

VEHICLE DISMANTLING FACILITY, MOTOR VEHICLE REPAIR SHOP AND MOBILE VEHICLE

CRUSHER ANNUAL REPORT

RECEIVED
NYS DEC

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

FEB 27 2020

SECTION 1 – FACILITY INFORMATION

DIV. OF MATERIALS MANAGEMENT

FACILITY INFORMATION			
FACILITY NAME: KAPLINE'S Used Auto Parts			
FACILITY LOCATION ADDRESS: 6731 Snell Road	FACILITY CITY: Lowville	STATE: NY	ZIP CODE: 13367
FACILITY TOWN: Watson	FACILITY COUNTY: Lewis	FACILITY PHONE NUMBER: 315-376-2885	
FACILITY NYS PLANNING UNIT: (A list of NYS Planning Units can be found at the end of this report).			NYSDEC REGION #: 6
FACILITY TYPE: <input checked="" type="checkbox"/> Vehicle Dismantler <input type="checkbox"/> Motor Vehicle Repair Shop <input type="checkbox"/> Mobile Vehicle Crusher			
DMV I.D. # 7007567			
FACILITY CONTACT: PAUL KATLINE	<input checked="" type="checkbox"/> public <input type="checkbox"/> private	CONTACT PHONE NUMBER: 315-376-2885	CONTACT FAX NUMBER: 315-376-2605
CONTACT EMAIL ADDRESS: katlinevap@yahoo.com			
OWNER INFORMATION			
OWNER NAME: PAUL KATLINE	OWNER PHONE NUMBER: 315-376-4240	OWNER FAX NUMBER: 315-376-2605	
OWNER ADDRESS: 6730 Snell Road	OWNER CITY: Lowville	STATE: NY	ZIP CODE: 13367
OWNER CONTACT: PAUL KATLINE	OWNER CONTACT EMAIL ADDRESS: katlinevap@yahoo.com		
OPERATOR INFORMATION			
OPERATOR NAME:	<input checked="" type="checkbox"/> same as owner	<input checked="" type="checkbox"/> public <input type="checkbox"/> private	
PREFERENCES			
Preferred address to receive correspondence: <input checked="" 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 checked="" 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: 600
- Provide the number of ELVs crushed and/or removed from the facility from January 1 to December 31: 600
- Provide the number of ELVs stored at the facility as of December 31: 27300
- Provide the highest number of ELVs stored at the facility at any one time from January 1 to December 31: 2,500
- Provide the approximate area used for the storage of vehicles (acres): 18 acres
- Provide the names of scrap metal processors to which you sold or sent decommissioned ELVs:
 - 1) Kimco Kingston Ontario Canada
 - 2) J & P Enterprises
 - 3) _____

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

- Provide the number of ELVs crushed from January 1 to December 31: 600
not crushed on premise they were put in dumpsters and taken out
- Provide the names of each facility where you crushed decommissioned ELVs:
 - 1) Kimco Kingston Ontario Canada
 - 2) _____
 - 3) _____
 - 4) _____
 - 5) _____
 - 6) _____

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 <i>(Indicate permitted facility or permitted Part 364 transporter accepting waste fluids.)</i>
	Used on-site (oil heater, etc.)	Stored on-site at year-end	Sold/ Recycled off-site	Disposed off-site*	
Refrigerant (pounds)	85	65	0	0	
Used Oil** (gallons)	2,200	2400	0	0	
Diesel Fuel (gallons)	0	0	100	0	
Gasoline (gallons)	600	150	0	0	
Engine Coolant/ Antifreeze (gallons)	80	50 green 140 red	210		
Window Washing Fluid (gallons)	40	6	20	0	
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.

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)	To Scrap Metal Processor
Ferrous Scrap Metal	0	NT 600	NT 1,095.4	DANC	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Aluminum Scrap Metal	0	1.5	8.18	DANC	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Lead Weights	0	30 lbs	100	DANC	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Non – Ferrous Scrap Metal	0	0	0	DANC	<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 210
(Number)

ABS 40
(Number)

Indicate permitted facility or permitted transporter accepting mercury containing devices:

None shipped out yet stored in a Alstec 1281
Special for them

SECTION 6 – AIR BAGS COLLECTED

Provide the number of air bags recovered.

Number of Air Bags Removed: 0

Number of Air Bags Deployed: 25

Indicate permitted facility or permitted transporter accepting air bags:

Kanco took them with the car.

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:

55

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

In State Batteries Waterbury, N.Y.

Harry Laggett Waterbury, N.Y.

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:

160

as of December 31

Number of used tires available for sale on-site:

400

as of December 31

Number of used tires sold:

400

during operating year

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

1800

during operating year

Indicate name of facility(ies) accepting waste tires:

Kimco Ontario Canada

SECTION 9 – SELF INSPECTIONS

Number of self-inspections conducted for the year:

4

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.

SECTION 12 – COMPLIANCE CERTIFICATION

As of December 31, 2018:

Waste Management Compliance Checklist	NA	Yes	No	Date of Return to Compliance
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input 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 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"/>	<i>no spills</i>
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 checked="" type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>	
17b. Cleaning spills as they occur.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
17c. Collecting and properly disposing of absorbent materials.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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 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?	<p style="text-align: right;">_____ pounds</p> <p style="text-align: right;"><i>NA</i> _____ gallons</p>			

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

NO

COMMENTS? (Attach additional sheets if necessary)

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.

Paul J. Kapler
Signature

2/24/2020
Date

PAUL J. KAPLER
Name (Print or Type)

Owner
Title (Print or Type)

Kapline vas @ Yahoo.com
Email (Print or Type)

6731 Snell Road
Address

Laurel
City

N.Y. 13867
State and Zip

(315) 376-2888
Phone Number

ATTACHMENTS: YES NO

Converse Laboratories Inc.
800 Starbuck Ave. Suite B101
Watertown, NY 13601

NYS Approved ELAP
ID# 10708

USPH Certified
ID# 36144

Client: Kaflines Auto Parts
6731 Snell Road
Lowville, NY 13367

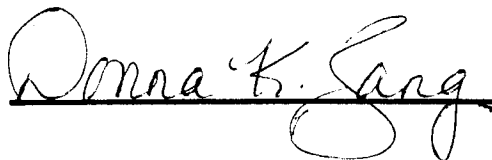
Report Date:
12/23/2019

Laboratory Report

Sample ID: 1912720 Sample Type: Waste Water
Sample Date: 12/16/2019 1400 Sample Site: Drainage
Date Received: 12/18/2019 1219 Sampler: P.K.

Analysis	Result	Units	Method Code	Lab ID	Date/Time/Tech Tested
COD	<5.0	mg/l	HACH 1979-8000	10708	12/23/2019 0810 TLE
Solids, Suspended	0.50E	mg/l	SM 21-2540D	10708	12/19/2019 1200 TLE

Authorized Review by/Supervisor :
Key: mg/l - Milligrams per Liter



The information in this report is accurate to the best of our knowledge and capability.

In no event shall our liability exceed the cost of these services.

I certify that these results conform to NYS Department of Health Standards and requirements (10 NYDDR Subpart 55-2)

Sample results are based on samples as they are received, unless sampled by CLI.

This report shall not be reproduced, except in full, without written approval from CLI.

Chlorine is not included in NYS DOH ELAP certification program.

Project Name: KAFLINES USED AUTO
Project Number: AL19-1532

Lab Number: L1960809
Report Date: 01/02/20

SAMPLE RESULTS

Lab ID: L1960809-01
Client ID: DRAINAGE
Sample Location: 1912720

Date Collected: 12/16/19 14:00
Date Received: 12/20/19
Field Prep: Not Specified

Sample Depth:
Matrix: Water
Analytical Method: 128,624.1
Analytical Date: 12/23/19 18:49
Analyst: GT

Parameter	Result	Qualifier	Units	RL	MDL	Dilution Factor
Volatile Organics by GC/MS - Westborough Lab						
Benzene	ND		ug/l	1.0	--	1
Toluene	1.2		ug/l	1.0	--	1
Ethylbenzene	ND		ug/l	1.0	--	1
p/m-Xylene	ND		ug/l	2.0	--	1
o-xylene	ND		ug/l	1.0	--	1
Xylenes, Total	ND		ug/l	1.0	--	1

Surrogate	% Recovery	Qualifier	Acceptance Criteria
Pentafluorobenzene	98		60-140
Fluorobenzene	94		60-140
4-Bromofluorobenzene	100		60-140



Project Name: KAFLINES USED AUTO
Project Number: AL19-1532

Lab Number: L1960809
Report Date: 01/02/20

SAMPLE RESULTS

Lab ID: L1960809-01
Client ID: DRAINAGE
Sample Location: 1912720

Date Collected: 12/16/19 14:00
Date Received: 12/20/19
Field Prep: Not Specified

Sample Depth:
Matrix: Water

Parameter	Result	Qualifier	Units	RL	MDL	Dilution Factor	Date Prepared	Date Analyzed	Prep Method	Analytical Method	Analyst
Total Metals - Mansfield Lab											
Aluminum, Total	ND		mg/l	0.100	--	1	12/30/19 11:03	12/31/19 17:10	EPA 3005A	19,200.7	LC
Cadmium, Total	ND		mg/l	0.005	--	1	12/30/19 11:03	12/30/19 19:44	EPA 3005A	19,200.7	MC
Chromium, Total	ND		mg/l	0.010	--	1	12/30/19 11:03	12/30/19 19:44	EPA 3005A	19,200.7	MC
Copper, Total	ND		mg/l	0.010	--	1	12/30/19 11:03	12/30/19 19:44	EPA 3005A	19,200.7	MC
Iron, Total	0.122		mg/l	0.050	--	1	12/30/19 11:03	12/30/19 19:44	EPA 3005A	19,200.7	MC
Lead, Total	ND		mg/l	0.010	--	1	12/30/19 11:03	12/30/19 19:44	EPA 3005A	19,200.7	MC
Zinc, Total	ND		mg/l	0.050	--	1	12/30/19 11:03	12/30/19 19:44	EPA 3005A	19,200.7	MC

