VEHICLE DISMANTLING FACILITY, MOTOR VEHICLE REPAIR SHOP AND MOBILE VEHICLE

CRUSHER ANNUAL REPORT

SUBMITED BY

Submit the Annual Report no later than March 1, 2019. TABS CONSULTING GROUP

This annual report is for the year of operation from January 01, 2018 to December 31, 2018

SECTION 1 - FACILITY INFORMATION

	FACILITY	INFORMATION				
FACILITY NAME:						
BI-COUNTY AUTO & TRUCK	SALVA	GE CORP				
FACILITY LOCATION ADDRESS:	FACILITY LOCATION ADDRESS: FACILITY CITY: STATE: ZIP CODE:					
1 McADAM STREET	1 McADAM STREET BAY SHORE NY 11706					
FACILITY TOWN: FACILITY COUNTY: FACILITY PHONE NUMBER:						
ISLIP	ISLIP SUFFOLK 631-968-5700					
FACILITY NYS PLANNING UNIT: (A list of NY ISLIP RESOURCE RECOVERY AGENCY	S Planning Un	its can be found at the end of t	his repor		YSDEC EGION #: 1	
FACILITY TYPE: Vehicle Dismantler DMV I.D. # 7036313	☐ Motor	Vehicle Repair Shop		Mobile V	ehicle Crusher	
FACILITY CONTACT: KENNETH HILLMAN SR.	public private	CONTACT PHONE NUMBER: 631-968-5700			FAX NUMBER: 8-6741	
CONTACT EMAIL ADDRESS: BICOUNTY.AI	JTO@AOL.0					
OWNER INFORMATION						
OWNER NAME: OWNER PHONE NUMBER: OWNER FAX NUMBER: 631-968-5700 631-968-6741						
OWNER ADDRESS: 1 McADAM STREET						
OWNER CONTACT: KENNETH HILLMAN SR.	LD 5 10 10 10 10 10 10 10 10 10 10 10 10 10	ONTACT EMAIL ADDRE				
	OPERATO	RINFORMATION				
OPERATOR NAME: same as owner KENNETH HILLMAN SR.				public private		
		ERENCES				
Preferred address to receive correspondence: Facility location address Other (provide): Owner address						
Preferred email address:						
Preferred individual to receive correspondence:						
Did you operate in 2018? Yes; Complete this form.						
☐ No; Complete	and submit s	Sections 1 and 12.				

SECTION 2A VDF/REPAIR SHOPS- END-OF-LIFE VEHICLES	(ELVs) PROCESSED
Provide the number of ELVs received from January 1 to December 31:	1880
Provide the number of ELVs crushed and/or removed from the facility from January 1 to December 31:	1760
Provide the number of ELVs stored at the facility as of December 31:	120
 Provide the highest number of ELVs stored at the facility at any one time from January 1 to December 31: 	150
Provide the approximate area used for the storage of vehicles (acres):	1.50 acres
 Provide the names of scrap metal processors to which you sold or sent dec GERSHOW 	ommissioned ELVs:
"	
³ PASCAP	
BROOKI VN RESOLIBCE RECOVERY	
2)	
BROOKI VN RESOLIBCE RECOVERY	S (ELVs) PROCESSED
BROOKLYN RESOURCE RECOVERY	S (ELVs) PROCESSED
BROOKLYN RESOURCE RECOVERY SECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLES	
BROOKLYN RESOURCE RECOVERY BECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLES Provide the number of ELVs crushed from January 1 to December 3:	
BROOKLYN RESOURCE RECOVERY BECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLES Provide the number of ELVs crushed from January 1 to December 3: Provide the names of each facility where you crushed decommissioned ELV	
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BROOKLYN RESOURCE RECOVERY SECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLES Provide the number of ELVs crushed from January 1 to December 3: Provide the names of each facility where you crushed decommissioned ELV N/A	

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)		20		80	LOCAL REPAIR SHOPS
Used Oil** (gallons)		100	800		DYNOMITE WASTE OIL, FARMINGDALE, NY
Diesel Fuel (gallons)					
Gasoline (gallons)	3741	60			
Engine Coolant/ Antifreeze (gallons)		45		980	DYNOMITE WASTE OIL, FARMINGDALE, NY
Window Washing Fluid (gallons)					
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.

		0, 10 0,	0 10000	Destination			
Material Types	Received (tons)	Stored On Site (tons)	Sent Off Site (tons)	NYS <u>Planning Unit</u> (or state if other than New York)	To Scrap Metal Processor		
Ferrous Scrap Metal	13962		13962	ISLIP RESOURCE RECOVERY AGENCY	☑Yes	□No	
Aluminum Scrap Metal	14167		14167	ISLIP RESOURCE RECOVERY AGENCY	☑Yes	□No	
Lead Weights				ISLIP RESOURCE RECOVERY AGENCY	□Yes	□No	
Non – Ferrous Scrap Metal				ISLIP RESOURCE RECOVERY AGENCY	Yes	□No	
Other (specify):				ISLIP RESOURCE RECOVERY AGENCY	□Yes	□No	
	and the state of t	Account of the Accoun		ISLIP RESOURCE RECOVERY AGENCY	□Yes	□No	
(H&TS) and antiloo	er of mercury-cor ck brake assemb H&TS 2 (Number)	itaining devices <u>rec</u> lies (ABS).	covered. Includir	thes collected ag but not limited to hood & trunk lig ABS 2 (Number) antaining devices:	hting sw	itches	
END OF LIFE		· ·		Sintaining devices.			
PO BOX 32	83						
FARMINGT	ON HILLS,	MI					
		SECTION 6 -	AIR BAGS	COLLECTED			
Provide the number	er of air bags <u>rec</u>	overed.					
Number of Air Bag	s Removed:	0	Num	ber of Air Bags Deployed:	0	_	

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Indicate permitted facility or permitted transporter accepting air bags: VEHICLES GO TO SHREDDER FOR FINAL DISPOSAL

SECTION 7 - 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:	1754					
Indicate permitted facility or permitted transporter accepting lead-acid batteries: NEW CITY RECYCLING, MT VERNON, NY						
NEW CITY RECYCLING, MT VERNON, NY						
NEW CITY RECYCLING, MT VERNON, NY						
Any materials disposed must undergo a hazardous waste determination and prophazardous.	er handling, sto	rage and disposal, if				
SECTION 8 – WASTE TIRES COLLE	CTED					
Number of waste tires stored on-site:	40	as of December 31				
Number of used tires available for sale on-site:	0	as of December 31				
Number of used tires sold:	0	during operating year				
Number of waste tires shipped off-site for recycling, disposal, other:	158760	during operating year				
Indicate name of facility(ies) accepting waste tires: SIGMA RECYCLING INC, NARCOUS, GA						
SIGMA RECYCLING INC, NARCOUS, GA						
SIGMA RECYCLING INC, NARCOUS, GA						
SECTION 9 – SELF INSPECTION						
Number of self-inspections conducted for the year:		4				
Are self-inspection records up-to-date with inspector name, what was inspected, time and date of inspection? Yes \[\] No						
At a minimum, are fluid storage areas, vehicles, vehicle storage areas inspect Yes No	ed for leaks/spil	ls?				
SECTION 10 - PROBLEMS						
Were any problems encountered during the reporting period (e.g., specific occurrences which have led to changes in facility procedures)?						
Yes No If yes, attach additional sheets identifying each problem and the methods for resolution of the problem						
SECTION 11 – CHANGES						
Were there any changes from approved reports, plans, specifications, and permit conditions?						
Yes No If yes, attach additional sheets identifying changes with a just	tification for eac	h change.				

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SECTION 12 - COMPLIANCE CERTIFICATION

As of December 31, 2018:

	Waste Management Compliance Checklist		Yes	No	Date of Return to
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?	1			
2.	Is a system in place to control vegetation and prevent it from encroaching onto fire access lanes or driveways?	V			
3.	Have you recorded the date of receipt for all end-of-life vehicles received?		1		
4.	Are the end-of-life vehicle records available on-site?		1		
5.	Have all end-of-life vehicles been inspected, upon arrival, for leaking fluids and unauthorized wastes?		1		
6.	Have all observed leaks been remedied or contained?		V		
7.	Does your facility have a written Contingency Plan?		1		
8.	Are facility personnel trained to implement the Contingency Plan?		1		
9.	Does your Contingency Plan include actions to be taken in the event of the following	ng?			
	9a. Fire.		V		
	9b. Spill or release of vehicle waste fluids.		1		
	9c. Unauthorized material received at facility.		V		
10.	Are spills of waste fluids, if any occur, reported to the NYSDEC Spills Hotline within two hours of detection?		1		
11.	Are all vehicle residues prevented from migrating from or running off your property?		V		
12.	Is dust controlled to prevent interference with facility operations or from leaving facility site?		V		
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?	To the second	>		
15.	Is access to your facility controlled by: fences, gates, sign and/or natural barriers (not vehicles)?		1		
	15a. Are the access controls working (i.e. controlling access)?		1		
16.	Are fluids drained from end-of-life vehicles on a pad constructed of concrete or equivalent material?		1		
17.	Are you doing the following with your concrete (or equivalent surface) pad that is u draining, crushing, etc.?	sed for	vehicle	dismar	ntling, fluid
	17a. Cleaning daily.		1		
	17b. Cleaning spills as they occur.		✓		
	17c. Collecting and properly disposing of absorbent materials.		1		

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	Control of the Contro				Date of Return to
	Waste Management Compliance Checklist	NA	Yes	No	Compliance
18.	Have the following wastes been drained, removed, deployed, collected and/or store practices, prior to vehicle crushing or shredding?	ed follov	ving bes	st mana	agement
	18a. Fluids (including engine oil, transmission fluid, transaxle fluid, front and rear axle fluid, brake fluid, power steering fluid, coolant, and fuel).		V		
	18b. Lead acid batteries.		1		
	18c. Mercury switches or other mercury containing devices, if any.		1		
	18d. Refrigerants, if any.		1		
	18e. Air bags.	1			
	18f. PCB capacitors, if any.	1			
19.	Are fluids stored separately & in containers that are compatible with their contents?		V		
20.	Are fluids stored in closed containers?		1		
21.	Are containers which contain waste fluids in good condition and not visibly leaking?		1		
22.	Are containers clearly and legibly labeled to describe their contents?		1		
23.	Are containers stored on a bermed pad constructed of concrete or equivalent material?		V		
24.	Are lead-acid batteries stored upright and off the ground?		1		
25.	Are lead-acid batteries covered to protect them from precipitation?		V		
26.	Are all lead-acid batteries sent for recycling within one-year of receipt?		1		
27.	Are <u>leaking</u> lead-acid batteries, if any are encountered, stored in leak-proof containers separated from intact batteries?		1		
	27a. Are provisions in place to absorb any acid leakage?		1		
28.	Are mercury switches and other mercury containing devices stored in appropriate, labeled containers and then sent for recycling?		V		
29.	Are PCB capacitors, if any are encountered, removed and stored in appropriate, labeled containers for recycling or disposal?	1			
30.	Is used oil stored in accordance with local building codes, local fire codes, and the NYS Uniform Fire Prevention & Building Code?		V		
31.	If sent off-site, is used oil transported via a permitted hauler?		1		
32.	If you do not burn used oil onsite check NA for 32a., 32b., 32c. If you do, then answ	ver 32a.	, 32b., s	32c:	
	32a. Is used oil burned in a used on space heating unit, with a maximum capacity of 0.5 million BTU's per hour or less?	V			
	32b. Do on-site space heaters burn only used oil that is generated on-site or received from household do-it-yourself generators?	V			
	32c. Are combustion gases from used oil space heaters vented to the outside ambient air?	V			

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?		V		
34. Are sludges from sumps and oil/water separators stored in covered, closed and labeled containers?	1			
35. Are sludges properly recycled or disposed?	1			
36. Are used oil filters properly drained, crushed or dismantled?		1		
37. Are drained oil filters properly recycled or disposed?		1		
 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?		V		
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?		V		
38c. Has the facility's Annual Certification Report for the SPDES MSGP been submitted within the previous year?		V		
39. If your facility does not handle 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?		0		pounds gallons
Do you have any other Environmental Conservation Law or regulatory violations? (Attach additional sheets as necessary.) NONE				
COMMENTS? (Attach additional sheets if necessary) THIS FACILITY IS NOW OOUT OF BUSINESS. THIS VDF ANNUAL FLUID REPORT SUBMISSION.	IS TH	E FII	NAL	

SECTION 11 - 8 IGNATURE 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 use or penalty of perjury that information provided on this form and attached statements and exhibits was prepared by menor 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.

the authority to sign this report form pursuant to 6 NYCRR Part 3 punishable as a Class A misdemeanor pursuant to Section 210.4	
Jennth / delborgen Pres. Signature	/-3/-/8 Date
Nenneth Hillman Name (Print or Type)	PRES Title (Print or Type)
Bi COUNTY AUTO (1) and, co	
1 Meadam St Address	Barphore
NY11741 State and Zip	(<u>Ø31) 968- 570 0</u> Phone Number
	¥
	7
ATTACHMENTS: YES NO	
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