# 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 January 01, 2018 to December 31, 2018

SECTION 1 - FACILITY INFORMATION

	FACILITY	INFORMATION				
FACILITY NAME:				-		
Summer Hill Auto Salvage						
FACILITY LOCATION ADDRESS:	FACILITY	CITY:		STATE:	ZIP CODE:	
RD2-956 Salt Road	Groto	n		NY	13073	
FACILITY TOWN:	FACILITY COUNTY: FACILITY PHONE NUMBER:					
Groton	Tomp	kins	607	'-898 <b>-</b>	5292	
FACILITY NYS PLANNING UNIT: (A list of NYS Tompkins County	S Planning Uni	ts can be found at the end of t	his repor		SDEC GION #: 7	
FACILITY TYPE:  Vehicle Dismantler DMV I.D. #4550098	☐ Motor	Vehicle Repair Shop		Mobile Ve	hicle Crusher	
FACILITY CONTACT:	public	CONTACT PHONE	C	ONTACT	FAX NUMBER:	
Floyd Kyes	private	NUMBER: 607-898-5292	6	07-898	3-3373	
CONTACT EMAIL ADDRESS: fwkyestrans@	gmail.com			•	•	
	OWNER	INFORMATION				
OWNER NAME:	1	HONE NUMBER:		ER FAX NU	JMBER:	
Floyd Kyes	315-496-	2110	N/A			
OWNER ADDRESS: 456 Salt Road	OWNER C Locke			STATE: NY	ZIP CODE: 13092	
OWNER CONTACT:		ONTACT EMAIL ADDRE	<b>SS</b> :			
Floyd Kyes	fwkyesti	rans@gmail.com				
	OPERATO	RINFORMATION				
OPERATOR NAME: same as owner			Į	_public _private		
	PREF	ERENCES				
Preferred address to receive correspondence:  Other (provide):	Facility loc	cation address	<b></b>	vner address		
Preferred email address:  Facility Contact  Other (provide):		vner Contact		."		
Preferred individual to receive correspondence Other (provide):	9: ☐Facilit	y Contact	Contact			
	· · · · · · · · · · · · · · · · · · ·				·	
Did you operate in 2018?  Yes; Complete	this form.					
☐ No; Complete	and submit	Sections 1 and 12.				

Provide the number of E	LVs received from January 1 to	December 31:	• .	2	
Denvide the number of E	LVs crushed and/or removed f	rom the facility			
from January 1 to Decer		TOTH MIC TACINTY		1	-
Provide the number of E	LVs stored at the facility as of I	December 31:		5	_
	· .				
Provide the highest num at any one time from Jar	ber of ELVs stored at the facilit nuary 1 to December 31:	у	·	6	' 
	as a		a		•
Provide the approximate	e area used for the storage of v	ehicles (acres):		2	acres
		••	<b></b>		-
and the second s	rap metal processors to which		ommissioi	ned ELVs	:
Antique Auto Flea	a Markets @ Hershey &	Canisie PA.			
				,	
2)					
3)					•
	E CRUSHERS - END-OF-	LIFE VEHICLES	(ELVs)	PROCI	ESSED
ECTION 2B MOBILI		٠.	(ELVs)	PROCI	ESSED
ECTION 2B MOBILI	E CRUSHERS - END-OF- ELVs crushed from January 1 to	٠.	(ELVs)	PROCI	ESSED
ECTION 2B MOBILI  Provide the number of E	ELVs crushed from January 1 to	December 3:		PROCI	ESSED
ECTION 2B MOBILI  Provide the number of E  Provide the names of ea		December 3:		PROCI	ESSED
ECTION 2B MOBILI  Provide the number of E  Provide the names of ea	ELVs crushed from January 1 to	December 3:		PROCI	ESSED
ECTION 2B MOBILI  Provide the number of E  Provide the names of ea	ELVs crushed from January 1 to	December 3:		PROCI	ESSED
ECTION 2B MOBILI Provide the number of E Provide the names of ea	ELVs crushed from January 1 to	December 3:		PROCI	ESSED
ECTION 2B MOBILI Provide the number of E Provide the names of ea	ELVs crushed from January 1 to	December 3:		PROCI	ESSED
ECTION 2B MOBILI Provide the number of E Provide the names of ea	ELVs crushed from January 1 to	December 3:		PROCI	ESSED
ECTION 2B MOBILI Provide the number of E Provide the names of ea	ELVs crushed from January 1 to	December 3:		PROCI	ESSED
ECTION 2B MOBILI Provide the number of E Provide the names of ea  1) 2)	ELVs crushed from January 1 to	December 3:		PROCI	ESSED
ECTION 2B MOBILI Provide the number of E Provide the names of ea  1) 2)	ELVs crushed from January 1 to	December 3:		PROCI	ESSED
ECTION 2B MOBILI Provide the number of E Provide the names of ea  1) 2)	ELVs crushed from January 1 to	December 3:		PROCI	ESSED

#### **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	Street Section 1	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)	О	0	0	0	, N/A
Used Oil** (galtons)	6	O -	0	0	N/A
Diesel Fuel (gallons)	0	0	0	0	N/A
Gasoline (gallons)	0	0	0	0	N/A
Engine Coolant/ Antifreeze (gallons)	0	0	0	0	N/A
Window Washing Fluid (gallons)	0	0	0	0	N/A
Other (specify)	0	0	0	0	N/A

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

<sup>\*\*</sup> 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.

	Received	Stored On Site	Sent Off Site	Destination					
Material Types	(tons)	(tons)	(tons)	NYS <u>Planning Unit (</u> or state if other than New York)	To Scrap Metal Processor				
Ferrous Scrap Metal	0	0	0		☐Yes	∏No			
Aluminum Scrap Metal	0	. 0	0	ħ	☐Yes	□No			
Lead Weights	0	0	0	**	□Yes	□No			
Non – Ferrous Scrap Metal	0	0	O		□Yes	N°			
Other (specify):	0	o	0		Yes	No			
					☐Yes	□No			

## **SECTION 5 - MERCURY SWITCHES COLLECTED**

H&TS_	0	ABS 0	•
(Numbe		(Number)	
Indicate permitted facility or perm N/A	itted transporter accepting	mercury containing devices:	
Provide the number of air bags <u>n</u>	ecovered.	BAGS COLLECTED	
		R BAGS COLLECTED  Number of Air Bags Deployed:	0
Provide the number of air bags <u>n</u> Number of Air Bags Removed: Indicate permitted facility or perm N/A	ecovered.	Number of Air Bags Deployed:	0

## 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:	<u> </u>	
ndicate permitted facility or permitted transporter accepting lead-acid batteries		
N/A		
Any materials disposed must undergo a hazardous waste determination and phazardous.	roper handling, st	lorage and disposal, if
SECTION 8 - WASTE TIRES COLI	LECTED	
lumber of waste tires stored on-site:	10	as of December 31
lumber of used tires available for sale on-site:	. 8	as of December 31
Number of used tires sold:	2	during operating year
Number of waste tires shipped off-site for recycling, disposal, other:	0	during operating year
ndicate name of facility(ies) accepting waste tires:		
N/A	<u> </u>	
SECTION 9 - SELF INSPECTION	ONS	
Number of self-inspections conducted for the year:		2
Are self-inspection records up-to-date with inspector name, what was inspector Yes ☐ No	ected, time and d	ate of inspection?
At a minimum, are fluid storage areas, vehicles, vehicle storage areas insp ☑Yes ☐No	ected for leaks/sp	pills?
SECTION 10 - PROBLEMS	3	
Were any problems encountered during the reporting period (e.g., specific of facility procedures)?	occurrences which	h have led to changes in
Yes No If yes, attach additional sheets identifying each problem a	nd the methods fo	or resolution of the problem
SECTION 11 CHANGES	<u> </u>	
Were there any changes from approved reports, plans, specifications, and	permit conditions	1?
Yes No If yes, attach additional sheets identifying changes with a	justification for ea	ach change

#### SECTION 12 - COMPLIANCE CERTIFICATION

### As of December 31, 2018:

)					
	성의 보통 기계에 되어 있는 이 경기에 가장 하면 보고 있습니다. 그런				Date of Return to
	Waste Management Compliance Checklist	NA	Yes	No	Compliance
1. MC	If your facility stores LESS THAN 1,000 tires, check NA. If your facility stores DRE THAN 1,000 tires, do you have a PART 360 permit for tire storage?	<b>V</b>			
2.	Is a system in place to control vegetation and prevent it from encroaching onto fire access lanes or driveways?		$\overline{\mathbf{V}}$		
3.	Have you recorded the date of receipt for all end-of-life vehicles received?		7		
4.	Are the end-of-life vehicle records available on-site?		V		
5.	Have all end-of-life vehicles been inspected, upon arrival, for leaking fluids and unauthorized wastes?		V		
6.	Have all observed leaks been remedied or contained?		V		`
7,	Does your facility have a written Contingency Plan?		7		
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 followi	ng?			
	9a. Fire.		<b>△</b>		
	9b. Spill or release of vehicle waste fluids.		<b>N</b>		
	9c. Unauthorized material received at facility.		<b>\</b>		
	Are spills of waste fluids, if any occur, reported to the NYSDEC  Spills Hotline within two hours of detection?		<b>\</b>		
	Are all vehicle residues prevented from migrating from or running off your property?		N.		
	Is dust controlled to prevent interference with facility operations or from leaving facility site?		<b>\</b>		
13.	Are vectors (mosquitoes, rats, mice, etc.) controlled to prevent interference with facility operations?		<b>V</b>		
	Are waste fluids kept from being discharged onto the ground or into surface waters?		1		
15.	Is access to your facility controlled by: fences, gates, sign and/or natural barriers (not vehicles)?		<b>N</b>		
	15a. Are the access controls working (i.e. controlling access)?		V		
	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	tling, fluid
	17a. Cleaning daily.			<b>V</b>	
	17b. Cleaning spills as they occur.		>		
	17c. Collecting and properly disposing of absorbent materials.		V		

## **SECTION 12 - COMPLIANCE CERTIFICATION**

## As of December 31, 2018:

		Waste Management Compliance Checklist	NA	Yes	No	Date of Return to Compliance
1. MO		our facility stores LESS THAN 1,000 tires, check NA. If your facility stores HAN 1,000 tires, do you have a PART 360 permit for tire storage?				
2.	ls a	system in place to control vegetation and prevent it from encroaching onto access lanes or driveways?				
3,	Ha	re you recorded the date of receipt for all end-of-life vehicles received?		<b>V</b>		
4.	Are	the end-of-life vehicle records available on-site?		V		
5.		e all end-of-life vehicles been inspected, upon arrival, for leaking fluids and authorized wastes?		<b>V</b>		
6.	Ha	re all observed leaks been remedied or contained?		V		
7.	Do	es your facility have a written Contingency Plan?		V		
8.	Are	facility personnel trained to implement the Contingency Plan?		V		
9.	Do	es your Contingency Plan include actions to be taken in the event of the followi	ng?			
	9a.	Fire.		<b>V</b>		
	9b.	Spill or release of vehicle waste fluids.		V		
	9c.	Unauthorized material received at facility.		<b>V</b>		
10.		spills of waste fluids, if any occur, reported to the NYSDEC ills Hotline within two hours of detection?		<b>V</b>		
11.	Are	all vehicle residues prevented from migrating from or running off your operty?		V		
12.	ls d	ust controlled to prevent interference with facility operations or from leaving cility site?		V		
13.	Аге	vectors (mosquitoes, rats, mice, etc.) controlled to prevent interference with cility operations?		V		.
14.	Аге	waste fluids kept from being discharged onto the ground or into surface aters?		1		
15.	ls a	ccess to your facility controlled by: fences, gates, sign and/or natural barriers of vehicles)?		<b>V</b>		
	15	. Are the access controls working (i.e. controlling access)?		V		
16.		fluids drained from end-of-life vehicles on a pad constructed of concrete or uivalent material?		V		
17.	Аге	you doing the following with your concrete (or equivalent surface) pad that is u aining, crushing, etc.?	ised for	vehicle	dismai	ntling, fluid
	17a	Cleaning daily.			<b>V</b>	
	17b	Cleaning spills as they occur.		<b>V</b>		
	17c	Collecting and properly disposing of absorbent materials.		<b>V</b>		

Waste Management Compliance Checklist	NA	Yes	No	Date of Return to Compliance
33. Is waste oil kept from being mixed with brake cleaner, carb cleaner, antifreeze, solvents, gasoline, or degreasers?		$\overline{\mathbf{V}}$		
34. Are sludges from sumps and oil/water separators stored in covered, closed and labeled containers?	[5]			
35. Are sludges properly recycled or disposed?	>			
36. Are used oil filters properly drained, crushed or dismantled?		<b>V</b>		
37. Are drained oil filters properly recycled or disposed?		1		
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:	ŧ			
38a. If required by the SPDES MSGP, has a Stormwater Pollution Prevention Plan been prepared for this facility?	<b>V</b>			
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?	$\overline{\mathbf{N}}$			
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?		:	N/A	A pounds
Do you have any other Environmental Conservation Law or regulatory violations? (Attach additional sheets as necessary.) NONE				
COMMENTS? (Attach additional sheets if necessary) All ELVs in stock, & all parts removed are stored inside en				
This facility stocks only ANTIQUE inventory from ELVs	made	prio	r to 1	1980.

## 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 of 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: SWMFannuaireport@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
Floyd Kyes	Owner
Name (Print or Type)	Title (Print or Type)
fwkyestrans@gmail.co	nt or Type)
Email (Pri	пгог гуре)
RD2-956 Salt Road	Groton
Address	City
NY 13073	<sub>607</sub> ,898 <sub>5</sub> 292
State and Zip	Phone Number

ATTACHMENTS: YES NO