Southern Tier Auto Center 13008 Dowd Rd, Springville, NY 14141 716-592-2150 / fax: 716-592-2688

fax

TO:	New York State Department of Environmental Conservation	FROM:	Linda Fisher	
FAX:	518-402-9041	PAGES:		***************************************
PHONE	:	DATE:	January 23, 2020	· metra Nhaha
RE:	Annual Report			

Comments:

01/53/5050 13:21 EYX

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

This

annual report is for the year of operation from January 01, 2019 to December 31, 2019

SECTION 1 - FACILITY INFORMATION							
	FACILITY	INFORMATION		43,000			
FACILITY NAME:	A 1. 1	and the same					
Southern Tier Auto Center Frc.							
FACILITY LOCATION ADDRESS:	FACILITY LOCATION ADDRESS: FACILITY CITY: STATE: ZIP CODE:						
13008 Dowd Rd	quille	L	y 14141				
FACILITY TOWN:	FACILITY		FACILITY	PHONE NUMBER:			
Springville	(Eri	<u>e</u>	(7/4)	92-2150			
FACILITY NYS PLANNING UNIT:		10 10		NYSDEC 9			
Northeast, Southtowns, Solid	Waste NY	angement Board(1	NEST)	REGION #:			
FACILITY TYPE: Vehicle Dismantler	Motor	Vehicle Repair Shop	Mot	alle Vehicle Crusher			
DMV1.D.#_ 7086226							
FACILITY CONTACT:	Dubilc	CONTACT PHONE		TACT FAX NUMBER:			
Damian Fisher	private	NUMBER: 592-215	0 171	4)592-2688			
CONTACT EMAIL ADDRESS:	x			<u> </u>			
	OWNER	INFORMATION		, a/d-			
OWNER NAME:		HONE NUMBER:	OWNER F	AX NUMBER:			
Linda Fisher	· · · · · · · · · · · · · · · · · · ·	141-3349					
owner address: 849 Trish Rd	OWNER C	oity: 1der		ATE: ZIP CODE: 74033			
OWNER CONTACT: OWNER CONTACT EMAIL ADDRESS:							
	South	erntier autocea	ter ogn	nail.com			
	OPERATO	R INFORMATION	7 7				
OPERATOR NAME: (2) same as owner				ublic ivate			
	PREI	FERENCES					
Preferred address to receive correspondence Other (provide):): Karility lo	cation address	Owner i	eddress			
Preferred email address: Facility Contact Other (provide):	Æ	wner Confact	. 12.2 Par	, , , , , , , , , , , , , , , , , , ,			
Preferred individual to receive correspondent Other (provide):	xe: ☐Faciel	ty Contact Province	er Contact	and the state of t			
Did you operate in 20197 X Yes; Complet	te this form.		<u> </u>				
No; Complete and submit Sections 1 and 12.							

Provide the num	ber of ELVs received from January 1 to December 31:	
	,,,,,	
	iber of ELVs crushed and/or removed from the facility	4
from January 1 t	to December 31:	
Provide the num	ber of ELVs stored at the facility as of December 31:	225
• Provide the high	est number of ELVs stored at the facility	225
at any one time t	from January 1 to December 31:	<u>~~~~~~</u>
		. 1
Provide the appr	roximate area used for the storage of vehicles (acres):	acres
• Provide the nam	nes of scrap metal processors to which you sold or sent d	ecommissioned ELVs:
1)	Metallico	
2)		
31		
SECTION 2B N Provide the num	MOBILE CRUSHERS - END-OF-LIFE VEHICLI aber of ELVs crushed from January 1 to December 3: tes of each facility where you crushed decommissioned E	~/x
Frovide the num	MOBILE CRUSHERS - END-OF-LIFE VEHICLI ober of ELVs crushed from January 1 to December 3:	~/x
• Provide the num • Provide the nam 1)	MOBILE CRUSHERS - END-OF-LIFE VEHICLI ber of ELVs crushed from January 1 to December 3: les of each facility where you crushed decommissioned E	~/x
• Provide the num • Provide the nam 1)	MOBILE CRUSHERS - END-OF-LIFE VEHICLI aber of ELVs crushed from January 1 to December 3: tes of each facility where you crushed decommissioned E	~/x
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• Provide the num • Provide the nam 1)	MOBILE CRUSHERS - END-OF-LIFE VEHICLE ober of ELVs crushed from January 1 to December 3: tes of each facility where you crushed decommissioned E	~/x
• Provide the num • Provide the nam 1)	MOBILE CRUSHERS - END-OF-LIFE VEHICLI aber of ELVs crushed from January 1 to December 3: les of each facility where you crushed decommissioned E	~/x
Frovide the num Provide the nam Provide the nam Provide the nam Provide the nam Provide the nam	MOBILE CRUSHERS - END-OF-LIFE VEHICLE ober of ELVs crushed from January 1 to December 3: tes of each facility where you crushed decommissioned E	~/x

SECTION 3 - WASTE FLUIDS RECOVERED

Complete this table by reporting <u>volumes</u> of End-of-Life Vehicle (ELV) waste fluids managed at the facility during the reporting period. <u>Qualitative responses (i.e. $\sqrt[h]{s}$ or X's) are not acceptable</u>. 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		30	***************************************		
Used Oil**	500				
Diesel Fuel	500 30				
Gasoline	5				
Engine Coolent/ Antifreeze	5		7,5 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C		
Window Washing Fluid	12		, VEW 24		
Other			3.NEBEGA.NE-SAA(63Ma,,SESAA(3.344,)		
			i	2-11	

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.

Stored On Site		NYS (or state if other than New York) Mc + (lico	Me	icrap etai essor No No No
		Metallico	☐Yes ☐Yes ☐Yes	□No □No □No
		Metallico	□Yes □Yes □Yes	□No □No □No
		Metallico	□Yes	□No
CTION 5 - MERG			□Yes	□No
CTION 5 - MERC				
CTION 5 - MER			∐Yes	<u> </u>
CTION 5 - MER			1	□No
nblies (ABS). 2 r) nitted transporter acce	epting mercury co	ABS (Number) ontaining devices:		
	Num		4	
	ecovered.	ecovered.	Number of Air Bags Deployed:	Number of Air Bags Deployed:

SECTION 7 – LEAD-ACID BATTERIES COLLECTED

Provide the number of lead-acid batteries <u>recovered</u> and their disposition.	7.1	
Number of Lead-Acid Batteries collected from ELVs:		
Indicate permitted facility or permitted transporter accepting lead-acid batteries:		
113 Evans st	w	
113 Evans st Hambing NY.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Any materials disposed must undergo a hazardous waste determination and prope hazardous.	er handling, sto	rage and disposal, if
SECTION 8 WASTE TIRES COLLEC	CTED	
Number of waste tires stored on-site:	200	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:	600	during operating year
Indicate name of facility(les) accepting waste thres:		
SGS Recovery	······································	
		- A
SECTION 9 - SELF INSPECTION	ie	
SECTION 9 - SELF INSPECTION Number of self-inspections conducted for the year:	.	12
Are self-inspection records up-to-date with inspector name, what was inspecte	d, time and da	te of inspection?
	ed for leaks/spi	illa?
SECTION 10 - PROBLEMS		A CONTRACTOR OF THE CONTRACTOR
Were any problems encountered during the reporting period (e.g., specific occurrence)?	urrences which	have led to changes in
☐Yes ☑No If yes, attach additional sheets identifying each problem and t	he methods for	resolution of the problem
SECTION 11 - CHANGES		M. (**)
Were there any changes from approved reports, plans, specifications, and per	rmit conditions:	?
Yes (No If yes, attach additional sheets identifying changes with a just	tification for ea	ch change.

SECTION 12 - COMPLIANCE CERTIFICATION

As of December 31, 2018:

	18.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.
	-
	NA YES NO
 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? 	
2. Is a system in place to control vegetation and prevent it from encroaching onto fire access lanes or driveways?	
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?	
Have all observed leaks been remedied or contained?	
7. Does your facility have a written Contingency Plan?	
Are facility personnel trained to implement the Contingency Plan?	
Does your Contingency Plan include actions to be taken in the event of the follow	ing?
9a. Fire.	
9b. Splil or release of vehicle waste fluids.	
9c. Unauthorized material received at facility.	
Are spills of waste fluids, if any occur, reported to the NYSDEC Spills Hotline within two hours of detection?	
Are all vehicle residues prevented from migrating from or running off your property?	
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?	
14. Are waste fluids kept from being discharged onto the ground or into surface waters?	
15. Is access to your facility controlled by: fences, gates, sign and/or natural barriers (not vehicles)?	
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 draining, crushing, etc.?	used for vehicle dismentling, fluid
17a. Cleaning daily.	
17b. Cleaning spills as they occur.	
17c. Collecting and properly disposing of absorbent materials.	

	NA Ye					
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, transmiss axle fluid, brake fluid, power steering	sion fluid, transable fluid, front and near g fluid, coolant, and fuel).					
18b. Lead acid batteries.						
18c. Mercury switches or other mercury co	ntaining devices, if any.					
18d, Refrigerants, if any.						
18e. Air begs.						
18f. PC8 capacitors, if any.						
19. Are fluids stored separately & in container contents?	s that are compatible with their					
20. Are fluids stored in closed containers?						
21. Are containers which contain waste fluids leaking?	in good condition and not visibly					
22. Are containers clearly and legibly labeled t	to describe their contents?					
23. Are containers stored on a bermed pad co material?	nstructed of concrete or equivalent					
24. Are lead-acid batteries stored upright and	off the ground?					
25. Are lead-acid batteries covered to protect precipitation?	them from					
26. Are all lead-acid batteries sent for recycling	g within one-year of receipt?					
 Are <u>leaking</u> lead-acid batteries, if any are containers separated from intact batteries 						
27a. Are provisions in place to absorb a	ny acid leakage?					
28. Are mercury switches and other mercury of appropriate, labeled containers and then						
 Are PCB capacitors, if any are encountere appropriate, labeled containers for recycli 	nd, removed and stored in ing or disposal?					
30. Is used oil stored in accordance with local the NYS Uniform Fire Prevention & Buildi						
31. If sent off-site, is used oil transported via a	permitted hauler?	1 11				
32. If you do not burn used oil onsite check N/	A for 32a., 32b., 32c. If you do, then answer 32a., 32b.,	32c:				
32a. Is used oil burned in a used oil space capacity of 0.5 million BTU's per ho						
32b. Do on-site space heaters burn only u received from household do-it-your	self generators?					
32c. Are combustion gases from used oil	space heaters vented to the outside					

	NA yes NO
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?	
35. Are sludges properly recycled or disposed?	
36. Are used oil filters properly drained, crushed or dismantied?	
37. Are drained oil fifters property recycled or disposed?	
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?	图□□
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 Armual Certification Report for the SPDES MSGP been submitted within the previous year?	母口口
39. If your facility does not handle cleaning solvents, degreesers, 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?	pounds
Do you have any other Environmental Conservation Law or regulatory violations? (Attach additional sheets as necessary.)	
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: SWMFannuaireport@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.

(2) of the Environmental Conservation Law at	IG SCORDIT E TO TO OF RIGHT EDW.
Signature	1/23/2020 Date
Lindas Fisher Name (Print or Type)	President Title (Print or Type)
Southerntiel Auto	centeregnail.com
13008 Dowd Rd	Springuille Springuille
NU JUIUI State and Zip	710,592, 2150 Phone Number

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ATTACHMENTS:	1	VEC	1 1	NO
ALIACHMENIS:		I YES		INU