

FAX COVER SHEET

TO

COMPANY

FAX NUMBER 15184029041

FROM Master Plumbing and Heating Inc

DATE 2020-02-27 17:19:05 GMT

RE UNKNOWN

COVER MESSAGE

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

DEC 17 2019

ATT: JOSEPH O'CONNELL, PG

Dear Facility Owner/Operator:

Re: Annual Reporting for Facilities Regulated Under 6 NYCRR Part 360:

- Combustion Facilities and Thermal Treatment Facilities;
- Construction and Demolition Debris Handling and Recovery Facilities;
- Household Hazardous Waste Collection Facilities and Events;
- Landfills;
- Metal Processing and Vehicle Dismantling Facilities*;
- Municipal Solid Waste Processing Facilities;
- Navigational Dredged Material Handling and Recovery Facilities;
- Recyclables Handling and Recovery Facilities;
- Regulated Medical Waste Generators;
- Regulated Medical Waste Treatment, Storage, and Transfer Facilities;
- Transfer Facilities;
- Used Cooking Oil and Yellow Grease Processing Facilities;
- Waste Oil Storage, Reprocessing or Rerefining Facilities; and
- Waste Tire Handling and Recovery Facilities.

This letter is to remind you that your 2019 Annual Report is due no later than March 1, 2020, in accordance with 6 NYCRR Part 360. Submission of the completed form does not relieve you from any additional reporting responsibilities that are identified as special conditions in your 6 NYCRR Part 360 permit or that may be required for inactive or closed facilities, or other types of solid waste management facilities not referenced above.

For facilities at which multiple activities or operations occur (e.g., transfer facilities that are also authorized for construction and demolition debris handling and recovery, recyclables handling & recovery, etc.) please complete the forms for each of these activities. If you have any questions about which forms to use, please contact the DEC Regional Office for the Region in which your facility is located or contact the Central Office at (518) 402-8678.

To complete the annual report submission process:

1. The 2019 annual report forms are available online at <http://www.dec.ny.gov/chemical/52706.html>. A brief description of each type of solid waste management facility can be found at <http://www.dec.ny.gov/chemical/8495.html>.
2. Complete the fillable pdf form(s) applicable to your facility or facilities, OR Download the forms applicable to your facility or facilities, and fill out the form(s) by hand.
3. Print the forms double-sided.
4. Sign the form(s).
5. Make a copy for your records.

2.

6. Fax the completed annual report form(s) to the DEC Central Office at (518) 402-9041 or e-mail it to SWMFannualreport@dec.ny.gov (If you cannot fax or e-mail the form(s) or if there are lengthy attachments to the annual report(s), save the document onto a CD and mail to the Central Office at the address on the top of this letter.)
7. E-mail the completed form(s) to the DEC Regional Office that has jurisdiction over your facility. (If you cannot e-mail the form(s) or if there are lengthy attachments to the annual report(s), mail the original completed form to your respective DEC Regional Office.)

Further instructions can be found on the annual report forms. Should you have any questions regarding the use of the forms, or would like a hard copy or an electronic copy of the forms, please contact Steven Naukam at (518) 402-8678, or via e-mail at SWMFannualreport@dec.ny.gov. Other questions regarding your reporting responsibilities should be directed to your respective DEC Regional Office.

Failure to submit the Annual Report Form 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. DEC has been actively pursuing facilities that fail to submit annual reports in a timely manner, and expects to issue Notices of Violation soon after the March 1 reporting deadline.

As you may be aware, the revised Part 360 regulations became effective on November 4, 2017 and are available at <http://www.dec.ny.gov/regulations/81768.html>. Please take note of any additional reporting requirements for your facility or facilities.

Thank you for your cooperation in this matter.

Sincerely,



Richard Clarkson, P.E.
Director
Bureau of Solid Waste Management

Enclosure

*Please note, if your facility engages in the dismantling or wrecking of used motor vehicles for parts recycling/resale and for scrap, you are also subject to the SPDES Multi-Sector General Permit for Stormwater Discharges Associated with Industrial Activity (MSGP). Activities such as vehicle dismantling have the potential to discharge pollutants directly into nearby waterbodies or indirectly via storm sewer systems, thereby degrading water quality. The MSGP is intended to provide regulatory oversight to industrial facilities to control stormwater runoff and prevent pollutants from reaching waterbodies. To obtain coverage under the MSGP, you must develop a Stormwater Pollution Prevention Plan (SWPPP), which outlines how you intend to prevent pollutants from being discharged from your facility; implement stormwater best management practices; and then submit a Notice of Intent. If your facility is discharging stormwater and fails to obtain MSGP coverage, you could be subject to enforcement actions, including, but not limited to, financial penalties up to \$37,500 per day per violation. If you have questions regarding the MSGP and if your facility is required to obtain coverage, you can contact the NYSDEC Division of Water's MSGP Coordinator, Steven McCague by phone at (518) 402-8244, or by e-mail at steven.mccague@dec.ny.gov. In addition, more information on the MSGP can be found on DEC's website at <http://www.dec.ny.gov/chemical/9009.html>.

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

Submit the Annual Report no later than March 1, 2020. This annual report is for the year of operation from January 01, 2019 to December 31, 2019

SECTION 1 – FACILITY INFORMATION

| FACILITY INFORMATION | | | |
|---|--|---|-----------------------------------|
| FACILITY NAME: NEW YORK TRANSMISSION USED AUTO SALES | | | |
| FACILITY LOCATION ADDRESS: 49-08 25 AVE | FACILITY CITY: WOODSIDE | STATE: NY | ZIP CODE: 11377 |
| FACILITY TOWN: | FACILITY COUNTY: QUEENS | FACILITY PHONE NUMBER: (718) 777-2641 | |
| FACILITY NYS PLANNING UNIT: (A list of NYS Planning Units can be found at the end of this report). | | | NYSDEC REGION #: |
| FACILITY TYPE: <input checked="" type="checkbox"/> Vehicle Dismantler | | <input checked="" type="checkbox"/> Motor Vehicle Repair Shop | NYS DEC ACTIVITY CODE: |
| DMV I.D. # 7085594 | | <input type="checkbox"/> Mobile Vehicle Crusher | |
| FACILITY CONTACT: GREGORIO BARRANTES | <input type="checkbox"/> public <input checked="" type="checkbox"/> private | CONTACT PHONE NUMBER: (347) 456-1303 | CONTACT FAX NUMBER: N/A |
| CONTACT EMAIL ADDRESS: | | | |
| OWNER INFORMATION | | | |
| OWNER NAME: GREGORIO BARRANTES | OWNER PHONE NUMBER: (718) 777-2641 | OWNER FAX NUMBER: N/A | |
| OWNER ADDRESS: 49-08 25 AVE | OWNER CITY: WOODSIDE | STATE: NY | ZIP CODE: 11377 |
| OWNER CONTACT: | OWNER CONTACT EMAIL ADDRESS: NEWYORKTRANSMISSION@YAHOO.COM | | |
| OPERATOR INFORMATION | | | |
| OPERATOR NAME: <input type="checkbox"/> same as owner | | <input type="checkbox"/> public <input type="checkbox"/> private | |
| PREFERENCES | | | |
| Preferred address to receive correspondence: <input type="checkbox"/> Facility location address <input type="checkbox"/> Owner address <input type="checkbox"/> Other (provide): | | | |
| Preferred email address: <input type="checkbox"/> Facility Contact <input checked="" type="checkbox"/> Owner Contact <input type="checkbox"/> Other (provide): | | | |
| Preferred individual to receive correspondence: <input type="checkbox"/> Facility Contact <input type="checkbox"/> Owner Contact <input type="checkbox"/> Other (provide): | | | |

Did you operate in 2019? ☒ Yes; Complete this form.

☐ No; Complete and submit Sections 1 and 12.

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

- Provide the number of ELVs received from January 1 to December 31: 3
- Provide the number of ELVs crushed and/or removed from the facility from January 1 to December 31: 3
- Provide the number of ELVs stored at the facility as of December 31: 3
- Provide the highest number of ELVs stored at the facility at any one time from January 1 to December 31: 5
- Provide the approximate area used for the storage of vehicles (acres): 1/16 acres
- Provide the names of scrap metal processors to which you sold or sent decommissioned ELVs:
 - 1) NOWG
 - 2) NOWG
 - 3) _____

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

- Provide the number of ELVs crushed from January 1 to December 31: 3
- Provide the names of each facility where you crushed decommissioned ELVs:
 - 1) ATLANTIC RECYCLING FACILITY ID 7104233
 - 2) GERSHOW RECYCLING #7090157. (FINISHING TOWING)
 - 3) _____
 - 4) _____
 - 5) _____
 - 6) _____

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 Planning Unit (or state if other than New York) | To Scrap Metal Processor |
| Ferrous Scrap Metal | NONE | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Aluminum Scrap Metal | NONE | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Lead Weights | NONE | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Non – Ferrous Scrap Metal | NONE | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Other (specify): | | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | | | | | <input type="checkbox"/> Yes <input type="checkbox"/> 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 _____
(Number)

ABS _____
(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:

N/A

Number of Air Bags Deployed:

N/A

Indicate permitted facility or permitted transporter accepting air bags:

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. ✓'s or X's) are not acceptable. Report only fluids generated from dismantling operations (not general car repair, etc.).

| Waste Fluid Recovered | Fluid Volume | | | | Destination Name & Address |
|--------------------------------------|---------------------------------|----------------------------|-------------------------|--------------------|---|
| | 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) | | 30 LB | | | |
| Used Oil** (gallons) | | 170 | 280 G | | SPEEDY OIL Recovery LIC# NJ-917 |
| Diesel Fuel (gallons) | | | | | |
| Gasoline (gallons) | | | | | |
| Engine Coolant/ Antifreeze (gallons) | | 18 GALL | 65 GALL | | |
| Window Washing Fluid (gallons) | | 8 GALL | | | |
| 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.

SECTION 12 – COMPLIANCE CERTIFICATION

As of December 31, 2018:

| Waste Management Compliance Checklist | | | | Date of Return to Compliance |
|--|--------------------------|-------------------------------------|-------------------------------------|------------------------------|
| | NA | Yes | No | |
| 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 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 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 type="checkbox"/> | |
| 4. Are the end-of-life vehicle records available on-site? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input 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 type="checkbox"/> | |
| 6. Have all observed leaks been remedied or contained? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 7. Does your facility have a written Contingency Plan? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 8. Are facility personnel trained to implement the Contingency Plan? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 9. Does your Contingency Plan include actions to be taken in the event of the following? | | | | |
| 9a. Fire. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 9b. Spill or release of vehicle waste fluids. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 9c. Unauthorized material received at facility. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input 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 type="checkbox"/> | |
| 11. Are all vehicle residues prevented from migrating from or running off your property? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input 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 type="checkbox"/> | |
| 13. Are vectors (mosquitoes, rats, mice, etc.) controlled to prevent interference with facility operations? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input 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 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 type="checkbox"/> | |
| 15a. Are the access controls working (i.e. controlling access)? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 16. Are fluids drained from end-of-life vehicles on a pad constructed of concrete or equivalent material? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 17. Are you doing the following with your concrete (or equivalent surface) pad that is used for vehicle dismantling, fluid draining, crushing, etc.? | | | | |
| 17a. Cleaning daily. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| 17b. Cleaning spills as they occur. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| 17c. Collecting and properly disposing of absorbent materials. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |

Reprinted (12/19)

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:

NONE

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

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

SECTION 8 – WASTE TIRES COLLECTED

Number of waste tires stored on-site:

as of December 31

Number of used tires available for sale on-site:

as of December 31

Number of used tires sold:

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, 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 10 – 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 11 – 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.

| Waste Management Compliance Checklist | Date of Return to | | | Compliance |
|--|--|-------------------------------------|--------------------------|------------|
| | NA | Yes | No | |
| 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 35. Are sludges properly recycled or disposed? | <input checked="" type="checkbox"/> | <input 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: | <input checked="" type="checkbox"/> | | | |
| 38a. If required by the SPDES MSGP, has a Stormwater Pollution Prevention Plan been prepared for this facility? | <input checked="" type="checkbox"/> | <input 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 38c. Has the facility's Annual Certification Report for the SPDES MSGP been submitted within the previous year? | <input checked="" type="checkbox"/> | <input 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? | <p>_____ pounds</p> <p>_____ gallons</p> | | | |

Do you have any other Environmental Conservation Law or regulatory violations?
(Attach additional sheets as necessary.)

COMMENTS? (Attach additional sheets if necessary)

| Waste Management Compliance Checklist | | | | Date of Return to Compliance |
|---|-------------------------------------|-------------------------------------|-------------------------------------|------------------------------|
| | NA | Yes | No | |
| 18. Have the following wastes been drained, removed, deployed, collected and/or stored following best management practices, prior to vehicle crushing or shredding? | | | | |
| 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 type="checkbox"/> | <input checked="" type="checkbox"/> | |
| 18d. Refrigerants, if any. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| 18e. Air bags. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 18f. PCB capacitors, if any. | <input checked="" type="checkbox"/> | <input 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 type="checkbox"/> | <input checked="" 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 <u>leaking</u> 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 type="checkbox"/> | <input checked="" 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 type="checkbox"/> | <input checked="" 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 type="checkbox"/> | <input checked="" 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: | | | | |
| 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 checked="" type="checkbox"/> | <input 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 32c. Are combustion gases from used oil space heaters vented to the outside ambient air? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

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

FEB/26/2020
Date

GREGORIO BARRIENTES
Name (Print or Type)

OWNER
Title (Print or Type)

NEWYORKTRANSMISSION@yahoo.com
Email (Print or Type)

49.08 25AVE
Address

WOODSIDE
City

NY 11377
State and Zip

718.777.2641
Phone Number

ATTACHMENTS: ☐ YES ☐ NO

**Division of Materials Management
New York State Department of Environmental Conservation
Albany, New York 12233-7260**

Forms for all solid waste management facilities can be found at <http://www.dec.ny.gov/chemical/52706.html> and a brief description of each type of facility can be found at <http://www.dec.ny.gov/chemical/8495.html>.

VEHICLE DISMANTLING FACILITIES, MOTOR VEHICLE REPAIR SHOPS AND MOBILE VEHICLE CRUSHERS

Annual Report

Submit the Annual Report no later than March 1, 2020.

Reporting of the information indicated on this Vehicle Dismantling, Motor Vehicle Repair Shop and Mobile Vehicle Crusher Annual Report form is required pursuant to 6 NYCRR 360-12.1(c) and 360.19(k)(12). Failure to provide the required information requested is a violation of Environmental Conservation Law. Timely submission of a properly completed form to the Department's Regional Office that has jurisdiction over your facility and to the Department's Central Office is required to meet the Annual Report requirements of 6 NYCRR Part 360.

Reporting of the information indicated on this Mandatory Annual Report including Self-Certification for Vehicle Dismantling Facilities fulfills the reporting requirements pursuant to 6 NYCRR 360-12.1(c).

Entries on the report forms should be either typewritten or neatly printed in black ink. Attach additional sheets if space on the pages is insufficient or supplementary information is required or appropriate.

For reference only. Please do not return with submittal.