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 1 - FACILITY INFORMATION						
- 4 4 6 6		FACILITY INFORMATION	N /			
FACILITY NAME:	uto Crushi	ng Facili	ty 70	57808		
FACILITY LOCATI	ON ADDRESS:	FACILITY CITY:		STATE: ZIP CODE	E:	
253 C	old Spring RV	Keeser. 11		N.Y. 129	49	
FACILITY TOWN:	·	FACILITY COUNTY:	FACI	LITY PHONE NUMBER	1	
HUSAD	ا ا	Clinton	51	854 55	0	
		Planning Units can be found at	the end of this repo	rti. NYSDEC	A TABLE TO	
	\			REGION #:		
FACILITY TYPE:	Vehicle Dismantier	☐ Motor Vehicle Repair	Shop 🔲	Mobile Vehicle Crush	ner	
DMV LD. # 70	57895				1,	
FACILITY CONTA	CT:	Thublic CONTACT PH	IONE	CONTACT FAX NUMB	EK:	
John	,	Private NUMBER: 5	18 5695741	5188341	35/0	
	ADDRESS:					
		OWNER INFORMATION		A STATE OF THE STA		
OWNER NAME:		OWNER PHONE NUMBE	R: OWN	ER FAX NUMBER	- / 4	
John D	Dnith	518 569	5 750 5	13 834 45	10	
OWNER ADDRES	s: Lake Ra	OWNER CITY: FORT	45	STATE: ZIP CODE	The second	
OWNER CONTAC	r:	OWNER CONTACT EMA	il address:			
S July S , And Sec. And Sec.		414		Marie de la Citata (de Calai de Marie		
		OPERATOR INFORMATIC	· · · · · · · · · · · · · · · · · · ·	Avel		
OPERATOR NAME	: Same as owner		; ·	iii public iii private		
		PREFERENCES				
Duillamed address !	o receive correspondence:	Facility location address	Jan	wner eddress	The state of the s	
Preferred email add	dress: Facility Contact	Owner Contact	4 4	AND ONE	The second of th	
Coher (on vide):	to requive correspondence	Facility Contact	Owner Contact	5 2019	The second secon	
				S A STATE OF THE S	. v 2000 mm² () . v? { } t	
Did you operate in	2018? 🎉 Yes; Complete	this form.		TMENT	60	
	☐ No; Complete	and submit Sections 1 and	12.)	

SECTION 2A VDF/REPAIR SHCP3- END-OF-LIFE VEHICLES (ELVs) PROCESSED Provide the number of ELVs crushed profer renovation the facility from January 1 to December 31: Provide the number of ELVs stored at the facility at all December 31: Provide the highest number of ELVs stored at the facility at all provide the highest number of ELVs stored at the facility at all any one time from January 1 to December 31: Provide the approximate area used for the storage of vehicles (acres): Provide the names of set ap metal processors to which you sold or small decommissioned ELVs. Section 2B Mobile CRUSHERS - END-OF-LIFE VEHICLES (ELVs) PROCESSED Provide the names of each facility where you crushed decommissioned ELVs: Provide the names of each facility where you crushed decommissioned ELVs: 3) 4)	·	
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SECTION 3 - WASTE FLUIDS RECOVERED

Complete this table by reporting volumes of End-of-Life Vehicle (ELV) waste fluids managed at the incility during the operations (no general carrepair, etc.).

t describer between a 10 water statement describe harden		Fluid Volume				Dastination hame & Adding		
histoFood recovered	Used on-site (oil heater, etc.)	Stored on-site at year-end	Sold/ Recycled off-site	Disposed off-site	(Indicate parmits permitted Part 16 eccepting year	63 facility or		
Nonigerant (sounds)	0			angles have naverseen assessment being demographen				
Used Oil** gallons)	0							
Plesel Fue!	0	e initial inter-state a migration of the electrical		. तत्त्वपत्त्वत्वत्वत्वत्वत्वत्वत्वत्वत्वत्वत्वत्	Mission de la	and supplies a man annual series and series of 20.		
Mercento Mercento	10				and the second s			
ingine Poplent	0			The State of	The Control of the Co			
Prailing Villaghing	0							
Hat (Secily)	Common or approximation and proximation and pr							
NE	Cors	2/0	Tente	101	Refin	9/01		

Any fluids disposed must undergo a hazardous waste determination and proper handling, storage, and disposal, it hastardous.

Includes Engine Off, Transmission Fluid, Axie 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.

Material Types	Received (tons)	Stored On Site (tons)	Sent Off Site (tons)	Destination			
				NYS <u>Planning Unit</u> (or state if other than New York)		Scrap etal essor	
Ferrous Scrap Metal	100 TNS	0	100 TNS	Sims Albany	Yes	□No	
Aluminum Scrap Metal	0				□Yes	□No	
Lead Weights	0				□Yes	□No	
Non – Ferrous Scrap Metal	0				Yes	□No	
Other (specify):					□Yes	□No	
		;			□Yes	□No	
(H&TS) and antiloo	k brake assemblie H&TS (Number)	es (ABS).		g but not limited to hood & trunk li ABS	-	itches	
Provide the numbe Number of Air Bage ndicate permitted f	s Removed:	0	_ Numi	OLLECTED Der of Air Bags Deployed:		_	

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.

(2) of the Environmental Conservation Law a	nd section 210.45 of the Penal Law.
John Smith Signature	6-29-2019 Date
Name (Print or Type)	John's Aut Crush Title (Print or Type)
Email (Pr	int or Type)
Address	City
State and Zip	() Phone Number

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ATTACHMENTS:	VEC	NC
ATTACHMENTS.	 1 5	 INC