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

Submit the Annual Report no later than March 1, 2021. This annual report is for the year of operation from <u>January 01, 2020</u> to <u>December 31, 2020</u>

SECTION 1 - FACILITY INFORMATION

SECTION	Tree Co. P. Strategy and Printers of	INFORMATIONS		/N			
FACILITY NAME:			A SHAROLD A	<u> </u>	02209400944 pt 28 to	Control of the Contro	
Country AntoKeo	ychi	ng Systa	m				
FACILITY LOCATION ADDRESS:	FACILITY	_		STAT	- 1	ZIP CODE	
371 Willow Hence	Cire	enwich		NY		1283	4
FACILITY TOWN:	FACILITY	,		FACILITY P		!	·
Easten	Wasi	heag ten		518-	196	- 04	16
FACILITY NYS PLANNING UNIT: (A list of NYS	S Planning Uni	ts can be found at the			NYS[ REGI	OEC ON#:	5
FACILITY TYPE: XVehicle Dismantler	Motor	Vehicle Repair SI	1	NYS DEC ACT	IVITY	CODE:	
DMV I.D. # 7023349	Mobile	Vehicle Crusher					
FACILITY CONTACT:	public	CONTACT PHO			CT FA	X NUMB	ER:
Honald K. MacNeil	private	NUMBER: 518-796-0	041	6 NO	ne		
CONTACT EMAIL ADDRESS:							
	CONTRACTOR CONTRACTOR	jurgirmationist				<u> </u>	<u> </u>
Downer NAME: Monald K. Mac Neil		HONE NUMBER: 196-04-10	,	OWNER FA		IBER:	
OWNER ADDRESS:	OWNER C		_	STAT		ZIP CODE	•
371 Willow Arenue		nwich		N	<i>ij</i>	1283	: / 1
OWNER CONTACT: Konald K. MacNeil	ł	ONTACT EMAIL A	ADDRI	ESS:			
		SELVE ENEMBER OF WILES					
OPERATOR NAME: Same as owner				□pub □priv			
	(CIRE)	erances a					
Preferred address to receive correspondence:  Other (provide):	Facility loa	cation address		Owner add	dress		
Preferred email address:  Facility Contact  Other (provide):	Ov	vner Contact	VO	u			
Preferred individual to receive correspondence Other (provide):	e: Facilit	y Contact	Owne	er Contact			
Did you operate in 2020 Yes; Complete	this form.						:
☐ No; Complete	and submit	Sections 1 and 12.					,
						<del></del>	<del></del>

<ul> <li>Provide the number of ELVs received from January 1 to D</li> </ul>	ecember 31:		
Provide the number of ELVs crushed and/or removed from	m the facility		
from January 1 to December 31:			
<ul> <li>Provide the number of ELVs stored at the facility as of De</li> </ul>	cember 31:	2402	
Provide the highest number of ELVs stored at the facility		2,10 2	- :
at any one time from January 1 to December 31:		2402	
<ul> <li>Provide the approximate area used for the storage of veh</li> </ul>	icles (acres):	22	acres
Provide the names of scrap metal processors to which you	u sold or sent deco	mmissioned ELVs	:
1) Ronsselear Iron; Steel		,	
1) 1701/3Section from ; Cita			
2) I havenot crushed in 10 ye	lars		:
0			:
•			
3)			
3)			:
	IFE VEHICLES	(ELVs) PROCE	SSED
SECTION 2B MOBILE CRUSHERS - END-OF-LI	IFE VEHICLES	(ELVs) PROCE	ESSED
		(ELVs) PROCE	ESSED
SECTION 2B MOBILE CRUSHERS - END-OF-LI  Provide the number of ELVs crushed from January 1 to D	ecember 3:	0	ESSED
SECTION 2B MOBILE CRUSHERS - END-OF-LI	ecember 3:	0	ESSED
SECTION 2B MOBILE CRUSHERS - END-OF-LI  Provide the number of ELVs crushed from January 1 to D	ecember 3:	0	ESSED
• Provide the number of ELVs crushed from January 1 to D • Provide the names of each facility where you crushed dec	ecember 3:	0	ESSED
• Provide the number of ELVs crushed from January 1 to D • Provide the names of each facility where you crushed dec	ecember 3:	0	ESSED
• Provide the number of ELVs crushed from January 1 to D • Provide the names of each facility where you crushed dec	ecember 3:	0	ESSED
• Provide the number of ELVs crushed from January 1 to D • Provide the names of each facility where you crushed dec	ecember 3:	0	ESSED
• Provide the number of ELVs crushed from January 1 to D • Provide the names of each facility where you crushed dec	ecember 3:	0	ESSED
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• Provide the number of ELVs crushed from January 1 to D • Provide the names of each facility where you crushed dec  1)	ecember 3:	0	ESSED
• Provide the number of ELVs crushed from January 1 to D • Provide the names of each facility where you crushed dec 1)	ecember 3:	0	ESSED

### 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 Volume					Destination Name & Address			
Waste Fluid Recovered	Used on-site (oil heater, etc.)	Stored on-site at year-end	Sold/ Recycled off-site		osed -site*	(Indicate permitted facility or permitted Part 364 transporter accepting waste fluids.)			
Refrigerant (pounds)	0	0	0	0					
Used Oil** (gallons)	0	0	0	0					
Diesel Fuel (gallons)	0	0	0	0					
Gasoline (gallons)	0	0	o	Ó					
Engine Coolant/ Antifreeze (gallons)	0	0	0	Ċ	>				
Window Washing Fluid (gallons)	0	0	0	0					
Other (specify)	0	0	0	0					

<sup>\*</sup> Any fluids disposed must undergo a hazardous waste determination and proper handling, storage, and disposal, if hazardous.

<sup>\*\*</sup> 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.

	Received	01 O 014-			Destination				
Material Types	(tons)	Stored On Site (tons)	Sent Off Site (tons)	N'	/S <u>Planning Unit (</u> or state if other than New York)	To Scrap Metal Processo			
Ferrous Scrap Metal	0	0	0			∐Yes	<b>⊡</b> No		
Aluminum Scrap Metal	0	0	0			□Yes	₽₩o		
Lead Weights	0	0	0			□Yes	Ū₩o		
Non – Ferrous Scrap Metal	0	0	0			Yes	⊠No		
Other (specify):	0	0	$\mathcal{O}$			Yes	Ø№		
			-			□Yes	No		

## SECTION 5 - MERCURY SWITCHES COLLECTED

Provide the number of mercury-containing device (H&TS) and antilock brake assemblies (ABS).	es <u>recovered</u> . Including but not limited to hood & trunk lighting switches
H&TS()(Number)	ABS (Number)
Indicate permitted facility or permitted transporte	r accepting mercury containing devices:
SECTIO	6 – AIR BAGS COLLECTED
Provide the number of air bags recovered.	
Number of Air Bags Removed:	Number of Air Bags Deployed:
Indicate permitted facility or permitted transpor	er accepting air bags:
NA	
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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:	
Indicate permitted facility or permitted transporter accepting lead-acid batterio	es:
Any materials disposed must undergo a hazardous waste determination and hazardous.	proper handling, storage and disposal, if
SECTION 8 – WASTE TIRES CO	LLECTED
Number of waste tires stored on-site:	245 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:	during operating year
Indicate name of facility(ies) accepting waste tires:	
SECTION 9 – SELF INSPECT	TIONS
Number of self-inspections conducted for the year:	
Are self-inspection records up-to-date with inspector name, what was ins	pected, time and date of inspection?
At a minimum, are fluid storage areas, vehicles, vehicle storage areas ins  [X]Yes   No	spected for leaks/spills?
SECTION 10 - PROBLEM	IS
Were any problems encountered during the reporting period (e.g., specific facility procedures)?	c occurrences which have led to changes in
Yes No If yes, attach additional sheets identifying each problem	and the methods for resolution of the problem
SECTION 11 - CHANGE	S
Were there any changes from approved reports, plans, specifications, an	d 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:

				Date of Return to
Waste Management Compliance Checklist	NA	Yes	No	Compliance
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?	Ø			
Is a system in place to control vegetation and prevent it from encroaching onto fire access lanes or driveways?		D		
3. Have you recorded the date of receipt for all end-of-life vehicles received?		回		
Are the end-of-life vehicle records available on-site?		V		
5. Have all end-of-life vehicles been inspected, upon arrival, for leaking fluids and unauthorized wastes?		U		
6. Have all observed leaks been remedied or contained?		U		
7. Does your facility have a written Contingency Plan?		V		
8. Are facility personnel trained to implement the Contingency Plan?				
9. Does your Contingency Plan include actions to be taken in the event of the following	?		,	
9a. Fire.	- CHANGE	V		
9b. Spill or release of vehicle waste fluids.		U		
9c. Unauthorized material received at facility.		U		
10. Are spills of waste fluids, if any occur, reported to the NYSDEC Spills Hotline within two hours of detection?		U		
11. Are all vehicle residues prevented from migrating from or running off your property?	THE STATE OF	<b>U</b>		
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?		V		
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 use draining, crushing, etc.?	d for v	/ehicle	disma	ntling, fluid
17a. Cleaning daily.		Image: Control of the		
17b. Cleaning spills as they occur.				
17c. Collecting and properly disposing of absorbent materials.		Ø		

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1					Date of Heading to
	Waste Management Compliance Checklist	NA	Yes	No	Compliance
18.	Have the following wastes been drained, removed, deployed, collected and/or store practices, prior to vehicle crushing or shredding?	ed follov	ving ber	st mana	agement
	18a. Fluids (including engine oil, transmission fluid, transaxle fluid, front and rear axle fluid, brake fluid, power steering fluid, coolant, and fuel).		回		
	18b. Lead acid batteries.		V		-
	18c. Mercury switches or other mercury containing devices, if any.	V			
	18d. Refrigerants, if any.		Y		
	18e. Air bags.	M			
	18f. PCB capacitors, if any.	V			
19.	Are fluids stored separately & in containers that are compatible with their contents?				
20.	Are fluids stored in closed containers?		4		
21.	Are containers which contain waste fluids in good condition and not visibly leaking?				
<u> </u>	Are containers clearly and legibly labeled to describe their contents?		V		
23.	Are containers stored on a bermed pad constructed of concrete or equivalent material?				
24.	Are lead-acid batteries stored upright and off the ground?		W		
25.	Are lead-acid batteries covered to protect them from precipitation?		V		
26.	Are all lead-acid batteries sent for recycling within one-year of receipt?		V		
27.	Are <u>leaking</u> lead-acid batteries, if any are encountered, stored in leak-proof containers separated from intact batteries?		V		·
	27a. Are provisions in place to absorb any acid leakage?		V		
28.	Are mercury switches and other mercury containing devices stored in appropriate, labeled containers and then sent for recycling?	4			
29.	Are PCB capacitors, if any are encountered, removed and stored in appropriate, labeled containers for recycling or disposal?	回			
30.	Is used oil stored in accordance with local building codes, local fire codes, and the NYS Uniform Fire Prevention & Building Code?				
31.	If sent off-site, is used oil transported via a permitted hauler?		V		
32.	If you do not burn used oil onsite check NA for 32a., 32b., 32c. If you do, then answ	ver 32a.	, 32b.,	32c;	
	32a. 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?				
	32b. Do on-site space heaters burn only used oil that is generated on-site or received from household do-it-yourself generators?	回			
	32c. Are combustion gases from used oil space heaters vented to the outside ambient air?				

				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?	е,	प		
34. Are sludges from sumps and oil/water separators stored in covered, closed ar labeled containers?	nd	U		
35. Are sludges properly recycled or disposed?		7		
36. Are used oil filters properly drained, crushed or dismantled?	THE STATE OF			
37. Are drained oil filters properly recycled or disposed?		4		-
<ol> <li>If your facility does not require an SPDES Multi-Sector General Permit (MSGF for Stormwater Discharge, check NA for 38a, 38b, 38c. If your facility requires an SPDES MSGP answer 38a, 38b, 38c:</li> </ol>				
38a. If required by the SPDES MSGP, has a Stormwater Pollution Prevention Plan been prepared for this facility?	on 🔟			
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?	回			
38c. Has the facility's Annual Certification Report for the SPDES MSGP beer submitted within the previous year?	n 🗹			
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?	s i		· 	pounds
NA				gallons
Do you have any other Environmental Conservation Law or regulatory violations (Attach additional sheets as necessary.)	s?			
COMMENTS? (Attach additional sheets if necessary)		-		
COMMENTS? (Attach additional sheets if necessary)				
COMMENTS? (Attach additional sheets if 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: 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.

2703(2	<ol> <li>of the Environmental Conservation Law and s</li> </ol>	section 210.45	of the Penal Law.
_	Knold & Mac Well Signature		1/21
_	Ronald K. Mac Neil	O	une ~
	Name (Print or Type)	ı itie (i	Print or Type)
	None		
	Email (Print o	or Type)	
	371 Wilbur Avenue	Gree	nwich
	Address		City
	NY 12834	518,79	16. 0416 ne Number
	State and Zip	Pho	ne Number

ATTACHMENTS: YES NO