

315 322-1100
315 322-4953
FAX 315 322-4953

THANKS
MAYBE TALKED

I THINK THERE IS SOME OTHER FIRM THAT
PLEASE LET ME KNOW THAT YOU NEED
DID NOT

I SHOULD HAVE TRIED THE ALBANY
JOURNAL. MAKING BUSINESS HAS BUT I

ON MARCH 2.
SO I FAXED IT TO THE LUTHERAN OFFICE
MACHINE AT ALBANY WOULD NOT ACCEPT IT
IT WAS AT 100 AM AND THE FAX

THIS WAS SENT TO LUTHERAN
OFFICE

Date	Time	Type	Station ID	Duration	Pages	Result
Mar 2	12:23AM	Fax Sent	1315/852242	4:40	9	OK
		Digital Fax		N/A		

Last Transaction

Mar 02 2019 12:28AM

Fax Log for

HP Officejet Pro 8620 Series

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

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

Complete this annual report no later than March 31, 2019.

SECTION 1 - FACILITY INFORMATION

FACILITY NAME: Wayne's used cars	
FACILITY LOCATION ADDRESS: 2500 St. Hwy. 310	
FACILITY CITY: madrid	FACILITY STATE: ny
FACILITY ZIP CODE: 13660	FACILITY PHONE NUMBER: 3153221100
FACILITY TOWN: madrid	
FACILITY COUNTY: St. law	
FACILITY NYS PLANNING UNIT: (A list of NYS Planning Units can be found at the end of this report).	
NYSDEC REGION #: 6	FACILITY DMV I.D. # 7023803
FACILITY TYPE: <input type="checkbox"/> Vehicle Dismantler <input checked="" type="checkbox"/> Motor Vehicle Repair Shop <input type="checkbox"/> Mobile Vehicle Crusher	
FACILITY CONTACT: Wayne Tailon	CONTACT PHONE NUMBER: 3153221100
<input type="checkbox"/> public <input checked="" type="checkbox"/> private	CONTACT FAX NUMBER: 3153224950
CONTACT EMAIL ADDRESS: wtailon55@yahoo.com	
OWNER INFORMATION	
OWNER NAME: Wayne Tailon	OWNER PHONE NUMBER: 3153221100
OWNER ADDRESS: 126 Elliott rd	OWNER CITY: madrid
OWNER STATE: ny	OWNER ZIP CODE: 13660
OWNER CONTACT EMAIL ADDRESS: wtailon55@yahoo.com	OWNER FAX NUMBER: 3153224950
OPERATOR INFORMATION	
OPERATOR NAME: <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	
Preferred email address: <input type="checkbox"/> Facility Contact <input checked="" type="checkbox"/> Owner Contact	
Preferred individual to receive correspondence: <input type="checkbox"/> Facility Contact <input checked="" type="checkbox"/> Owner Contact	
Preferred address to receive correspondence: <input type="checkbox"/> Other (provide): <input checked="" type="checkbox"/> Owner Contact	
Did you operate in 2018? <input checked="" type="checkbox"/> Yes; Complete this form. <input type="checkbox"/> No; Complete and submit Sections 1 and 12.	

SECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLES (ELVs) PROCESSED

- Provide the number of ELVs crushed from January 1 to December 31: _____
- Provide the names of each facility where you crushed decommissioned ELVs:

1) _____

2) _____

3) _____

4) _____

5) _____

6) _____

SECTION 2A VDF/REPAIR SHOPS - END-OF-LIFE VEHICLES (ELVs) PROCESSED

- Provide the number of ELVs received from January 1 to December 31: _____
- Provide the number of ELVs crushed and/or removed from the facility from January 1 to December 31: _____
- Provide the number of ELVs stored at the facility as of December 31: _____
- Provide the highest number of ELVs stored at the facility at any one time from January 1 to December 31: _____
- Provide the approximate area used for the storage of vehicles (acres): _____ acres

1) Upstate shredding, Owego NY

2) Sims Metal, Albany NY

3) Union Shredding, Rochester NY

500

450

400

500

15

SECTION 3 - WASTE FLUIDS RECOVERED

Complete this table by reporting volumes of End-of-Life Vehicle (ELV) waste fluids managed at the facility during the reporting period. Qualitative responses (i.e., Y's or X's) are not acceptable. Report only fluids generated from dismantling operations (not general car repair, etc.).

Destination Name & Address	Fluid Volume				
	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.)
	0				
	Refrigerant (pounds)				
	Used Oil** (gallons)	300			
	Diesel Fuel (gallons)				
	Gasoline (gallons)	400	100		
	Engine Coolant Antifreeze (gallons)	100	100		
	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.

Sims metal, Albany NY

upstate shredding, Owego NY

Indicate permitted facility or permitted transporter accepting air bags:

Number of Air Bags Removed: _____

Number of Air Bags Deployed: _____

Provide the number of air bags recovered.

SECTION 6 - AIR BAGS COLLECTED

Indicate permitted facility or permitted transporter accepting mercury containing devices:

H&TS
0
(Number)

ABS
0
(Number)

Provide the number of mercury-containing devices recovered. Including but not limited to hood & trunk lighting switches (H&TS) and antilock brake assemblies (ABS).

SECTION 5 - MERCURY SWITCHES COLLECTED

Material Types	Received (tons)	Stored On Site (tons)	Sent Off Site (tons)	Destination	NYS Recycling Unit (or state if other than New York)		To Scrap Metal Processor	
					Yes	No	Yes	No
Ferrous Scrap Metal	500	100	500		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aluminum Scrap Metal	2-3	16-18	0		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lead Weights	0				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Non - Ferrous Scrap Metal					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (specify):					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

period.

Complete this table by reporting the amount of metal received, stored and sent off site, by the facility, during the reporting

SECTION 4 - SCRAP METAL

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.

SECTION 11 - CHANGES

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 10 - PROBLEMS

Number of self-inspections conducted for the year: _____

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 inspected for leaks/spills? Yes No

SECTION 9 - SELF INSPECTIONS

Tires with rims to Upstate Shredding

Indicate name of facility(ies) accepting waste tires:

Number of waste tires shipped off-site for recycling, disposal, other:

Number of used tires sold:

Number of used tires available for sale on-site:

Number of waste tires stored on-site:

as of December 31 _____

as of December 31 _____

during operating year _____

during operating year _____

900

200

100

40 ton

SECTION 8 - WASTE TIRES COLLECTED

Any materials disposed must undergo a hazardous waste determination and proper handling, storage and disposal, if hazardous.

RSR Corp, Middletown NY

Indicate permitted facility or permitted transporter accepting lead-acid batteries:

Number of Lead-Acid Batteries collected from ELVs:

Provide the number of lead-acid batteries recovered and their disposition.

SECTION 7 - LEAD-ACID BATTERIES COLLECTED

1500

SECTION 12 – COMPLIANCE CERTIFICATION

As of December 31, 2018:

Date of Return to Compliance		Waste Management Compliance Checklist		
Compliance	No	Yes	NA	

	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	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?
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	2. Is a system in place to control vegetation and prevent it from encroaching onto fire access lanes or driveways?
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	3. Have you recorded the date of receipt for all end-of-life vehicles received?
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	4. Are the end-of-life vehicle records available on-site?
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	5. Have all end-of-life vehicles been inspected, upon arrival, for leaking fluids and unauthorized wastes?
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	6. Have all observed leaks been remedied or contained?
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	7. Does your facility have a written Contingency Plan?
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	8. Are facility personnel trained to implement the Contingency Plan?
	9. Does your Contingency Plan include actions to be taken in the event of the following?			

	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	9a. Fire.
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	9b. Spill or release of vehicle waste fluids.
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	9c. Unauthorized material received at facility.
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	10. Are spills of waste fluids, if any occur, reported to the NYSDEC Spills Hotline within two hours of detection?
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	11. Are all vehicle residues prevented from migrating from or running off your property?
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12. Is dust controlled to prevent interference with facility operations or from leaving facility site?
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	13. Are vectors (mosquitoes, rats, mice, etc.) controlled to prevent interference with facility operations?
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14. Are waste fluids kept from being discharged onto the ground or into surface waters?
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	15. Is access to your facility controlled by: fences, gates, sign and/or natural barriers (not vehicles)?
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	15a. Are the access controls working (i.e. controlling access)?
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	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 used for vehicle dismantling, fluid draining, crushing, etc.?			
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	17a. Cleaning daily.
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	17b. Cleaning spills as they occur.
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	17c. Collecting and properly disposing of absorbent materials.

Reprinted (12/18)

Waste Management Compliance Checklist				
Date of Return to	Compliance	NA	Yes	No
		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
18a. Fluids (including engine oil, transmission fluid, transaxle fluid, front and rear axle fluid, brake fluid, power steering fluid, coolant, and fuel).		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
18b. Lead acid batteries.		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
18c. Mercury switches or other mercury containing devices, if any.		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
18d. Refrigerants, if any.		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
18e. Air bags.		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
18f. PCB capacitors, if any.		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19. Are fluids stored separately & in containers that are compatible with their contents?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
20. Are fluids stored in closed containers?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
21. Are containers which contain waste fluids in good condition and not visibly leaking?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
22. Are containers clearly and legibly labeled to describe their contents?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
23. Are containers stored on a bermed pad constructed of concrete or equivalent material?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
24. Are lead-acid batteries stored upright and off the ground?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
25. Are lead-acid batteries covered to protect them from precipitation?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
26. Are all lead-acid batteries sent for recycling within one-year of receipt?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
27. Are leaking lead-acid batteries, if any are encountered, stored in leak-proof containers separated from intact batteries?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
27a. Are provisions in place to absorb any acid leakage?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
28. Are mercury switches and other mercury containing devices stored in appropriate, labeled containers and then sent for recycling?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
29. Are PCB capacitors, if any are encountered, removed and stored in appropriate, labeled containers for recycling or disposal?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
30. Is used oil stored in accordance with local building codes, local fire codes, and the NYS Uniform Fire Prevention & Building Code?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
31. If sent off-site, is used oil transported via a permitted hauler?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
32. If you do not burn used oil onsite check NA for 32a, 32b, 32c. If you do, then answer 32a, 32b, 32c:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
32b. Do on-site space heaters burn only used oil that is generated on-site or received from household do-it-yourself generators?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
32c. Are combustion gases from used oil space heaters vented to the outside ambient air?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

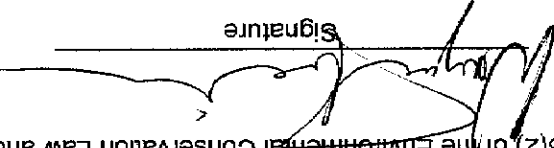
18. Have the following wastes been drained, removed, deployed, collected and/or stored following best management practices, prior to vehicle crushing or shredding?

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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
34. Are sludges from sumps and oil/water separators stored in covered, closed and labeled containers?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
35. Are sludges properly recycled or disposed?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
36. Are used oil filters properly drained, crushed or dismantled?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
37. Are drained oil filters properly recycled or disposed?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
38c. Has the facility's Annual Certification Report for the SPDES MSGP been submitted within the previous year?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
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?	na	na	na				
<p>Do you have any other Environmental Conservation Law or regulatory violations? (Attach additional sheets as necessary.)</p> <p>no</p> <p>COMMENTS? (Attach additional sheets if necessary)</p>							

Date of Return to

ATTACHMENTS: YES NO

State and Zip: NY 13660
 Address: 2500 St. Hwy. 310
 City: Madrid
 Phone Number: 313 322 1100

Name (Print or Type): Wayne Tailon
 Title (Print or Type): Owner
 Signature: 
 Date: 3/1/2019

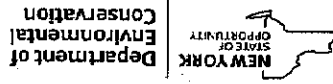
Email (Print or Type): wtailon55@yahoo.com

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.

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: SWMAnnualreport@dec.ny.gov

The 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:

SECTION 12 - SIGNATURE AND DATE BY OWNER OR OPERATOR



NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

Division of Materials Management, Bureau of Solid Waste Management
625 Broadway, Albany, New York 12233-7260
P: (518) 402-8678 | F: (518) 402-9041
www.dec.ny.gov

May 30, 2019

Wayne Tallon
Wayne's Used Cars
126 Fellott Road
Madrid, NY 13660

Dear Wayne Tallon:

Re: Issuance of a Notice of Violation (NOV) – Wayne's Used Cars
[7023803]
Vehicle Dismantling Facility

This letter serves to provide you with a Notice of Violation (NOV) setting forth the specific actions that constitute the violation(s) involving Article 27, Title 7 of the Environmental Conservation Law ("ECL"). As the owner or operator of a permitted/registered solid waste management facility, you are required to comply with the operating and reporting requirements contained in 6 NYCRR Part 360. Facility Annual Reports are due to the New York State Department of Environmental Conservation (DEC) no later than March 1 of each year for the previous year of operation. This NOV is issued because our records indicate that your facility failed to submit a solid waste management facility annual report for operating year 2018 by March 1, 2019, as required by 6 NYCRR 360.19(k)(3).

DEC staff must receive your facility's annual report within fourteen (14) days of this letter's date. If the annual report is not received by the date specified above, DEC will commence an enforcement action against you which may include an enforcement hearing. Failure to submit a solid waste management facility annual report is a violation of 6 NYCRR Part 360 and can result in a penalty of up to \$7,500 per violation and an additional penalty of up to \$1,500 per day that the violation continues, as specified in ECL §71-2703.

Follow the directions below to complete the annual report submission process. Further instructions can be found on the Annual Report Forms:

1. The 2018 annual report forms are available online at: <http://www.dec.ny.gov/chemical/52706.html>.