VEHICLE DISMANTLING FACILITY, MOTOR VEHICLE REPAIR SHOP AND MOBILE VEHICLE CRUSHER ANNUAL REPORT

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

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

SECTION	FACILITY INFORMATION	
FACILAY NAME:		2 10 1 10 10 10 10 10 10 10 10 10 10 10 1
Country Auto Rec	yching System	
FACILITY LOCATION ADDRESS:	FACILITY CITY:	STATE: ZIP CODE:
311 W. Lbur Alen	FACILITY COUNTY:	NY 12834
FACILITY TOWN:		FACILITY PHONE NUMBER:
Easton.	Washington	518-196-0416
FACILITY NYS PLANNING UNIT: (A list of NYS	S Planning Units can be found at the end of the	nis report). NYSDEC REGION #:
FACILITY TYPE: Vehicle Dismantler	Motor Vehicle Repair Shop	Mobile Vehicle Crusher
DMV I.D. # 10 2 3 349		E MODILE TELLOCO
FACILITY CONTACT:	public CONTACT PHONE	CONTACT FAX NUMBER:
Ronald K. MacNeil		16 Non.
CONTACT EMAIL ADDRESS: Nova .		
	OWNER INFORMATION 1	Committee of the particular particular states
Tonald K. Mac Neil	OWNER PHONE NUMBER: 518-796-0416	OWNER FAX NUMBER:
OWNER ADDRESS: 311 W. Lbur Arenus	OWNER CITY:	STATE: ZIP CODE:
	OWNER CONTACT EMAIL ADDRE	SS:
Konald K. MacNail	None.	
	CRERATOR INFORMATION:	
OPERATOR NAME: Same as owner		☐public ☐private
	PREFERENCES	
Preferred address to receive correspondence. Other (provide):	Facility location address	Owner address
Preferred email address: Facility Contact Other (provide):	Owner Contact	7l
Preferred individual to receive correspondenc Other (provide):	e: Facility Contact X Owner	Contact
Did you operate in 2018? (Yes; Complet	e this form.	
☐ No; Complete	and submit Sections 1 and 12.	

Provide the number of ELVe received from Level 4		32	
 Provide the number of ELVs received from January 1 to December 33 	<u> </u>	<u></u>	
 Provide the number of ELVs crushed and/or removed from the facility from January 1 to December 31: 		1	
 Provide the number of ELVs stored at the facility as of December 31: 	2	392	
 Provide the highest number of ELVs stored at the facility at any one time from January 1 to December 31; 	2	39 2	
Provide the approximate area used for the storage of vehicles (acres	: 2	12	acres
Provide the names of scrap metal processors to which you sold or se	nt decommissio	ned ELVs:	
1) Rensselear Fron & Steel			
	- 1 G	1100	~ S
2) I have not crushed in the 1	est 7	gen	, <u> </u>
3)	·		
3)	·		
) BBOCE	egen
	CLES (ELVs) PROCE	SSED
ECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHIC	•	PROCE	SSED
ECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHIC	•	PROCE	SSED
ECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHIOR Provide the number of ELVs crushed from January 1 to December 3: Provide the names of each facility where you crushed decommissioned	· · · · · · · · · · · · · · · · · · ·	PROCE	SSED
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Provide the number of ELVs crushed from January 1 to December 3: Provide the names of each facility where you crushed decommissione	· · · · · · · · · · · · · · · · · · ·	PROCE	SSED
ECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHIOR Provide the number of ELVs crushed from January 1 to December 3:	· · · · · · · · · · · · · · · · · · ·	PROCE	SSED
Provide the number of ELVs crushed from January 1 to December 3: Provide the names of each facility where you crushed decommissione (1)	· · · · · · · · · · · · · · · · · · ·	PROCE	SSED
Provide the number of ELVs crushed from January 1 to December 3: Provide the names of each facility where you crushed decommissione (1)	· · · · · · · · · · · · · · · · · · ·	PROCE	SSED
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Provide the number of ELVs crushed from January 1 to December 3: Provide the names of each facility where you crushed decommissione (1)	· · · · · · · · · · · · · · · · · · ·	PROCE	SSED

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)	0	0	O	0						
Used Oil** (gallons)	O	0	O	0						
Diesel Fuel (gallons)	0	0	0	0						
Gasoline (gallons)	O	C	J	O						
Engine Coolant/ Antifreeze (gallons)	O	C	0	0						
Window Washing Fluid (gallons)	O	0	0	0						
Other (specify)	٥	Ò	0	0						

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. Destination Received Stored On Site Sent Off Site **Material Types** (tons) (tons) (tons) To Scrap NYS Planning Unit (or state if Metal other than New York) Processor Ferrous Scrap ⊌No Yes OMetal Ó Aluminum **⊒**Mo Yes ß Scrap Metal Lead Weights No Yes 0 ()Non - Ferrous Mo Yes 9 Scrap Metai C) O**⊡**Ko Other (specify): Yes ()()Yes No **SECTION 5 - MERCURY SWITCHES COLLECTED** Provide the number of mercury-containing devices recovered. Including but not limited to hood & trunk lighting switches (H&TS) and antilock brake assemblies (ABS). H&TS ABS (Number) (Number) Indicate permitted facility or permitted transporter accepting mercury containing devices: **SECTION 6 – AIR BAGS COLLECTED** Provide the number of air bags recovered. Number of Air Bags Removed: Number of Air Bags Deployed: O^{-1} indicate permitted facility or permitted transporter accepting air bags:

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SECTION 7 - LEAD-ACID BATTERIES COLLECTED

Provide the number of lead-acid batteries recovered and their disposition.	
Number of Lead-Acid Batteries collected from ELVs:	<u>//</u>
Indicate permitted facility or permitted transporter accepting lead-acid batteries: Advance functions for the facility or permitted transporter accepting lead-acid batteries:	
Any materials disposed must undergo a hazardous waste determination and proper hazardous.	andling, storage and disposal, if
SECTION 8 - WASTE TIRES COLLECTE	ED
Number of waste tires stored on-site: Approx Number of used tires available for sale on-site:	as of December 31
Number of used tires available for sale on-site:	as of December 31
Number of used tires sold:	0 during operating year
Number of waste tires shipped off-site for recycling, disposal, other:	during operating year
Indicate name of facility(ies) accepting waste tires:	
	. :
SECTION 9 - SELF INSPECTIONS	
Number of self-inspections conducted for the year:	
Are self-inspection records up-to-date with inspector name, what was inspected, till Yes No	me and date of inspection?
At a minimum, are fluid storage areas, vehicles, vehicle storage areas inspected for Yes No	or leaks/spills?
SECTION 10 - PROBLEMS	
Were any problems encountered during the reporting period (e.g., specific occurrer facility procedures)?	nces which have led to changes in
Yes No If yes, attach additional sheets identifying each problem and the m	nethods for resolution of the problem
SECTION 11 - CHANGES	
Were there any changes from approved reports, plans, specifications, and permit of	conditions?
Yes No If yes, attach additional sheets identifying changes with a justifica	tion for each change.

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SECTION 12 - COMPLIANCE CERTIFICATION

As of December 31, 2018:

	e e e e e e e e e e e e e e e e e e e	is and the district	e printer successive de	
				Date of Return to
Waste Management Compliance Checklist	NA	Yes	No	Compliance
1. If your facility stores LESS THAN 1,000 tires, check NA. If your facility stores MORE THAN 1,000 tires, do you have a PART 360 permit for tire storage?	Ø			
Is a system in place to control vegetation and prevent it from encroaching onto fire access lanes or driveways?		W		
3. Have you recorded the date of receipt for all end-of-life vehicles received?		V		and the sign of the state of th
Are the end-of-life vehicle records available on-site?				
Have all end-of-life vehicles been inspected, upon arrival, for leaking fluids and unauthorized wastes?		M		
6. Have all observed leaks been remedied or contained?				
7. Does your facility have a written Contingency Plan?		团		
8. Are facility personnel trained to implement the Contingency Plan?	9			
9. Does your Contingency Plan include actions to be taken in the event of the following	ng?			
9a. Fire.		P		
9b. Spill or release of vehicle waste fluids.		回		
9c. Unauthorized material received at facility.		回		
10. Are spills of waste fluids, if any occur, reported to the NYSDEC Spills Hotline within two hours of detection?		17		
11. Are all vehicle residues prevented from migrating from or running off your property?		U		
12. Is dust controlled to prevent interference with facility operations or from leaving facility site?		Image: second content of the seco		
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?		Image: Control of the con		
15. Is access to your facility controlled by: fences, gates, sign and/or natural barriers (not vehicles)?		Image: Control of the con		
15a. Are the access controls working (i.e. controlling access)?				
16. Are fluids drained from end-of-life vehicles on a pad constructed of concrete or equivalent material?		[]		
17. Are you doing the following with your concrete (or equivalent surface) pad that is u draining, crushing, etc.?	sed for	vehicle	disma	ntling, fluid
17a. Cleaning daily.		W		
17b. Cleaning spills as they occur.				
17c. Collecting and properly disposing of absorbent materials.		V		

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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 sto practices, prior to vehicle crushing or shredding?	red follov	ving be:	st mana	gement
18a. Fluids (including engine oil, transmission fluid, transaxle fluid, front and rear axle fluid, brake fluid, power steering fluid, coolant, and fuel).				
18b. Lead acid batteries.		14		
18c. Mercury switches or other mercury containing devices, if any.	V			
18d. Refrigerants, if any.		. 🗸		
18e. Air bags.	V			
18f. PCB capacitors, if any.				
19. Are fluids stored separately & in containers that are compatible with their contents?				
20. Are fluids stored in closed containers?		1		
21. Are containers which contain waste fluids in good condition and not visibly leaking?	Stratus is	回		
22. Are containers clearly and legibly labeled to describe their contents?		回		
23. Are containers stored on a bermed pad constructed of concrete or equivalent material?		D		
24. Are lead-acid batteries stored upright and off the ground?		14		
25. Are lead-acid batteries covered to protect them from precipitation?		旦		
26. Are all lead-acid batteries sent for recycling within one-year of receipt?		Image: second content of the content		
27. Are <u>leaking</u> lead-acid batteries, if any are encountered, stored in leak-proof containers separated from intact batteries?		回		
27a. Are provisions in place to absorb any acid leakage?		14		
28. Are mercury switches and other mercury containing devices stored in appropriate, labeled containers and then sent for recycling?				
29. Are PCB capacitors, if any are encountered, removed and stored in appropriate, labeled containers for recycling or disposal?	回回		Ţ	
30. Is used oil stored in accordance with local building codes, local fire codes, and the NYS Uniform Fire Prevention & Building Code?		回		<u> </u>
31. If sent off-site, is used oil transported via a permitted hauler?		I I		
32. If you do not burn used oil onsite check NA for 32a., 32b., 32c. If you do, then ans	swer 32a	, 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?				
32b. Do on-site space heaters burn only used oil that is generated on-site or received from household do-it-yourself generators?				
32c. Are combustion gases from used oil space heaters vented to the outside				

				Date of Return to
\Alm-4- AA		V		
Waste Management Compliance Checklist	NA	Yes	No	Compliance
33. Is waste oil kept from being mixed with brake cleaner, carb cleaner, antifreeze, solvents, gasoline, or degreasers?		回		
34. Are sludges from sumps and oil/water separators stored in covered, closed and labeled containers?		日		·
35. Are sludges properly recycled or disposed?		4		
36. Are used oil filters properly drained, crushed or dismantled?		17		
37. Are drained oil filters properly recycled or disposed?		14		·
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?	P			
38c. Has the facility's Annual Certification Report for the SPDES MSGP been submitted within the previous year?	P			
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				pounds
month?		_		gallons
Do you have any other Environmental Conservation Law or regulatory violations?				
(Attach additional sheets as necessary.)				
COMMENTS? (Attach additional sheets if necessary)				

SECTION 12 - 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.

Signature

Date

Title (Print or Type)

Email (Print or Type)

Title (Print or Type)

Address

City

ATTACHMENTS: Tyes No