MANDATORY ANNUAL REPORT INCLUDING SELF-CERTIFICATION FOR VEHICLE DISMANTLING FACILITIES

(If you need assistance filling out this form please email swmfannuaireport@dec.ny.gov or call 518-402-8678.)

Submit the Annual Report no later than March 1, 2918.

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		. 25. 12. 12. 12. 12. 12. 12. 12. 12. 12. 12	a lund on 70	
FACILITY NAME:						
NUWER AUTO PARTS INC						
FACILITY LOCATION ADDRESS:	FACILITY	CITY:		STAT	E;	ZIP CODE:
7178 VERMONT HILL RD	HOLL	AND		NY		14080
FACILITY TOWN:	FACILITY	COUNTY:	FACIL	_ITY P⊦	IONE	NUMBER:
HOLLAND	ERIE		716	3537	728	300
FACILITY NYS PLANNING UNIT: (A list of NYS Northeast Southtowns Solid Waste Ma			s report).	NYS REG	DEC SION #: 9
NYS DEPARTMENT OF MOTOR VEHICLE REGISTRATION NUMBER: 5151616	Dism	ISTRATION TYPE (Vehicl Iantler, Mobile Crusher, e CLE DISMANTLER		NYS		ACTIVITY
FACILITY CONTACT:	☐ public	CONTACT PHONE	C	ONTA	CTF	AX NUMBER:
DONALD NUWER	🗔 private	NUMBER: 71655372800	7	⁷ 165	37	9182
CONTACT EMAIL ADDRESS: NWERAUTOR	PARTS@GN	//AIL.COM	, l			
	OWNER	INFORMATION				
OWNER NAME:	1	HONE NUMBER:		ER FAX		MBER:
DONALD NUWER	716628		7165	53791		
OWNER ADDRESS: 7178 VERMONT HILL RD	OWNER C			STAT NY		ZIP CODE: 14080
OWNER CONTACT:	,	ONTACT EMAIL ADDRES		AIL.	co	M
	OPERATO	RINFORMATION		SECTION.	1 (1) (1) (1) (1) (1) (1) (1) (1	
OPERATOR NAME: Same as owner			1	⊡ publi ⊡ priva		
		ERENCES				And the state of t
Preferred address to receive correspondence: Climater (provide):	🕮 Facility loc	ation address	□ ov	yner addn	ess	
Preferred email address: Facility Contact Other (provide):	□ ow	mer Contact				
Preferred individual to receive correspondence Other (provide):	e: □Facility	y Contact 🔲 Owner (Contact			
Did you operate in 2017? 🖭 Yes; Complete	this form.					
☐ No; Complete	and submit	Sections 1 and 11.				

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	SECTION 2 - END-OF-LIFE VEHICLES (ELVs)	PROCESSED
• Prov	ride the number of ELVs received from January 1 to December 31:	806
	ide the number of ELVs crushed and/or removed from the facility January 1 to December 31:	678
• Prov	ride the number of ELVs stored at the facility as of December 31:	6124
	ride the highest number of ELVs stored at the facility by one time from January 1 to December 31:	6802
• Prov	ide the approximate area used for the storage of vehicles (acres):	40 acres
	ide the names of scrap metal processors to which you sold or sent of iberty/Diamond Hurwitz Scrap Inc	decommissioned ELVs:
2)	Metalico/Buffalo Shredding	
3) <u>[</u>	LIBERTY IRON	1988
	If your facility has received 25 or fewer ELVs during the year 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 per	tain to your facility.
	If your facility has not processed or stored ANY ELVs durin complete only section 9.	g the year, check this box and
	If not, leave this box blank	
	→► Please, write "Not Applicable" on sections that do not per	tain to your facility.
	IF NEITHER OF THESE DESCRIPTIONS APPLIES TO YOUR F	ACILITY,

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	Volume		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)	40	0	ddd	ddd	
Used Oil** (gallons)	2820	530			
Diesel Fuel (gallons)	86	0			
Gasoline (gallons)	1612	35			
Engine Coolant/ Antifreeze (gallons)	363	15			
Window Washing Fluid (gallons)	67	3	11111111111111111111111111111111111111		
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

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 Metal	3082.15	9.0	3073.15	PA, OH AND NY	Yes	No			
Aluminum Scrap Metal	30.18	1.9	28.28	CANADA	Yes	No L			
Lead Weights	.26	.04	.22	Northeast Southtowns Solid	Yes	2º ∐			
Non – Ferrous Scrap Metal	26.33	1.1	25.23	Northeast Southtowns Solid	Yes	2 0			
Other (specify):					Yes	No			
A A A A A A A A A A A A A A A A A A A					Yes	No			
1									

SECTION 5 -- MERCURY SWITCHES COLLECTED

(H&TS) and antilock brake assemblies (ABS).	covered. Including but not limited to flood & trunk lighting switches
H&TS 4 (Number)	ABS (Number)
Indicate permitted facility or permitted transporter acc EQ-A US ECOLOGY COMPANY	epting mercury containing devices:
2000 EAST FERRY ST	
DETROIT, MI 48211	

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

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SECTION 6 - LEAD-ACID BATTERIES COLLECTED

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1795	
roper handling,	storage and disposal if
ECTED.	
275	as of December 31
97	as of December 31
194	during operating year
2280	during operating year
ars)	
currences which	n have led to changes in
and the methods	for resolution of the
ermit conditions?	>
justification for	each change.
	275 97 194 2280 ars)

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SECTION 10 - COMPLIANCE CERTIFICATION

As of December 31, 2016:

				Date of Return to
Waste Management Compliance Checklist	NΑ	Yes	No	Compliance
If your facility stores LESS THAN 1,000 tires, check NA. If your facility stores ORE THAN 1,000 tires, do you have a PART 360 permit for tire storage?	x			
Is a system in place to control vegetation and prevent it from encroaching onto fire access lanes or driveways?		x		
Have you recorded the date of receipt for all end-of-life vehicles received?		X		
Are the end-of-life vehicle records available on-site?		x		
Have all end-of-life vehicles been inspected, upon arrival, for leaking fluids and unauthorized wastes?	d	x		
Have all observed leaks been remedied or contained?		х		
Does your facility have a written Contingency Plan?		x		
Are facility personnel trained to implement the Contingency Plan?		x		
Does your Contingency Plan include actions to be taken in the event of the fol	llowing?			
9a. Fire.		x		
9b. Spill or release of vehicle waste fluids.		x		
9c. Unauthorized material received at facility.		\mathbf{x}		"
Are spills of waste fluids, if any occur, reported to the NYSDEC Spills Hotline within two hours of detection?		x		
 Are all vehicle residues prevented from migrating from or running off your property? 		X		
Is dust controlled to prevent interference with facility operations or from leavin facility site?	g	x		
Are vectors (mosquitoes, rats, mice, etc.) controlled to prevent interference wifacility operations?	ith	x		
4. Are waste fluids kept from being discharged onto the ground or into surface waters?		х		
5. Is access to your facility controlled by: fences, gates, sign and/or natural barri (not vehicles)?	ers	x		
15a. Are the access controls working (i.e. controlling access)?		x		
Are fluids drained from end-of-life vehicles on a pad constructed of concrete of equivalent material?	or .	x		
7. Are you doing the following with your concrete (or equivalent surface) pad tha draining, crushing, etc.?	t is used fo	or vehic	le dism	antling, fluid
17a, Cleaning daily.		x		
17b. Cleaning spills as they occur.		x		
17c. Collecting and properly disposing of absorbent materials.		x		

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				Date of Return to
Waste Management Compliance Checklist	NA	Yes	No	Compliance
18. Have the following wastes been drained, removed, deployed, collected and/or storo practices, prior to vehicle crushing or shredding?	ed follo	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).		x		
18b. Lead acid batteries.		x		
18c. Mercury switches or other mercury containing devices, if any.		x		
18d. Refrigerants, if any.		X	Ĺ	
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?		x		,
21. Are containers which contain waste fluids in good condition and not visibly leaking?		x		
22. Are containers clearly and legibly labeled to describe their contents?		x		
23. Are containers stored on a bermed pad constructed of concrete or equivalent material?		х		
24. Are lead-acid batteries stored upright and off the ground?		X		
25. Are lead-acid batteries covered to protect them from precipitation?		x		
26. Are all lead-acid batteries sent for recycling within one-year of receipt?		х		
27. Are <u>leaking</u> lead-acid batteries, if any are encountered, stored in leak-proof containers separated from intact batteries?		х		
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?		x		
29. Are PCB capacitors, if any are encountered, removed and stored in appropriate, labeled containers for recycling or disposal?	x			
30. Is used oil stored in accordance with local building codes, local fire codes, and the NYS Uniform Fire Prevention & Building Code?		х		
31. If sent off-site, is used oil transported via a permitted hauler?	x		<u> </u>	
32. If you do not burn used oil onsite check NA for 32a., 32b., 32c. If you do, then ans	wer 32	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?		x		
32b. Do on-site space heaters burn only used oil that is generated on-site or received from household do-it-yourself generators?		x		
32c. Are combustion gases from used oil space heaters vented to the outside ambient air?		x		

	Waste Management Compliance Checklist	NΔ	Yes	No	Date of Return to Compliance
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?		x		
35.	Are sludges properly recycled or disposed?		X		
36.	Are used oil filters properly drained, crushed or dismantled?		X		
37.	Are drained oil filters properly recycled or disposed?		X		<u> </u>
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:	x			
	38a. If required by the SPDES MSGP, has a Stormwater Pollution Prevention Plan been prepared for this facility?	x			
•	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?	x			
noi	If your facility does not handles cleaning solvents, degreasers, battery acids or n-vehicle wastes write NA. If these materials are handled at your facility, what is maximum amount of this material that your facility generates in any calendar		<u> </u>	VA_	pounds
	nth?			NA	gallons

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MMENTS? (Attach addition	al 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 missiemes nor pursuant to Section 210.45 of the Penal Law.

DONALD NUWER

PRESIDENT

Name (Print or Type)

Signature

Title (Print or Type)

NUWERAUTOPARTS@GMAIL.COM

Email (Print or Type)

7178 VERMONT HILL RD

Address

HOLLAND

City

NY 14080

State and Zip

,716 537 **2800**

Phone Number