

\* to:

D.E.C. Central  
Office

\* From: Newton Salvage LLC

\* NOV. 14, 2020 (SATURDAY)  
5 PGS. including fax cover.

11/14/20  
SAT.

Hello,

I received this notice by  
certified mail today. I HAVE  
ALREADY COMPLETED THIS  
FORM & mailed it back  
February 4, 2020. SO I'm  
not sure why I received  
this...

Any questions feel free  
to call me @ <sup>(or text)</sup> 315.956-5077

Thank you

JoAnne Newton  
Secretary

**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](http://www.dec.ny.gov)

Zachary D. Newton  
Newton Salvage  
1638 Wilcox Road  
Georgetown, NY 13072

November 12, 2020

Dear: Zachary D. Newton

Re: Issuance of a Notice of Violation (NOV) – Newton Salvage  
[27V20016]  
VDF - small - registration

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 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 2019 by March 1, 2020, 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 2019 annual report forms are available online at:  
<http://www.dec.ny.gov/chemical/52706.html>.



Department of  
Environmental  
Conservation





Department of  
Environmental  
Conservation

DIVISION OF MATERIALS MANAGEMENT

DEPARTMENT USE ONLY	
DEC ACTIVITY #	
DATE VALIDATED	
EXPIRATION DATE	

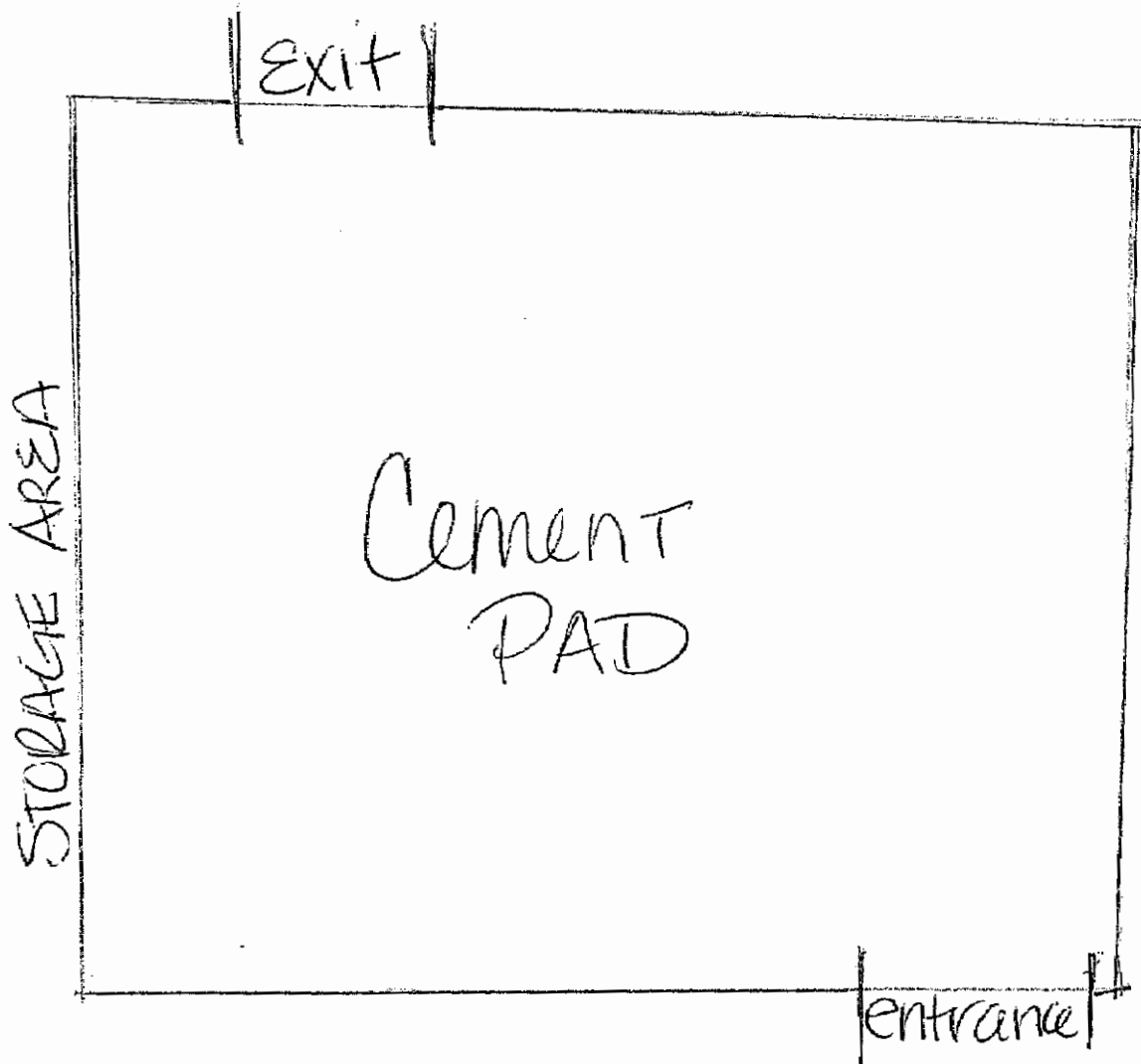
## TRANSITION REGISTRATION APPLICATION FORM FOR VEHICLE DISMANTLING FACILITIES AND SCRAP METAL PROCESSORS

Please read attached instructions (found at the end of this document) before completing this application. This is not a UPA permit. Solid waste management facility operations are not authorized until a registration is validated by the Department. Attach all required information to this form, as described in the instructions.

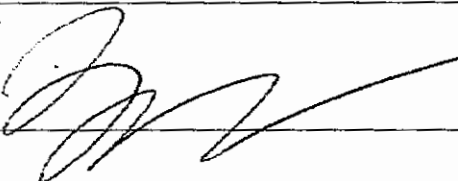
<b>1. FACILITY INFORMATION</b>			
Facility Name <b>Newton SALVAGE LLC</b>		Facility Address <b>11638 WILCOX RD</b>	
City/Town <b>Georgetown</b>	Zip Code <b>13072</b>	Phone <b>315.399.8734</b>	DEC Region <b>7</b>
NYTM-E Coordinate	NYTM-N Coordinate	DEC Activity Number	
<b>2. FACILITY OWNER</b>			
Owner Name <b>ZACHARY NEWTON</b>		Owner Address <b>11638 WILCOX RD</b>	
City/Town/State/Zip Code <b>Georgetown, NY 13072</b>		Owner Phone <b>315.399.8734</b>	Owner Email <b>JAnne(secretary)@sunstarmoon5350@gmail.com</b>
<b>3. FACILITY OPERATOR</b>			
Operator Name <input checked="" type="checkbox"/> Same as facility owner		Operator Address	
City/Town/State/Zip Code		Operator Phone	Operator Email
<b>4. SITE OWNER</b>			
Site Owner Name <input checked="" type="checkbox"/> Same as facility owner		Site Owner Address	
City/Town/State/Zip Code		Site Owner Phone	Site Owner Email
<b>5. PREFERRED CONTACT</b>			
<input checked="" type="checkbox"/> Facility Owner <input type="checkbox"/> Facility Operator <input type="checkbox"/> Site Owner <input type="checkbox"/> Other (provide): _____			
<b>6. FACILITY OPERATING HOURS</b> <b>8am - 4pm Monday - Friday</b>			
<b>7. SERVICE AREA</b> List all municipalities within the service area of the facility <b>Madison County &amp; Town of Georgetown</b>			
<b>8. REGISTRATION TYPE</b>			
<b>Facility Type (check all applicable)</b>			
<input checked="" type="checkbox"/> Vehicle Dismantling Facility - Receive < 25 ELVs/year and store < 50 ELVs on-site at any time [361-7.3(a)(2)]		<input type="checkbox"/> Vehicle Dismantling Facility - Receive > 25 ELVs/year or store > 50 ELVs on-site at any time [361-7.3(b)(2)]	
<input type="checkbox"/> Motor Vehicle Repair Shop - Store 26-50 ELVs on-site at any time [361-7.3(a)(1)]		<input type="checkbox"/> Motor Vehicle Repair Shop - Store > 50 ELVs on-site at any time [361-7.3(b)(1)]	
<input type="checkbox"/> Scrap Metal Processors [361-7.3(a)(3)]		<input type="checkbox"/> Mobile Vehicle Crusher [361-7.3(b)(3)]	

**9. SOLID WASTE RECEIVED** – Please provide estimates for the following:

Material	What is the maximum amount your facility will receive annually?	What is the maximum that will be stored on-site at any given time?
END OF LIFE VEHICLES (# of ELVs)	25	2
SCRAP METAL (tons)	20	1

**10. SITE PLAN** - Please provide a sketch of the site below or on an attached separate sheet.**11. CERTIFICATION**

I hereby affirm under penalty of perjury that information provided on this form and attached statements and exhibits was prepared by me or under my supervision and direction and is true to the best of my knowledge and belief, and that I have the authority as \_\_\_\_\_ (title) of Newton Salvage Inc. (entity) to sign this registration form pursuant to 6 NYCRR Part 360, Section 360.15. By signing this registration form, I affirm that I have read the applicable regulations and will abide by all conditions of the registration requirements under Parts 360, 361, 362, 363, and 365, as applicable. I am aware that any false statement made herein is punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

Printed/Typed Name	Signature	Date
ZACHARY Newton		2/4/20