

February 21, 2020

Anne Haas, Esq.
Office of General Counsel
625 Broadway
Albany, NY 12233-1500

DEC Case No: Co 3-20190723-161

We have just been notified that we are in Violations of Article 27 of the ECL.
Enclosed please see the appropriate paperwork for filing.

This is the first complaint that we received and it states that we were notified at two addresses our business address and our homeowners personal address. If these papers were sent via Certified Mail we had no records of receiving them at either location. This has come as a complete surprise and misunderstanding to us at this time and its our first notice to our knowledge.

Obviously, we have taken immediate action to rectify this situation upon being notified today, Friday, February 21, 2020.

Sincerely,



Margaret Ann Carbone
Vice President
Middletown Carting, LLC.
83-85 Industrial Place Ext.
Middletown, NY 10940
845-343-5477

PERMITTED C&D DEBRIS HANDLING AND RECOVERY FACILITY ANNUAL REPORT

(If you need assistance filling out this form please email swmannualreport@dec.ny.gov or call 518-402-8578.)

Complete and submit this form by March 1, 2019.

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

SECTION 1 – GENERAL INFORMATION

FACILITY INFORMATION

FACILITY NAME: MIDDLETOWN CARTING, LLC			
FACILITY LOCATION ADDRESS: 83-85 INDUSTRIAL PLACE EXT	FACILITY CITY: MIDDLETOWN	STATE: NY	ZIP CODE: 10940
FACILITY TOWN:	FACILITY COUNTY: ORANGE	FACILITY PHONE NUMBER: 845-343-5477	
FACILITY NYS PLANNING UNIT: (A list of NYS Planning Units can be found at the end of this report). ORANGE COUNTY			NYSDEC REGION #: 3
360 PERMIT #: (Refer to DEC Permit) 3-3309-00131/00001	DATE ISSUED: 12/11/2018	DATE EXPIRES: 12/10/2023	NYS DEC ACTIVITY CODE OR REGISTRATION NUMBER: (Refer to DEC Registration) 36-W-17
FACILITY CONTACT: JOHN N. CARBONE	<input type="checkbox"/> public <input checked="" type="checkbox"/> private	CONTACT PHONE NUMBER: 845-343-5477	CONTACT FAX NUMBER: 845-342-9059
CONTACT EMAIL ADDRESS: SALES@MIDDLETOWNCARTING.COM			
OWNER INFORMATION			
OWNER NAME: JOHN N. CARBONE	OWNER PHONE NUMBER: 845-343-5477	OWNER FAX NUMBER: 845-342-9059	
OWNER ADDRESS: 83-85 INDUSTRIAL PLACE EXT	OWNER CITY: MIDDLETOWN	STATE: NY	ZIP CODE: 10940
OWNER CONTACT: SAME	OWNER CONTACT EMAIL ADDRESS: SALES@MIDDLETOWNCARTING.COM		
OPERATOR INFORMATION			
OPERATOR NAME: MIDDLETOWN CARTING, LLC	<input type="checkbox"/> same as owner	<input type="checkbox"/> public <input checked="" type="checkbox"/> private	
PREFERENCES			
Preferred address to receive correspondence: <input checked="" type="checkbox"/> Facility location address		<input type="checkbox"/> Owner address	
<input type="checkbox"/> Other (provide): 83-85 INDUSTRIAL PLACE EXT MIDDLETOWN NY 10940			
Preferred email address: <input checked="" type="checkbox"/> Facility Contact		<input type="checkbox"/> Owner Contact	
<input type="checkbox"/> Other (provide): SALES@MIDDLETOWNCARTING.COM			
Preferred individual to receive correspondence: <input type="checkbox"/> Facility Contact		<input checked="" type="checkbox"/> Owner Contact	
<input type="checkbox"/> Other (provide): JOHN N. CARBONE			

Did you operate in 2018? Yes; Complete this form.
 No; Complete and submit Sections 1 and 11. If you no longer plan to operate and wish to relinquish your permit/registration associated with this solid waste management activity, also complete the "Inactive Solid Waste Management Facility or Activity Notification Form" located at: <http://www.dec.ny.gov/chemical/52706.html>.

SECTION 2 - SOLID WASTE RECEIVED

Please provide the tonnages of waste received. This includes all wastes received at your facility regardless of their destination after processing.
DO NOT REPORT IN CUBIC YARDS!

Specify the methods used to measure the quantities received and the percentages measured by each method:

100 % Scale Weight

_____ % Estimated

_____ % Truck Count

_____ % Other (Specify: _____)

Type of Waste	January (tons)	February (tons)	March (tons)	April (tons)	May (tons)	June (tons)	July (tons)
Asphalt Millings	INCLUDED IN ABCS MATERIALS						
Asphalt Pavement	INCLUDED IN ABCS MATERIALS						
Asphalt Roofing Shingles	INCLUDED IN C&D DEBRIS MATERIALS						
Brick ABCS ?							
Concrete ABCS J	45.37	267.67		74.80	388.32	173.76	34.01
Construction & Demolition (C&D) Debris	1571.33	1859.34	1588.61	2326.00	3031.64	2881.67	2341.58
Gravel							
Gypsum Wallboard	INCLUDED IN C&D DEBRIS MATERIALS						
Limited-Use Fill							
Other Masonry Materials							
Restricted-Use Fill							
Rock / STONE	INCLUDED IN ABCS MATERIALS						
Roofing Paper	INCLUDED IN C&D DEBRIS MATERIALS						
Sand							
Soil							
^{CLEAN Wood} Unadulterated Wood	2.58	0.37	4.58	16.76	6.52	20.04	14.86
Other (specify) METALS	68.37	65.64	165.73	65.86	84.44	88.25	118.09
CARDBOARD				0.40			0.69
STUMPS / BRUSH		0.25	1.97	0.22	54.16	11.78	38.56
N.P.M.S.W.	119.85	96.25	83.04	285.93	553.14	155.41	158.28
Total Tons Received	1807.50	2289.52	1843.93	2769.97	4118.22	3330.91	2706.07

If the solid waste type is not listed, use one of the "Other" lines and fill in the name of the waste. If more "Other" lines are needed, cross out an unused type and fill in the other solid waste name. If still more "Other" lines are needed, attach another copy of this page, cross out an unused type, and fill in the other solid waste name.

SECTION 2 – SOLID WASTE RECEIVED (continued)

Type of Waste	Tip Fee (\$/Ton)	August (tons)	September (tons)	October (tons)	November (tons)	December (tons)	Total Year (tons)	Daily Avg. (tons)
Asphalt Millings		INCLUDED IN ABCS MATERIALS						
Asphalt Pavement		INCLUDED IN ABCS MATERIALS						
Asphalt Roofing Shingles		INCLUDED IN C+D DEBRIS MATERIALS						
Brick ABCS								
Concrete ABCS		51.84	57.41	26.81	41.83	33.33	1195.15	
Construction & Demolition (C&D) Debris		2378.42	1676.23	2351.49	1896.28	1364.63	25,267.22	
Gravel								
Gypsum Wallboard		INCLUDED IN C+D DEBRIS MATERIALS						
Limited-Use Fill								
Other Masonry Materials								
Restricted-Use Fill								
Rock / STONE		INCLUDED IN ABCS MATERIALS						
Roofing Paper		INCLUDED IN C+D DEBRIS MATERIALS						
Sand								
Soil								
^{CLEAN WOOD} Unadulterated Wood		0.20	1.64	5.16	7.65	2.29	82.65	
Other (specify) METALS		85.98	84.23	182.80	69.40	71.01	1149.77	
CARDBOARD		2.02					3.11	
STUMPS / BRUSH		0.46	1.70	14.10	1.84	19.22	144.26	
N.P.M.S.W.		127.04	150.05	216.28	162.44	101.88	2209.59	
Total Tons Received		2645.93	1971.26	2796.64	2179.44	1592.36	30051.75	

If the solid waste type is not listed, use one of the "Other" lines and fill in the name of the waste. If more "Other" lines are needed, cross out an unused type and fill in the other solid waste name. If still more "Other" lines are needed, attach another copy of this page, cross out an unused type, and fill in the other solid waste name.

SECTION 3 – SERVICE AREA OF SOLID WASTE RECEIVED

Please identify where the material is coming from. The total tons received reported below should equal the total tons received in Section 2 (Solid Waste Received). DO NOT REPORT IN CUBIC YARDS!

- If the waste WAS received from another solid waste management facility, please write in the name *and* address of the facility along with the appropriate state, county and planning unit/municipality.
- If the waste WAS NOT received from another solid waste management facility, please write in "Direct Haul" along with the appropriate state, county, and planning unit/municipality where the waste was generated:

Specify transport method, list type of material(s) and percentages of total material transported by each:

100 % Road: Waste Type(s): All MATERIALS % Rail: Waste Type(s): _____
 _____ % Water: Waste Type(s): _____ % Other (specify: _____): Waste Type(s): _____

SERVICE AREA OF SOLID WASTE RECEIVED					
TYPE OF WASTE	SOLID WASTE MANAGEMENT FACILITY FROM WHICH IT WAS RECEIVED (Name & Address) OR "Direct Haul"	SERVICE AREA STATE OR COUNTRY	SERVICE AREA COUNTY OR PROVINCE	NYS PLANNING UNIT (See Attached List of NYS Planning Units)	TONS RECEIVED
ABCS - ASPHALT, BRICK CONCRETE, STONE	DIRECT HAUL	NY	ORANGE	ORANGE CO.	1124.16
	DIRECT HAUL	NY	ROCKLAND	RC SWMA	9.36
	DIRECT HAUL	NY	SULLIVAN	SULLIVAN CO.	61.33
METALS	DIRECT HAUL	NY	ORANGE	ORANGE CO.	1091.17
	DIRECT HAUL	NY	SULLIVAN	SULLIVAN CO.	48.59
	DIRECT HAUL	NY	ULSTER	UCRRA	10.01
CLEAN WOOD	DIRECT HAUL	NY	ORANGE	ORANGE CO.	66.44
WOOD	DIRECT HAUL	NY	SULLIVAN	SULLIVAN CO.	14.40
	DIRECT HAUL	NY	ULSTER	UCRRA	1.81

SERVICE AREA OF SOLID WASTE RECEIVED

TYPE OF WASTE	SOLID WASTE MANAGEMENT FACILITY FROM WHICH IT WAS RECEIVED (Name & Address) OR "Direct Haul"	SERVICE AREA STATE OR COUNTRY	SERVICE AREA COUNTY OR PROVINCE	NYS PLANNING UNIT (See Attached List of NYS Planning Units)	TONS RECEIVED
BRUSH & STUMPS	DIRECT HAUL	NY	ORANGE	ORANGE Co.	105.01
	DIRECT HAUL	NY	SULLIVAN	SULLIVAN Co.	36.63
	DIRECT HAUL	NY	ULSTER	UCRRA	0.37
	DIRECT HAUL	P.A.			2.25
CONSTRUCTION AND DEMOLITION	DIRECT HAUL	NY	BRONX	NEW YORK City	1744.26
	DIRECT HAUL	NY	DELAWARE	DELAWARE Co.	4.57
	DIRECT HAUL	NY	DUTCHESS	DUTCHESS Co.	127.47
DEBRIS MATERIALS	DIRECT HAUL	NY	GREENE	GREENE Co.	2.57
	DIRECT HAUL	NY	NY	NEW YORK City	1.40
	DIRECT HAUL	NY	ORANGE	ORANGE Co.	17406.84
	DIRECT HAUL	NY	PUTNAM	PUTNAM Co.	2.19
	DIRECT HAUL	NY	QUEENS	NEW YORK City	28.66
	DIRECT HAUL	NY	ROCKLAND	RCSWMA	89.89
	DIRECT HAUL	NY	SULLIVAN	SULLIVAN Co.	3867.35
	DIRECT HAUL	NY	ULSTER	UCRRA	1030.73
	DIRECT HAUL	NY	WESTCHESTER	WESTCHESTER Co.	4.86
	DIRECT HAUL	NJ			51.58
	DIRECT HAUL	P.A.			904.85
CARDBOARD	DIRECT HAUL	NY	ORANGE	ORANGE Co.	3.11

SERVICE AREA OF SOLID WASTE RECEIVED (where the waste is coming from)

TYPE OF WASTE	SOLID WASTE MANAGEMENT FACILITY FROM WHICH IT WAS RECEIVED (Name & Address) OR "Direct Haul"	SERVICE AREA STATE OR COUNTRY	SERVICE AREA COUNTY OR PROVINCE	NYS PLANNING UNIT (See Attached List of NYS Planning Units)	TONS RECEIVED
NPM SW Non-	DIRECT HAUL	NY	ALBANY	CAPITAL R SWMP	0.90
	DIRECT HAUL	NY	DELAWARE	DELAWARE Co	3.61
	DIRECT HAUL	NY	DUTCHESS	DUTCHESS Co.	10.62
PUTRESCIBLE MUNICIPAL	DIRECT HAUL	NY	ORANGE	ORANGE Co.	1704.58
	DIRECT HAUL	NY	ROCKLAND	RC SWMA	9.93
	DIRECT HAUL	NY	SULLIVAN	SULLIVAN Co	240.18
SOLID WASTE	DIRECT HAUL	NY	ULSTER	UCRRA	153.99
	DIRECT HAUL	NY	WESTCHESTER	WESTCHESTER	19.26
	DIRECT HAUL	NJ			0.17
	DIRECT HAUL	PA			66.35
TOTAL RECEIVED (tons): 30,051.75					

If the solid waste type is not listed, use one of the "Other" lines and fill in the name of the waste. If more "Other" lines are needed, cross out an unused type and fill in the other solid waste name. If still more "Other" lines are needed, attach another copy of this page, cross out an unused type, and fill in the other solid waste name.

SECTION 4 - TRANSFER OR DISPOSAL DESTINATION

Please identify destination of waste. Please only include waste sent off-site for disposal or further transfer prior to disposal. Exclude Recyclable Material amounts reported in Section 5. DO NOT REPORT IN CUBIC YARDS!

- If the waste is being sent to another facility for transfer or processing prior to disposal (e.g. Transfer station or C&D debris processing facility), please identify name, address, corresponding State/Country, County/Province, and Destination Planning Unit of the transfer destination and the amount of waste transferred in the "Amount to Transfer Destination" column.
- If the waste is being sent to a landfill or combustor, please identify the name, address, corresponding State/Country, County/Province, and Destination Planning Unit of the disposal destination and the amount of waste being sent for disposal in the "Amount to Disposal Destination" column.
- If the waste is being sent to a landfill to be utilized as Alternative Operating Cover (AOC), please identify the name, address, corresponding State/Country, County/Province, and Destination Planning Unit of the landfill and the amount of waste being sent for use as AOC in the "Amount Used as AOC" column.

Specify transport method, list type of material(s) and percentages of total material transported by each:

100% Road: Waste Type(s): ALL MATERIALS % Rail: Waste Type(s): _____
 % Water: Waste Type(s): _____ % Other (specify: _____): Waste Type (s): _____

TRANSFER OR DISPOSAL DESTINATION								
TYPE OF WASTE	SOLID WASTE MANAGEMENT FACILITY TO WHICH IT WAS SENT (Name & Address)	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	NYS PLANNING UNIT (See Attached List of NYS Planning Units)	AMOUNT TO TRANSFER DESTINATION (TONS)	AMOUNT TO DISPOSAL DESTINATION (TONS)	AMOUNT USED AS AOC (TONS)	TOTAL YEAR (TONS)
CONSTRUCTION & DEMOLITION	HAKES PAINTED POST C+D LANDFILL	NY	STEBEN	STEBEN COUNTY		27024.88		
	4376 MANNING RIDGE RD PAINTED POST NY 14870							
C+D DEBRIS	HVLAND ANGELICA 1616 S3 HERDMAN RD ANGELICA, NY 14709	NY	ALLEGANY	ALLEGANY COUNTY		1330.87		
	CHEMUNG Co AREA #3 C+D LANDFILL 203 LAKE ST. ELMIRA, NY 14901							
C+D DEBRIS	HAKES PAINTED POST C+D LANDFILL	NY	STEBEN	STEBEN COUNTY		8.26		
	4376 MANNING RIDGE RD PAINTED POST, NY 14870							
PUTRESCIBLE MUNICIPAL	INTERSTATE WASTE 95 HARTLEY RD GOSHEN, NY 10924	NY	ORANGE	ORANGE COUNTY		49.75		
	ORANGE COUNTY TRANSFER STATION #1 81 TRAINING CENTER LANE NEW HAMPTON NY 10958							
SOLID WASTE		NY	ORANGE	ORANGE COUNTY		175.97		
Other (specify)								
					TOTAL SENT (tons): <u>28619.79</u>			

If the waste type is not listed, use one of the "Other" lines and fill in the name of the material. If more "Other" lines are needed, cross out an unused type and fill in the other waste name. If still more "Other" lines are needed, attached another copy of this page, cross out an unused type, and fill in the other waste name.

SECTION 5 - MATERIAL RECOVERED FOR REUSE/RECYCLING

Please identify destination of recovered materials. Indicate the location of use/name of the destination, address, corresponding State/Country, County/Province, Destination Planning Unit/Municipality and the amount of material recovered. DO NOT REPORT IN CUBIC YARDS!

Specify transport method, list type of material(s) and percentages of total material transported by each:

100 % Road: Material(s): ALL MATERIALS
 % Rail: Material(s): _____
 % Water: Material(s): _____
 % Other (specify: _____): Material(s): _____

MATERIAL RECOVERED FOR REUSE/RECYCLING					
	LOCATION OF USE/DESTINATION (Name & Address)	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	NYS PLANNING UNIT (See Attached List of NYS Planning Units)	TONS RECOVERED (out of facility)
CLEANWOOD	WESSELS FARMS 94 BULL RD OTISVILLE NY 10963	NY	ORANGE	ORANGE CO.	362.30
CLEANWOOD	SUBURBAN EXCAVATING 1632 N.Y. 211 OTISVILLE NY 10963	NY	ORANGE	ORANGE CO.	15.04
STUMPS, LOGS & BRUSH	WESSELS FARMS 94 BULL RD OTISVILLE NY 10963	NY	ORANGE	ORANGE CO.	910.62
STUMPS, LOGS & BRUSH	SUBURBAN EXCAVATING 1632 N.Y. 211 OTISVILLE NY 10963	NY	ORANGE	ORANGE CO.	19.22
METALS	MIDDLETOWN AUTO WRECKERS 83-85 INDUSTRIAL PLACE EXT. MIDDLETOWN, NY 10940	NY	ORANGE	ORANGE CO.	1903.59
ABCS - ASPHALT, BRICK CONCRETE, STONE	E. TETZ & SONS 603 CEMETERY RD MIDDLETOWN, NY 10940	NY	ORANGE	ORANGE CO.	357.18
ABCS	MIDDLETOWN AUTO WRECKERS 83-85 INDUSTRIAL PLACE EXT. MIDDLETOWN NY 10940	NY	ORANGE	ORANGE CO.	479.07
ABCS	MIDDLETOWN CARTING, LLC 83-85 INDUSTRIAL PLACE EXT. MIDDLETOWN NY 10940	NY	ORANGE	ORANGE CO.	28.66
ABCS	MOE'S AUTO PARTS 1071 BLOOMINGBURG RD. BLOOMINGBURG, NY 13721	NY	ORANGE	ORANGE CO.	22.74
ABCS	VIKING LAND CLEARING 190 SHAW RD MIDDLETOWN NY 10940	NY	ORANGE	ORANGE CO.	511.65
TOTAL RECOVERED (tons):					3796.07



PERMIT
Under the Environmental Conservation Law (ECL)

Permittee and Facility Information

Permit Issued To:
MIDDLETOWN CARTING LLC
83-85 INDUSTRIAL PL EXT

MIDDLETOWN, NY 10940

Facility:
MIDDLETOWN CARTING, LLC
83-85 INDUSTRIAL PL - NEAR HIGHLAND
AVE
MIDDLETOWN, NY 10940

Facility Location: in MIDDLETOWN in ORANGE COUNTY
Facility Principal Reference Point: NYTM-E: 549.654 NYTM-N: 4590.6
Latitude: 41°27'55.7" Longitude: 74°24'19.4"

Project Location: 83-85 Industrial Place, Middletown NY 10940

Authorized Activity: The Permittee is authorized to continue to operate a Construction and Demolition Debris (C&D) processing facility and accept C&D, including concrete, brick, wood, and metals, and accept non-putrescible Municipal Solid Waste (MSW), at a maximum combine rate of 500 tons per day, in accordance with the plans and reports referenced in Special Conditions contained in this permit and as further conditioned in this permit.

The facility may receive waste only during the following periods, unless otherwise approved pursuant to Special Condition No.5:

- Monday through Friday: between 7:00 A.M. and 5:00 P.M.
- Saturday: between 7:00 A.M. and 5:00 P.M.

The facility may process waste only during the following periods, unless otherwise approved pursuant to Special Condition No.5:

- Monday through Friday: between 7:00 A.M. and 7:00 P.M.
- Saturday: between 7:00 A.M. and 7:00 P.M.

All receipt, delivery, or other operations are prohibited on all Sundays.

Permit Authorizations

Solid Waste Management - Under Article 27, Title 7

Permit ID 3-3309-00131/00001

Renewal

Effective Date: 12/11/2018

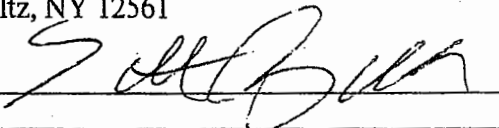
Expiration Date: 12/10/2023



NYSDEC Approval

By acceptance of this permit, the permittee agrees that the permit is contingent upon strict compliance with the ECL, all applicable regulations, and all conditions included as part of this permit.

Permit Administrator: SCOTT BALLARD, Deputy Regional Permit Administrator
Address: NYSDEC Region 3 Headquarters
21 S Putt Corners Rd
New Paltz, NY 12561

Authorized Signature: 

Date 12/11/15

Distribution List

Mayor, City of Middletown
T. DePuy, PE
M. Fogel, Esq.
D. Pollock/L. Lin, DMM

Permit Components

SOLID WASTE MANAGEMENT PERMIT CONDITIONS

GENERAL CONDITIONS, APPLY TO ALL AUTHORIZED PERMITS

NOTIFICATION OF OTHER PERMITTEE OBLIGATIONS



SOLID WASTE MANAGEMENT PERMIT CONDITIONS

1. Conformance With Plans All activities authorized by this permit must be in strict conformance with the permit application, plans and materials prepared by T. M. DePuy Engineering, PC, on August 16, 2018, including:

- A. Drawing Nos. SP1, SP2, SP3, SP4.1, SP4.2 & SP5 through SP13 (14 sheets).
- B. Engineering Report (17 p. w/ appendices).
- C. O&M Manual (42 p. w/ appendices).

2. PERMIT COMPLIANCE

Part 360: The facility must operate in conformance and compliance with 6 NYCRR Part 360 series Solid Waste Management Facilities Regulations or any revisions hereafter promulgated and any State law, rule, code, or regulation; and, the special and general conditions of this permit.

Failure of the permittee to meet any of the terms and conditions of this permit is a violation of Part 360 and may subject the permittee to enforcement action.

3. Compliance Initial issuance or renewal of this permit shall not be construed as a determination by the Department that the facility is in compliance with applicable regulations or with the permit conditions. That determination will be made by the Department by means of periodic facility inspections and compliance audits.

4. SPDES Stormwater Prior to commencement of construction activity involving soil disturbance of one or more acres, the owner/operator must prepare a SWPPP in accordance with the SPDES General Permit for Stormwater Discharges from Construction Activity and submit a Notice of Intent to obtain coverage under that permit. Prior to operation of the facility, the owner operator must submit a Notice of Intent to obtain coverage under the MSGP for Stormwater Discharges from Industrial Activity and prepare a SWPPP in accordance with the requirements of that permit.

Please note that Permit Modification #1 (which includes surface pavement change) may also require changes to the MSGP Permit. Permittee is responsible to seek approval from other Agency or Division applicable to the Permit Modification.

AUTHORIZED WASTE and OPERATIONS

5. Acceptable Wastes The facility shall accept only Construction and Demolition Debris (C&D), as defined by 6 NYCRR Part 360, and non-putrescible MSW. The permittee may sort the following from incoming C&D debris: concrete, brick, wood, and metals provided storage areas are maintained in accordance with approved Engineering, Operations & Maintenance, and Contingency manuals.

The facility is prohibited from accepting asbestos waste as defined in 360.2(b)(117). However, C&D debris which contains minor amounts of non-friable asbestos and which is not categorized as asbestos waste by Part 360, may be accepted but may not be pulverized, shredded, ground, or handled in any manner that causes the material to become airborne or friable.



6. Tonnage Limits The permittee is authorized to accept Construction and Demolition Debris (C&D) and non-putrescible MSW at a maximum combine rate of 500 TONS per DAY.

If Middletown Carting sees a demand to process additional tonnage, the permittee may make a request in writing to the Department's Regional Materials Management Engineer (RMME) or his designee to lengthen their PROCESSING hours until 10 P.M. to process C&D debris and non-putrescible MSW at a maximum combine rate of 700 TONS per DAY. Middletown Carting may not increase operating hours and tonnage limits without written approval from the Department.

Prior to operation of the rail siding and rail transfer activities, the permittee must demonstrate to and receive written approval from the Department that it has the necessary equipment and rail service commitment to process and remove up to a maximum of 1400 tons per day.

7. Unacceptable Wastes The permittee is prohibited from accepting putrescible municipal solid waste, commercial waste, institutional waste, hazardous waste; liquid waste; sewage sludge or septage; chemical or explosive waste; or industrial wastes as defined in 6 NYCRR 360 and/or Part 371; infectious or medical wastes as defined in Public Health Law 1389-aa and Environmental Conservation Law Article 27 Section 1501; waste tires in bulk; yard wastes; or asbestos waste; unless authorized in writing by the RMME.

If the permittee wishes to accept non-hazardous industrial waste in the future, the permittee shall request for approval from the Department for each source of non-hazardous industrial waste. The permittee must characterize the waste to determine if it is consistent with the non-putrescible MSW and/or C&D debris also authorized at the site, and that it is non-hazardous.

The characterization shall be documented and signed by the facility manager or other person of authority designated by the permittee. At a minimum, the documentation shall include the source, waste type, MSDS (if available), TCLP data or other non-hazardous waste determination, demonstration that the waste is a consistent waste type, and the name and permit number of the Part 364 hauler who will remove it. Documentation shall be updated as needed and copies provided to the Department.

8. Operating Hours The facility may RECEIVE waste only during the following periods unless otherwise approved pursuant to special condition #5:

MONDAY through FRIDAY: between 7:00 A.M. and 5:00 P.M.

SATURDAY: between 7:00 A.M. and 5:00 P.M.

The facility may PROCESS waste only during the following periods unless otherwise approved pursuant to special condition #4:

MONDAY through FRIDAY: between 7:00 A.M. and 7:00 P.M.

SATURDAY: between 7:00 A.M. and 7:00 P.M.

All receipt, delivery, or other operations are prohibited on all Sundays.



The facility shall not operate on the following New York State Holidays: New Years Day, Memorial Day, Independence Day (4th of July), Labor Day, Thanksgiving, and Christmas, unless otherwise authorized by the Department.

Processing shall occur inside the building only, to remove the waste from the tipping floor, to process material, and to load material into containers or trucks.

Fully loaded trailers may be picked up at the facility for shipment off-site before and after the operational hours listed above, provided no other solid waste handling activity takes place at the facility and that a log of such activities is maintained and submitted with the annual report. The trailers must be weighed, and this tonnage must be included in the daily tonnage limits and recordkeeping requirements for the facility.

9. Ultimate Disposal of Waste All solid waste passing through the facility must be ultimately treated or disposed of at a facility authorized by the Department if located in New York State, or by the appropriate governmental agency or agencies if in other states, territories, or nations.

10. Comprehensive Recycling Analysis The permittee shall only accept solid waste generated by sources located within municipalities or planning units which are included in a comprehensive recycling analysis (CRA) which has been approved by the Department pursuant to 6 NYCRR part 360.11 and which have implemented the recyclables recovery program determined to be feasible by the analysis.

WASTE ACCEPTANCE and HANDLING

11. Control Program Pursuant to 360.19(c), a control program, which must include an employee training program, must be instituted to recognize and properly handle unauthorized waste brought to the facility. An employee who has been trained in accordance with the Department approved training program must be present as loads of incoming waste are discharged onto the tipping floor or processing pad to inspect each load for unauthorized waste.

Unauthorized waste received at the facility shall be removed from the facility within 24 hours of receipt. The Department must be notified of each incident as specified elsewhere in this permit, and in the annual report. Records of each incident shall be maintained pursuant to Part 360.19(k) and made available for Department review at the facility. At a minimum, the records of the incident shall contain the date the waste was received, the type of waste received, the date of disposal, the disposal method, and the location of disposal. Any unauthorized waste accepted at the facility must be managed in accordance with applicable Federal or State laws and regulations.

12. Vehicles All loaded incoming and outgoing vehicles must be appropriately covered, enclosed, or otherwise secured, so as to prevent dust and blowing litter. The permittee shall deny entry to any vehicle that does not comply with this condition.

Outbound loaded vehicles may be stored outside during and after operating hours provided leachate is collected from the vehicles and the vehicles remained covered. All loaded vehicles must be removed no later than the close of the next business day.

Any scrap vehicle(s) weighted in using the scale at this facility shall be removed from the site immediately. No scrap vehicle shall be stored onsite.

SECTION 6 – UNAUTHORIZED SOLID WASTE

Has unauthorized solid waste been received at the facility during the reporting period?

Yes No If yes, give information below for each incident (attach additional sheets if necessary):

Date Received	Type Received	Date Disposed	Disposal Method & Location
<i>SEE ATTACHED INCIDENT REPORT NARRATIVE</i>			

SECTION 7 - COST ESTIMATES AND FINANCIAL ASSURANCE DOCUMENTS

Are there required cost estimates and financial assurance documents for closure?

Yes No If yes, attach additional sheets reflecting annual adjustments for inflation and any changes to the Closure Plan? *SEE ATTACHED LETTER FROM ENGINEER*

SECTION 8 – 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 9 – CHANGES

Were there any changes from approved reports, plans, specifications, and permit conditions?

Yes No If yes, attach additional sheets identifying changes with a justification for each change. *PERMIT RENEWAL RECEIVED 12/11/2018
SEE ATTACHED COPY*

SECTION 10 - PERMIT/CONSENT ORDER REPORTING REQUIREMENTS

Are there any additional permit/consent order reporting requirements not covered by the previous sections of this form?

Yes No If yes, attach additional sheets identifying the reporting requirements with their respective responses.

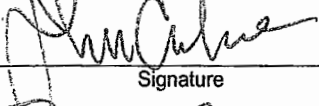
SECTION 11 - SIGNATURE AND DATE BY OWNER OR OPERATOR

Owner or Operator must sign, date and submit one completed form to the appropriate Regional Office (See attachment for Regional Office addresses, email addresses and Materials Management Contacts).

The Owner or Operator must also submit one copy by email, fax or mail to:

**New York State Department of Environmental Conservation
Division of Materials Management
Bureau of Solid Waste Management
625 Broadway
Albany, New York 12233-7260
Fax 518-402-9041
Email address: SWMFannualreport@dec.ny.gov**

I certify, under penalty of law, that the data and other information identified in this report have been prepared under my direction and supervision in compliance with a system designed to ensure that qualified personnel properly and accurately gather and evaluate this information. I am aware that any false statement I make in such report is punishable pursuant to section 71-2703(2) of the Environmental Conservation Law and section 210.45 of the Penal Law.

 2/26/19
Signature Date

JOHN N. CARBONE OWNER
Name (Print or Type) Title (Print or Type)

SALES@MIDDLETOWNCARTING.COM
Email (Print or Type)

83-85 INDUSTRIAL PLACE E MIDDLETOWN
Address City

NY 10940 845 343-5477
State and Zip Phone Number

ATTACHMENTS: YES NO
(Please check appropriate line)

