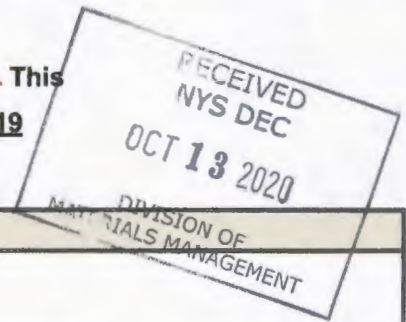


**VEHICLE DISMANTLING FACILITY, MOTOR VEHICLE REPAIR SHOP AND MOBILE VEHICLE  
CRUSHER ANNUAL REPORT**

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: <u>Fulton Auto Salvage Inc.</u>			
FACILITY LOCATION ADDRESS: <u>277 Honey Hill Road</u>	FACILITY CITY: <u>Fulton</u>	STATE: <u>NY</u>	ZIP CODE: <u>13069</u>
FACILITY TOWN: <u>Granby</u>	FACILITY COUNTY: <u>Oswego</u>	FACILITY PHONE NUMBER: <u>315-592-5559</u>	
FACILITY NYS PLANNING UNIT: (A list of NYS Planning Units can be found at the end of this report). <u>Oswego County</u>			NYSDEC REGION #: <u>7</u>
FACILITY TYPE: <input checked="" type="checkbox"/> Vehicle Dismantler DMV I.D. # <u>7081997</u>	<input type="checkbox"/> Motor Vehicle Repair Shop <input type="checkbox"/> Mobile Vehicle Crusher	NYS DEC ACTIVITY CODE:	
FACILITY CONTACT: <u>Steven Woodworth II</u>	<input type="checkbox"/> public <input checked="" type="checkbox"/> private	CONTACT PHONE NUMBER: <u>315-430-3690</u>	CONTACT FAX NUMBER:
CONTACT EMAIL ADDRESS: <u>Fulton auto inc @ Gmail . Com</u>			
OWNER INFORMATION			
OWNER NAME: <u>Steven Woodworth</u>	OWNER PHONE NUMBER: <u>315 - 592 - 5559</u>	OWNER FAX NUMBER:	
OWNER ADDRESS: <u>279 Honey Hill Road</u>	OWNER CITY: <u>Fulton</u>	STATE: <u>NY</u>	ZIP CODE: <u>13069</u>
OWNER CONTACT:	OWNER CONTACT EMAIL ADDRESS: <u>Fulton auto inc @ gmail . com</u>		
OPERATOR INFORMATION			
OPERATOR NAME:	<input checked="" type="checkbox"/> same as owner	<input type="checkbox"/> public	<input checked="" 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 checked="" type="checkbox"/> Facility Contact <input type="checkbox"/> Owner Contact <input type="checkbox"/> Other (provide):			
Preferred individual to receive correspondence: <input checked="" 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: 106
  
- Provide the number of ELVs crushed and/or removed from the facility from January 1 to December 31: 60
  
- Provide the number of ELVs stored at the facility as of December 31: 417
  
- Provide the highest number of ELVs stored at the facility at any one time from January 1 to December 31: 477
  
- Provide the approximate area used for the storage of vehicles (acres): 8 acres
  
- Provide the names of scrap metal processors to which you sold or sent decommissioned ELVs:
  - 1) Union Scrap Processing
  - 2) Flood Drive Properties Inc (Murtaugh Recycling)
  - 3) \_\_\_\_\_

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

- Provide the number of ELVs crushed from January 1 to December 31: \_\_\_\_\_
  
- Provide the names of each facility where you crushed decommissioned ELVs:
  - 1) \_\_\_\_\_
  - 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)	150 lbs	40 lbs.			Re use
Used Oil** (gallons)	500 gal.	150 gal	—	—	Used in oil furnace
Diesel Fuel (gallons)	—	—	—	—	didn't dismantle any Diesel's
Gasoline (gallons)	700 gal	20 gal	—	—	Re use fuel in company Trucks.
Engine Coolant/ Antifreeze (gallons)	200 gal	70 gal	130 gal		Recycle and Re-use
Window Washing Fluid (gallons)	80 gal	10 gal	70 gal		
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	250 Tons.	250 Tons			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Aluminum Scrap Metal	2 Tons.	2 Tons.			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Lead Weights	—	—	—		<input type="checkbox"/> Yes <input type="checkbox"/> No
Non – Ferrous Scrap Metal	—	—	—		<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 0  
(Number)

ABS 70  
(Number)

Indicate permitted facility or permitted transporter accepting mercury containing devices:

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### SECTION 6 – AIR BAGS COLLECTED

Provide the number of air bags recovered.

Number of Air Bags Removed: 93

Number of Air Bags Deployed: 93.

Indicate permitted facility or permitted transporter accepting air bags:

Deployed and placed in scrap cars.

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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:

100

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

Interstate

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:

600

as of December 31

Number of used tires available for sale on-site:

120

as of December 31

Number of used tires sold:

80

during operating year

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

300

during operating year

Indicate name of facility(ies) accepting waste tires:

Osuego County Solid waste

## 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 - 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.

Steven Woodworth  
Signature

10-8-20  
Date

Steven Woodworth  
Name (Print or Type)

VP.  
Title (Print or Type)

Felton auto inc @ GMAIL.com  
Email (Print or Type)

277 Honey Hill Road  
Address

Felton  
City

NY. 13069  
State and Zip

(315) 592-5559  
Phone Number

ATTACHMENTS:  YES  NO