# 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** 

FACILITY INFORMATION							
FACILITY NAME:							
Vernon's 2	Ingine	+ /ransmiss	510N	LLC			
FACILITY LOCATION ADDRESS:	FACILITY	CITY:		STATE:	ZIP CODE:		
2758 RT 34B	Aur	ora		NY	13026		
FACILITY TOWN:	FACILITY	COUNTY;	FACILITY PHONE NUMBER:				
Ledyard FACILITY NYS PLANNING UNIT: (A list of N)	Ca	yuga	315	315-364-8841			
		ts can be found at the end of	this repor		SDEC 7		
Cayuga County			Societies es	REC	GION #:		
FACILITY TYPE: Vehicle Dismantler	Motor	Vehicle Repair Shop	NYS DE	CACTIVIT	Y CODE:		
DMV I.D. # <u>7003172</u>	_ Mobile	Vehicle Crusher	06	5 JO	0		
FACILITY CONTACT:	public	CONTACT PHONE	C	CONTACT	FAX NUMBER:		
Ed Vernon	private	NUMBER: 315-364	-8841	315-3	164-8841		
CONTACT EMAIL ADDRESS:							
	OWNER	NFORMATION					
OWNER NAME:	1	HONE NUMBER:		ER FAX NL			
Edward CVernon		4-8841	3/	5-164-	Y		
OWNER ADDRESS:	OWNER CITY: STATE: ZIP CODE:						
OWNER CONTACT:	924 Oublin Hill Rd Aurora NY 13026 OWNER CONTACT: OWNER CONTACT EMAIL ADDRESS:						
Edward C Vernon edc Vernon @ Gmail. Com							
OPERATOR INFORMATION							
OPERATOR NAME: Same as owner Spublic							
	·		, =	private			
PREFERENCES							
Preferred address to receive correspondence:  Facility location address							
Preferred email address: Facility Contact Owner Contact  Other (provide):							
Preferred individual to receive correspondence:							
Did you operate in 2020 Yes; Complete this form.							
☐ No; Complete and submit Sections 1 and 12.							

- Provide the number of ELVs received from January 1 to December 21:	2.3
Provide the number of ELVs received from January 1 to December 31:	
Provide the number of ELVs crushed and/or removed from the facility	
from January 1 to December 31:	
	<b>4</b> 7
Provide the number of ELVs stored at the facility as of December 31:	
Provide the highest number of ELVs stored at the facility	27
at any one time from January 1 to December 31:	3/
	2 11
Provide the approximate area used for the storage of vehicles (acres):	
Provide the names of scrap metal processors to which you sold or sent declared.	commissioned ELVs:
1) Pick + Pull auto Parts	
1) 17017 7 1011 4010 141/3	
2)	
2)	
3)	
3)	
3)	
	S (FLVs) PROCESSED
	S (ELVs) PROCESSED
SECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLES	S (ELVs) PROCESSED
SECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLES	S (ELVs) PROCESSED
SECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLES Provide the number of ELVs crushed from January 1 to December 3:	
ECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLES  Provide the number of ELVs crushed from January 1 to December 3:  Provide the names of each facility where you crushed decommissioned ELVs	
ECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLES  Provide the number of ELVs crushed from January 1 to December 3:  Provide the names of each facility where you crushed decommissioned ELVs	
• Provide the number of ELVs crushed from January 1 to December 3:  • Provide the names of each facility where you crushed decommissioned EL'  1)	
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• Provide the number of ELVs crushed from January 1 to December 3:  • Provide the names of each facility where you crushed decommissioned ELT1)	
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• Provide the number of ELVs crushed from January 1 to December 3:  • Provide the names of each facility where you crushed decommissioned EL*  1)	
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• Provide the number of ELVs crushed from January 1 to December 3:  • Provide the names of each facility where you crushed decommissioned EL*  1)	
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#### **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.  $\sqrt{s}$  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 (pounds)	-0-	- 0-			
Used Oil** (gallons)	31	-0-			SaFety Kleen
Diesel Fuel (gallons)	15	-0-			
Gasoline (gallons)	100	-0-			
Engine Coolant/ Antifreeze (gallons)	Recycled	-0-			
Window Washing Fluid (gallons)	Recycled Recycled	-0-			
Other (specify)					

<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. Destination Stored On Site Sent Off Site Received **Material Types** (tons) (tons) (tons) To Scrap NYS Planning Unit (or state if Metal other than New York) Processor Ferrous Scrap Yes No Cayuga County Metal Aluminum Yes No Scrap Metal Lead Weights Yes No Non - Ferrous Yes No Scrap Metal XNo Other (specify): Yes InterState Battery Batteries ☐Yes □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). ABS <u>- O -</u> (Number) H&TS \_ O \_ (Number) Indicate permitted facility or permitted transporter accepting mercury containing devices: I leave devices in place when transported to recycling SECTION 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 transporter accepting air bags: Pick + Pull autoparts

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## **SECTION 7 – LEAD-ACID BATTERIES COLLECTED**

Trovide the number of lead-acid batteries <u>recovered and their disposition.</u>				
Number of Lead-Acid Batteries collected from ELVs: 21				
Indicate permitted facility or permitted transporter accepting lead-acid batter				
Inter State Battery				
Any materials disposed must undergo a hazardous waste determination and hazardous.	d proper handling, st	orage and disposal, if		
SECTION 8 – WASTE TIRES CO	LLECTED			
Number of waste tires stored on-site:	92	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:				
Tires Stay with Vehicles to be red	cycled at	Pick+Pull auto		
Parts.  Clay Ridge Trucking tire reme	ove1.			
Je mente property				
SECTION 9 – SELF INSPECT				
Number of self-inspections conducted for the year:	1	Monitored always		
Are self-inspection records up-to-date with inspector name, what was ins ☐ Yes ☒ No	spected, time and da	te of inspection?		
At a minimum, are fluid storage areas, vehicles, vehicle storage areas ins  Yes ☐No	spected for leaks/sp	ills?		
SECTION 10 - PROBLEM	MS			
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	nd permit conditions?			
Yes No If yes, attach additional sheets identifying changes with	a justification for each	ch change.		

## **SECTION 12 – COMPLIANCE CERTIFICATION**

## As of December 31, 2018:

	Waste Management Compliance Checklist	NA	Yes	No	Date of Return to Compliance
1. MC	If your facility stores LESS THAN 1,000 tires, check NA. If your facility stores DRE THAN 1,000 tires, do you have a PART 360 permit for tire storage?	X			
2.	Is a system in place to control vegetation and prevent it from encroaching onto fire access lanes or driveways?	ļ,	X		
3.	Have you recorded the date of receipt for all end-of-life vehicles received?		X		
4.	Are the end-of-life vehicle records available on-site?		X		
5.	Have all end-of-life vehicles been inspected, upon arrival, for leaking fluids and unauthorized wastes?		X		
6.	Have all observed leaks been remedied or contained?		$\boxtimes$		
7.	Does your facility have a written Contingency Plan?			X	
8.	Are facility personnél trained to implement the Contingency Plan?		$\boxtimes$		
9.	Does your Contingency Plan include actions to be taken in the event of the following	ng?			
	9a. Fire.		M		
	9b. Spill or release of vehicle waste fluids.		X		
	9c. Unauthorized material received at facility.	X			
10.	Are spills of waste fluids, if any occur, reported to the NYSDEC Spills Hotline within two hours of detection?		X		
11.	Are all vehicle residues prevented from migrating from or running off your property?		X		
12.	Is dust controlled to prevent interference with facility operations or from leaving facility site?		X		
13.	Are vectors (mosquitoes, rats, mice, etc.) controlled to prevent interference with facility operations?		X		
14.	Are waste fluids kept from being discharged onto the ground or into surface waters?		X		
15.	Is access to your facility controlled by: fences, gates, sign and/or natural barriers (not vehicles)?		$\boxtimes$		
	15a. Are the access controls working (i.e. controlling access)?		X		
16.	Are fluids drained from end-of-life vehicles on a pad constructed of concrete or equivalent material?		X		
17.	Are you doing the following with your concrete (or equivalent surface) pad that is used raining, crushing, etc.?	sed for	vehicle	dismaı	ntling, fluid
	17a. Cleaning daily.		$\boxtimes$		
	17b. Cleaning spills as they occur.		X		
	17c. Collecting and properly disposing of absorbent materials.		X		

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

			Date of Return to
NA	Yes	No	Compliance
		$\boxtimes$	
	X		
	X		
	X		
	X		
$\boxtimes$			
$\boxtimes$			
$\boxtimes$			
	_	NA	_ pounds
	_/	VA	_ gallons

#### 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.

Edward Clemon Signature	2-20-2021 Date
Edward C Vernon Name (Print or Type)	Title (Print or Type)
	, , , ,
ed CVernon @ G Email (Pri	Mail. Com
Email (Pri	ntor (ype)
2758 R7348	<u>Aurora</u> Citu
Address	City
NY 13026	(315)364 - 8841
State and Zip	Phone Number

ATTACHMENTS: YES NO

\* This page for reference only. Please do not return with submittal. \*

## Division of Materials Management New York State Department of Environmental Conservation Albany, New York 12233-7260

Forms for all solid waste management facilities can be found at <a href="http://www.dec.ny.gov/chemical/52706.html">http://www.dec.ny.gov/chemical/52706.html</a> and a brief description of each type of facility can be found at <a href="http://www.dec.ny.gov/chemical/8495.html">http://www.dec.ny.gov/chemical/8495.html</a>.

### VEHICLE DISMANTLING FACILITIES, MOTOR VEHICLE REPAIR SHOPS AND MOBILE VEHICLE CRUSHERS

#### **Annual Report**

#### Submit the Annual Report no later than March 1, 2021.

Reporting of the information indicated on this Vehicle Dismantling, Motor Vehicle Repair Shop and Mobile Vehicle Crusher Annual Report form is required pursuant to 6 NYCRR 360-12.1(c) and 360.19(k)(12). Failure to provide the required information requested is a violation of Environmental Conservation Law. Timely submission of a properly completed form to the Department's Regional Office that has jurisdiction over your facility and to the Department's Central Office is required to meet the Annual Report requirements of 6 NYCRR Part 360.

Reporting of the information indicated on this Mandatory Annual Report including Self-Certification for Vehicle Dismantling Facilities fulfills the reporting requirements pursuant to 6 NYCRR 360-12.1(c).

Entries on the report forms should be either typewritten or neatly printed in black ink. Attach additional sheets if space on the pages is insufficient or supplementary information is required or appropriate.