Are	containers which contain waste fluids in good condition and not visibly king?	Y		
22. Аге	containers clearly and legibly labeled to describe their contents?	Y		
23. Are	containers stored on a bermed pad constructed of concrete or equivalent terial?	Y		
24. Are	lead-acid batteries stored upright and off the ground?	Y		
25. Are	lead-acid batteries covered to protect them from cipitation?	Y		
	all lead-acid batteries sent for recycling within one-year of receipt?	Y		
27. Are	leaking lead-acid batteries, if any are encountered, stored in leak-proof tainers separated from intact batteries?	Y		
27	a. Are provisions in place to absorb any acid leakage?	Y	_	
28. Are app	mercury switches and other mercury containing devices stored in ropriate, labeled containers and then sent for recycling?	Υ		
app	PCB capacitors, if any are encountered, removed and stored in ropriate, labeled containers for recycling or disposal?	Υ		
uie	ed oil stored in accordance with local building codes, local fire codes, and NYS Uniform Fire Prevention & Building Code?	Υ		
	nt off-site, is used oil transported via a permitted hauler?	Y		
32. If yo	udo not burn used oil onsite check NA for 32a., 32b., 32c. If you do, then answ	ver 32a., 32	b., 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?	Y		<u>- , , , , , , , , , , , , , , , , , , ,</u>
32b	Do on-site space heaters burn only used oil that is generated on-site or received from household do-it-yourself generators?	Υ		
320	Are combustion gases from used oil space heaters vented to the outside ambient air?	Y		

Waste Management Compliance Cr		NA		No.	Date of Return t Compliance
33. Is waste oil kept from being mixed with brake cleaner, solvents, gasoline, or degreasers?			Y		
34. Are sludges from sumps and oil/water separators stor labeled containers?	ed in covered, closed and		Υ		
35. Are sludges properly recycled or disposed?		1 -	Y	 	
36. Are used oil filters properly drained, crushed or disma	ntled?		Y	 	
37. Are drained oil filters properly recycled or disposed?		1	Y		
 If your facility does not require an SPDES Multi-Sector for Stormwater Discharge, check NA for 38a, 38b, 38 an SPDES MSGP answer 38a, 38b, 38c; 	r General Permit (MSGP) c. If your facility requires		Y		
38a. If required by the SPDES MSGP, has a Stormw. Plan been prepared for this facility?	ater Pollution Prevention		· ′		
38b. Is the information provided in the facility's original Termination submission for the SPDES MSGP st date?	l Notice of Intent or till accurate and up to		· ·		
38c. Has the facility's Annual Certification Report for submitted within the previous year?	the SPDES MSGP been	1	,		
39. If your facility does not handles cleaning solvents, degranon-vehicle wastes write NA. If these materials are handled the maximum amount of this material that your facility genemonth?	d at your facility, what is		_	IA IA	pounds gallons
Do you have any other Environmental Conservation Law (Attach additional sheets as necessary.)	or regulatory violations?	1			
		<u>.</u>			
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 Segtion 210.45 of the Penal Law.

Signature

Signature

Signature

Date

Conserver Pres.

Name (Print or Type)

Parts @ aautomotive Inc. con

Email (Print or Type)

May Ulle

Address

Name (Print or Type)

Physical Research Print or Type)

Physical Research Print or Type

N. Y 14757

State and Zip

Physical Research Print or Type

ATTACHMENTS: YES X NO