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 January 01, 2020 to December 31, 2020

SECTION 1 – FACILITY INFORMATION

	FACILITY	INFORMATION					
FACILITY NAME:							
Wilbert's U-Pull It, LLC					_		
FACILITY LOCATION ADDRESS:	FACILITY CITY: STATE: ZIP CODE:						
4936 State Route 104	Williar	Williamson NY 14589					
FACILITY TOWN:	SECULITY COUNTY: FACILITY PHONE NUMBER:						
Williamson	Villiamson Wayne 315-589-2222						
FACILITY NYS PLANNING UNIT: (A list of NY Wayne County	S Planning Uni	ts can be found at the end of t	his repoi	rt). N` RI	YSDEC EGION #: 8		
FACILITY TYPE: Vehicle Dismantler	Motor	Vehicle Repair Shop N	YS DE		TY CODE:		
DMV I.D. #7110740			9V510	10			
FACILITY CONTACT:	public	CONTACT PHONE	0	ONTACI	FAX NUMBER:		
Tyler Petrie	Disprivate NUMBER: 315-589-2222 315-904-4244				4-4244		
CONTACT EMAIL ADDRESS: tyler.petrie@w	vilberts.com						
	OWNER	INFORMATION	_				
OWNER NAME:		HONE NUMBER:			IUMBER:		
Ronald A. Wilbert	585-872-		315-9	904-424			
OWNER ADDRESS: 1272 Salt Road	OWNER C Webster	ITY:		STATE: NY	ZIP CODE: 14580		
OWNER CONTACT:	OWNER C	ONTACT EMAIL ADDRE	SS:		-		
Ronald A. Wilbert	ron.wilb	ert@wilberts.com					
	OPERATO	R INFORMATION					
OPERATOR NAME: I same as owner				_public ☑private			
	PRE	FERENCES		private			
Preferred address to receive correspondence: Facility location address Other (provide):							
Preferred email address: Facility Contact	0	wner Contact					
Preferred individual to receive correspondenc	e: 🔽 Facili	ty Contact 🚺 Owner	r Contact				
Did you operate in 2020 Yes; Complete	e this form.						

No; Complete and submit Sections 1 and 12.

Provide the number of ELVs received from January 1 to December 31:	7,306
Provide the number of ELVs crushed and/or removed from the facility	7,736
from January 1 to December 31:	2,880
Provide the number of ELVs stored at the facility as of December 31:	2,000
Provide the highest number of ELVs stored at the facility	2,940
at any one time from January 1 to December 31:	2,340
	20
 Provide the approximate area used for the storage of vehicles (acres): 	acres
Provide the names of scrap metal processors to which you sold or sent de	commissioned ELVs:
1) Ben Weitsman	
2) Metalico	
-)	
3)	
3)	
	S (ELVs) PROCESSED
ECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLE	S (ELVs) PROCESSED
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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.</u> $\sqrt{3}$ s or X's are not acceptable. 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	1,000	1,800	0	Meier Supply Co.
Used Oil** (gallons	6,000	1,500	1,650	0	Retail Sails NOCO Energy Corp.
Diesel Fuel (gallons	0	0	0	0	
Gasoline (gallons	6,000	1,000	5,896	0	Midwest Gas
Engine Coolant/ Antifreeze (gallons	500	1,750	5,190	0	Retail Sales, SPS
Window Washing Fluid (gallons	100	500	1,750	0	Retail Sales
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.

	Received	Stored On Site	Sent Off Site	Destination		
Material Types	(tons)	(tons)	(tons)	NYS <u>Planning Unit (</u> or state if other than New York)	Me	crap etal essor
Ferrous Scrap Metal	N/A	N/A	N/A	Wayne County	∎Yes	□ No
Aluminum Scrap Metal	N/A	N/A	N/A	Wayne County	∎Yes	□ No
Lead Weights	N/A	N/A	N/A	Wayne County	∎Yes	N o
Non – Ferrous Scrap Metal	N/A	N/A	N/A	Wayne County	□Yes	N o
Other (specify):				Wayne County	∎Yes	□No
					∎Yes	□No

SECTION 5 – MERCURY SWITCHES COLLECTED

Provide the number of mercury-containing devices <u>recovered</u>. Including but not limited to hood & trunk lighting switches (H&TS) and antilock brake assemblies (ABS).

H&TS 671 (Number)

ABS	0
(Numbe	r)

Indicate permitted facility or permitted transporter accepting mercury containing devices:

	SECTION 6 – AIR	BAGS COLLECTED	
Provide the number of air bags recov	vered.		
Number of Air Bags Removed:	0	Number of Air Bags Deployed:	0
Indicate permitted facility or permitte	ed transporter acceptin	g air bags:	

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 batteries:

Any materials disposed must undergo a hazardous waste determination and proper handling, storage and disposal, if hazardous.

SECTION 8 – WASTE TIRES COLLE	CTED	
Number of waste tires stored on-site:	200	as of December 31
Number of used tires available for sale on-site:	8,000	as of December 31
Number of used tires sold:	10,801	during operating year
Number of waste tires shipped off-site for recycling, disposal, other:	30,000	during operating year

Indicate name of facility(ies) accepting waste tires:

Weitsman, All waste tires re disposed of during the crushing process (up to 4 per ELVS)

SECTION	9 – SELF	INSPECTIONS

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Number of self-inspections conducted for the year:

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?

SECTION 10 – PROBLEMS

Were any problems encountered during the reporting period (e.g., specific occurrences which have led to changes in facility procedures)?

Yes INo 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.

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SECTION 12 – COMPLIANCE CERTIFICATION

As of December 31, 2018:

				Date of Return to
Waste Management Compliance Checklist	NA	Yes	No	Compliance
1. 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?		\checkmark		
2. Is a system in place to control vegetation and prevent it from encroaching onto fire access lanes or driveways?		\checkmark		
3. Have you recorded the date of receipt for all end-of-life vehicles received?		\checkmark		
4. Are the end-of-life vehicle records available on-site?		\checkmark		
5. Have all end-of-life vehicles been inspected, upon arrival, for leaking fluids and unauthorized wastes?		\checkmark		
6. Have all observed leaks been remedied or contained?		\checkmark		
7. Does your facility have a written Contingency Plan?		$\overline{\mathbf{A}}$		
8. Are facility personnel trained to implement the Contingency Plan?		\checkmark		
9. Does your Contingency Plan include actions to be taken in the event of the followi	ng?			
9a. Fire.		\checkmark		
9b. Spill or release of vehicle waste fluids.		\checkmark		
9c. Unauthorized material received at facility.		\checkmark		
10. Are spills of waste fluids, if any occur, reported to the NYSDEC Spills Hotline within two hours of detection?		\checkmark		
11. Are all vehicle residues prevented from migrating from or running off your property?		\checkmark		
12. Is dust controlled to prevent interference with facility operations or from leaving facility site?		\checkmark		
13. Are vectors mosquitoes, rats, mice, etc. controlled to prevent interference with facility operations?		\checkmark		
14. Are waste fluids kept from being discharged onto the ground or into surface waters?		\checkmark		1
15. Is access to your facility controlled by: fences, gates, sign and/or natural barriers not vehicles ?		\checkmark		
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?		\checkmark		
17. Are you doing the following with your concrete or equivalent surface pad that is u draining, crushing, etc.?	sed for	vehicle	dismar	ntling, fluid
17a. Cleaning daily.		\checkmark		
17b. Cleaning spills as they occur.		\checkmark		
17c. Collecting and properly disposing of absorbent materials.		\checkmark		

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

				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?		\checkmark		
34. Are sludges from sumps and oil/water separators stored in covered, closed and labeled containers?		\checkmark		
35. Are sludges properly recycled or disposed?		\checkmark		
36. Are used oil filters properly drained, crushed or dismantled?		~		
37. Are drained oil filters properly recycled or disposed?		\checkmark		
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?		\checkmark		
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?		\checkmark		
38c. Has the facility's Annual Certification Report for the SPDES MSGP been submitted within the previous year?		\checkmark		
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?	N/A pounds N/A gallons			

Do you have any other Environmental Conservation Law or regulatory violations? (Attach additional sheets as necessary.)

No

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.

Steven C. Smith Digitally signed by Steven C. Smith Date: 2021.02.17 11:47:28 -05'00' 2/17/2021 Signature Date Steven C. Smith Safety and Compliance Coordinator Name (Print or Type) Title (Print or Type) steven.smith@wilberts.com Email (Print or Type) 1272 Salt Road Webster Address Citv (<u>585</u>)872_1540 Phone Number NY 14580 State and Zip

ATTACHMENTS: YES NO