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

| SECTIO | N1 - FAC | LITY INFORMATIO | N | | and the second state of th | |
|--|--|--------------------------|-----------|------------|--|--|
| | FACILITY | INFORMATION | | | | |
| FACILITY NAME: Sims Metal East, LLC - Middle | town | | | | 100 | |
| FACILITY LOCATION ADDRESS: | FACILITY | CITY: | | STATE | ZIP CODE: | |
| 820 Route 211 East | Middletown NY 10941 | | | | | |
| FACILITY TOWN: | FACILITY TOWN: FACILITY COUNTY: FACILITY PHONE NUMBER: | | | | | |
| Middletown | Orang | le | 845 | 5 703 | 3-4055 | |
| FACILITY NYS PLANNING UNIT: (A list of NYS Planning Units can be found at the end of this report). NYSDEC REGION #: 3 Orange County REGION #: 3 | | | | | | |
| FACILITY TYPE: Vehicle Dismantler Motor Vehicle Repair Shop NYS DEC ACTIVITY CODE: DMV I.D. # 7107477 Mobile Vehicle Crusher Vehicle Crusher | | | | | | |
| FACILITY CONTACT: | public | CONTACT PHONE NUMBER: | | | T FAX NUMBER: | |
| Jason Beaver | 🔽 private | 845 703-4055 | 2 | 345 /1 | 03-40588 | |
| CONTACT EMAIL ADDRESS: | | | | | | |
| | | INFORMATION | | | | |
| OWNER NAME: Sims Metal,LLC | OWNER P 201 577- | HONE NUMBER: | tender to | 333-42 | NUMBER: 96 | |
| OWNER ADDRESS: One Linden Avenue East | OWNER O Jersey City | | | STATE | E: ZIP CODE: 07305 | |
| OWNER CONTACT: | OWNER C | ONTACT EMAIL ADDR | ESS: | | | |
| Andrew Hannan | andrew | hannan@simsmr | n.con | n | | |
| | OPERATO | RINFORMATION | | | | |
| OPERATOR NAME: Same as owner | | | | □ publi | | |
| | PRE | FERENCES | | | | |
| Preferred address to receive correspondence. | Facility lo | ocation address | | Owner addr | ress | |
| Preferred email address: Facility Contact | 0 | wner Contact | | | | |
| Preferred individual to receive correspondence | e: 🗹 Facili | ty Contact Own | er Contac | t | | |
| Did you operate in 2019? Yes; Complete | | Sections 1 and 12. | | | | |

| | 5822 |
|---|--------------------|
| Provide the number of ELVs received from January 1 to December 31: | |
| Provide the number of ELVs crushed and/or removed from the facility | 5800 |
| from January 1 to December 31: | |
| Provide the number of ELVs stored at the facility as of December 31: | 22 |
| Provide the highest number of ELVs stored at the facility | 100 |
| at any one time from January 1 to December 31: | |
| Provide the approximate area used for the storage of vehicles (acres): | .05acres |
| Provide the names of scrap metal processors to which you sold or sent dec | commissioned ELVs: |
| Sims Metal East,LLC - Claremont Terminal, One Linden Ave East Jersey City, NJ 07305 | |
|) | |
| | |
|) | |
| ECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLE | S (ELVs) PROCESSED |
| ECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLE Provide the number of ELVs crushed from January 1 to December 3: | 0 |
| ECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLE Provide the number of ELVs crushed from January 1 to December 3: Provide the names of each facility where you crushed decommissioned EL | 0 |
| ECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLE Provide the number of ELVs crushed from January 1 to December 3: Provide the names of each facility where you crushed decommissioned EL | 0 |
| ECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLE Provide the number of ELVs crushed from January 1 to December 3: Provide the names of each facility where you crushed decommissioned EL) | 0 |
| ECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLE Provide the number of ELVs crushed from January 1 to December 3: Provide the names of each facility where you crushed decommissioned EL , | 0 |
| ECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLE Provide the number of ELVs crushed from January 1 to December 3: Provide the names of each facility where you crushed decommissioned EL) | 0 |
| ECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLE Provide the number of ELVs crushed from January 1 to December 3: Provide the names of each facility where you crushed decommissioned EL) | 0 |

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

| | | Fluid | 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) | | 35 | 548 | | Rapid Recovery Montvale, NJ 07645 |
| Used Oil** (gallons) | | 0 | 8838 | 286 | Lorco Petroleum Services Elizabeth, NJ 07202 |
| Diesel Fuel (gallons) | | | | | |
| Gasoline (gallons) | | 0 | 23150 | | Mid-West Gas 5652 Vessey CT Dublin OH |
| Engine Coolant/ Antifreeze (gallons) | | 0 | 7476 | | Lorco Petroleum Services Elizabeth, NJ 07202 |
| 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.

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 | | |
|------------------------------|--------------------|--------------------------|-------------------------|-------------------------|------|-----------------------|
| Material Types | Received (tons) | Stored On Site (tons) | Sent Off Site (tons) | other than New York) | | crap etal essor |
| Ferrous Scrap Metal | 19640 | 62 | 19578 | Sims MM Jersey City, NJ | Yes | No |
| Aluminum Scrap Metal | 285 | 9 | 276 | Sims MM Newark, NJ | ⊡Yes | No |
| Lead Weights | 1 | 0 | 1 | Sims MM Newark, NJ | Yes | No |
| Non – Ferrous Scrap Metal | 1328 | 17 | 1311 | Sims MM Newark, NJ | Yes | No |
| Other (specify): | | | | | Tes | No |
| | | | | | Yes | No |

SECTION 5 - MERCURY SWITCHES COLLECTED

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

H&TS 338 (Number)

| ABS | 0 | |
|-------|----|--|
| Numbe | r) | |

Indicate permitted facility or permitted transporter accepting mercury containing devices: Equis, Upsilanti,MI 48198

| SECTION 6 | 6 - AIR BAC | SS COLLE | CTED |
|-----------|-------------|-----------------|------|
|-----------|-------------|-----------------|------|

Provide the number of air bags recovered.

| Number of Air Bags Removed: | 0 Number of Air Bags Deployed: | | | |
|-----------------------------|--------------------------------|--|--|--|
| | | | | |

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:

| 4 | 7 | 6 | 0 | |
|---|---|---|---|--|
| | | | | |

12

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

RSR 65 Ballard Road, Middletown, NY 10941

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: | 0 | as of December 31 |
|--|-------|-----------------------|
| Number of used tires available for sale on-site: | 0 | as of December 31 |
| Number of used tires sold: | 17698 | during operating year |
| Number of waste tires shipped off-site for recycling, disposal, other: | 0 | during operating year |
| Indicate name of facility(ies) accepting waste tires: | | |
| Brazil Tires 925 - 1011 18th Ave Newark, NJ 07106 | | |

| | - | - | | | - | | | |
|-----|-----|----|-----|-----|------|------|--------|--|
| SEG | сті | ON | 9 - | SEL | F IN | ISPE | CTIONS | |

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?

At a minimum, are fluid storage areas, vehicles, vehicle storage areas inspected for leaks/spills?

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.

SECTION 12 - COMPLIANCE CERTIFICATION

As of December 31, 2018:

| | | | Sec. | | Date of Return to |
|----------------|--|---------|-------------------------|-------|-------------------|
| | Waste Management Compliance Checklist | NA | Yes | No | Compliance |
| 1. MO 2. | If your facility stores LESS THAN 1,000 tires, check NA. If your facility stores RE THAN 1,000 tires, do you have a PART 360 permit for tire storage? Is a system in place to control vegetation and prevent it from encroaching onto fire access lanes or driveways? | | | | |
| 3. | Have you recorded the date of receipt for all end-of-life vehicles received? | | | | |
| 4. | Are the end-of-life vehicle records available on-site? | | | | |
| 5. | Have all end-of-life vehicles been inspected, upon arrival, for leaking fluids and unauthorized wastes? | | | | |
| 6. | Have all observed leaks been remedied or contained? | | 1 | | |
| 7. | Does your facility have a written Contingency Plan? | | 1 | | |
| 8. | Are facility personnel trained to implement the Contingency Plan? | | \checkmark | | |
| 9. | Does your Contingency Plan include actions to be taken in the event of the following | ng? | | | |
| | 9a. Fire. | | \checkmark | | |
| | 9b. Spill or release of vehicle waste fluids. | | \checkmark | | |
| | 9c. Unauthorized material received at facility. | | \checkmark | | |
| 10. | Are spills of waste fluids, if any occur, reported to the NYSDEC Spills Hotline within two hours of detection? | | \checkmark | | |
| 11. | Are all vehicle residues prevented from migrating from or running off your property? | | $\overline{}$ | | |
| 12. | Is dust controlled to prevent interference with facility operations or from leaving facility site? | | | | |
| 13. | Are vectors (mosquitoes, rats, mice, etc.) controlled to prevent interference with facility operations? | | | | |
| | Are waste fluids kept from being discharged onto the ground or into surface waters? | | \checkmark | | |
| 15. | Is access to your facility controlled by: fences, gates, sign and/or natural barriers (not vehicles)? | | $\overline{\checkmark}$ | | |
| | 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. | | \checkmark | | |
| | 17b. Cleaning spills as they occur. | | $\overline{}$ | | |
| | 17c. Collecting and properly disposing of absorbent materials. | | ~ | | |

| | | | | | Date of Return to |
|--------|--|--------------|--------------|---------|-------------------|
| | Waste Management Compliance Checklist | NA | Yes | No | Compliance |
| | ave the following wastes been drained, removed, deployed, collected and/or store actices, prior to vehicle crushing or shredding? | d follow | ving bes | st mana | gement |
| 18 | Ba. Fluids (including engine oil, transmission fluid, transaxle fluid, front and rear axle fluid, brake fluid, power steering fluid, coolant, and fuel). | | 1 | | |
| 18 | b. Lead acid batteries. | | 1 | | |
| 18 | c. Mercury switches or other mercury containing devices, if any. | | 1 | | |
| 18 | d. Refrigerants, if any. | | 1 | | |
| 18 | le. Air bags. | | | ~ | |
| 18 | f. PCB capacitors, if any. | | ~ | | |
| | re fluids stored separately & in containers that are compatible with their contents? | | \checkmark | | |
| 20. A | re fluids stored in closed containers? | | 1 | | |
| | re containers which contain waste fluids in good condition and not visibly eaking? | | \checkmark | | |
| 22. A | re containers clearly and legibly labeled to describe their contents? | | \checkmark | | |
| | re containers stored on a bermed pad constructed of concrete or equivalent material? | | \checkmark | | |
| 24. A | re lead-acid batteries stored upright and off the ground? | | 1 | | |
| | re lead-acid batteries covered to protect them from precipitation? | | \checkmark | | |
| 26. A | re all lead-acid batteries sent for recycling within one-year of receipt? | | \checkmark | | |
| | re <u>leaking</u> lead-acid batteries, if any are encountered, stored in leak-proof containers separated from intact batteries? | | | | |
| | 27a. Are provisions in place to absorb any acid leakage? | | 1 | | |
| | re mercury switches and other mercury containing devices stored in appropriate, labeled containers and then sent for recycling? | | | | |
| | re PCB capacitors, if any are encountered, removed and stored in appropriate, labeled containers for recycling or disposal? | | | | 1 1 201 |
| | used oil stored in accordance with local building codes, local fire codes, and he NYS Uniform Fire Prevention & Building Code? | | \checkmark | | |
| 31. If | sent off-site, is used oil transported via a permitted hauler? | | 1 | | |
| 32. If | you do not burn used oil onsite check NA for 32a., 32b., 32c. If you do, then answ | ver 32a | ., 32b., | 32c: | |
| 3 | 2a. 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? | | | | |
| 3 | 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 ambient air? | \checkmark | | | |

| | | | | Date of Return to | |
|--|----|-------------------------|----|-------------------|--|
| 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? | | | | | |
| 34. Are sludges from sumps and oil/water separators stored in covered, closed and labeled containers? | | \checkmark | | | |
| 35. Are sludges properly recycled or disposed? | | ~ | | | |
| 36. Are used oil filters properly drained, crushed or dismantled? | | 1 | | | |
| 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: | | | | | |
| 38a. If required by the SPDES MSGP, has a Stormwater Pollution Prevention Plan been prepared for this facility? | | $\overline{\mathbf{V}}$ | | | |
| 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? | | | | | |
| 38c. Has the facility's Annual Certification Report for the SPDES MSGP been submitted within the previous year? | | \checkmark | | | |
| 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 pounds NA gallons | | | |

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

COMMENTS? (Attach additional sheets if necessary)

18 e - air bags cannot safely be deployed or removed at this time

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

ason Beaver Facility M Title (Print or Type)

Email (Print or Type)

Address

Middletown

New York 10941 State and Zip

18451703-40

ATTACHMENTS: YES NO