# 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:<br>B&B Recycling  |  |   |                   |                     |                    |
| FACILITY LOCATION ADDRESS:   | FACILITY   | CITY:                                   |                   | STATE:              | ZIP CODE:          |
| 3898 Tinney Rd   | Penn   | Yan                                     |                   | NY                  | 14527              |
| FACILITY TOWN:   | FACILITY COUNTY: FACILITY PHONE NUMBER:  |   |                   |                     |                    |
| Potter   | Yates  |   | 315               | 5-536-              | 6855               |
| FACILITY NYS PLANNING UNIT: (A list of NY Yates County   | 'S Planning Un   | its can be found at the end of          | this repor        |                     | SDEC<br>GION #: 8  |
| FACILITY TYPE: Vehicle Dismantler DMV I.D. #7077507 SCRAP Processur Collector  | │  | Vehicle Repair Shop New Yehicle Crusher | NYS DEC           | CACTIVITY           | Y CODE:            |
| FACILITY CONTACT:  | public   | CONTACT PHONE                           | C                 | ONTACT              | FAX NUMBER:        |
| Richard Ingram   | private  | NUMBER:<br>315-536-6855                 | 3                 | 15-53               | 6-6966             |
| CONTACT EMAIL ADDRESS:rickli@att.ne  | et   | 010 000 0000                            |                   |                     |                    |
|  | OWNER  | INFORMATION                             |                   |                     |                    |
| OWNER NAME:  |  | HONE NUMBER:                            | The second second | ER FAX NU           |                    |
| Richard Ingram   | 315-536  | 5-6855                                  | 315-5             | 536-696             | 6                  |
| OWNER ADDRESS:<br>3898 Tinney Rd   | Penn Yar   |   |                   | STATE:              | ZIP CODE:<br>14527 |
| OWNER CONTACT:   | The second secon | ONTACT EMAIL ADDRE                      | ESS:              |                     |                    |
| Richard Ingram   | rickli@a   | tt.net                                  |                   |                     |                    |
|  | OPERATO  | RINFORMATION                            |                   |                     |                    |
| OPERATOR NAME: same as owner   |  |   | 45                | _public<br>_private |                    |
|  | PREI   | FERENCES                                |                   |                     |                    |
| Preferred address to receive correspondence  Other (provide):  | : Facility lo  | cation address                          | 0                 | vner address        |                    |
| Preferred email address: Facility Contact  Other (provide):  |  | wner Contact                            |                   |                     |                    |
| Preferred individual to receive correspondence of the corresponden | e: Facilit   | y Contact Owne                          | r Contact         |                     |                    |
| Did you operate in 2020 Yes; Complete  |  |   |                   |                     |                    |
| LI No; Complete  | and submit   | Sections 1 and 12.                      |                   |                     |                    |

| Provide the number of ELVs received from January 1 to December 31:  | 424                |
|---|--------------------|
| riovide the number of LEVS received from January 1 to December 31.  |                    |
| Provide the number of ELVs crushed and/or removed from the facility   | 420                |
| from January 1 to December 31:  | 1                  |
| <ul> <li>Provide the number of ELVs stored at the facility as of December 31:</li> </ul>  | 4                  |
| Provide the highest number of ELVs stored at the facility   | 12                 |
| at any one time from January 1 to December 31:  | 12                 |
| Provide the approximate area used for the storage of vehicles (acres):  | 0.25               |
| rio approximate area used for the storage of verticles (acres).   | acres              |
| Provide the names of scrap metal processors to which you sold or sent dec   | commissioned ELVs: |
| Union Scrap Processing  |                    |
|   |                    |
| 2)  |                    |
| 3)  |                    |
|   |                    |
|   |                    |
| SECTION OF MODULE OF MEDICAL END OF MEDICAL EN  |                    |
| SECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLES   | S (ELVs) PROCESSE  |
|   | S (ELVs) PROCESSE  |
| SECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLES  • Provide the number of ELVs crushed from January 1 to December 3:   | 0                  |
|   | 0                  |
| <ul> <li>Provide the number of ELVs crushed from January 1 to December 3:</li> </ul>  | 0                  |
| <ul> <li>Provide the number of ELVs crushed from January 1 to December 3:</li> <li>Provide the names of each facility where you crushed decommissioned ELY</li> </ul> | 0                  |
| Provide the number of ELVs crushed from January 1 to December 3:  Provide the names of each facility where you crushed decommissioned EL'  1)                         | 0                  |
| Provide the number of ELVs crushed from January 1 to December 3:  Provide the names of each facility where you crushed decommissioned ELY  1)  2)                     | 0                  |
| Provide the number of ELVs crushed from January 1 to December 3:  Provide the names of each facility where you crushed decommissioned ELT1)  2)  3)                   | 0                  |
| Provide the number of ELVs crushed from January 1 to December 3:  Provide the names of each facility where you crushed decommissioned ELT1)  2)  3)                   | 0                  |
| Provide the number of ELVs crushed from January 1 to December 3:  Provide the names of each facility where you crushed decommissioned ELT1)  2)  3)  4)               | 0                  |

#### 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. Qualitative responses (i.e. √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<br>Recovered                | Used<br>on-site<br>(oil heater,<br>etc.) | Stored<br>on-site at<br>year-end | Sold/<br>Recycled<br>off-site | Disposed off-site* | (Indicate permitted facility or<br>permitted Part 364 transporter<br>accepting waste fluids.) |  |
| Refrigerant<br>(pounds)                 |  |                                  |                               |                    |   |  |
| Used Oil**<br>(gallons)                 |  | 365                              |                               |                    |   |  |
| Diesel Fuel<br>(gallons)                | 25                                       |                                  |                               |                    |   |  |
| Gasoline<br>(gallons)                   | 15                                       |                                  |                               |                    |   |  |
| Engine Coolant/<br>Antifreeze (gallons) | 10                                       |                                  |                               |                    |   |  |
| Window Washing<br>Fluid (gallons)       | 2  |                                  |                               |                    |   |  |
| Other (specify)                         |  |                                  |                               |                    |   |  |

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

FLUIDS ARE ZEOWIRED TO BE DRAINED

<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 | Stored On Site | Sent Off Site | Destination  |        |                        |  |  |  |  |
|------------------------------|----------|----------------|---------------|--|--------|------------------------|--|--|--|--|
| Material Types               | (tons)   | (tons)         | (tons)        | NYS <u>Planning Unit</u> (or state if other than New York) | M      | Scrap<br>etal<br>essor |  |  |  |  |
| Ferrous Scrap<br>Metal       | 5779     | 647            | 5211          | Cayuga County, Monroe County                               | ▼  Yes | □No                    |  |  |  |  |
| Aluminum<br>Scrap Metal      | 87       | 30             | 68            | Monroe County, Erie County                                 | Yes    | □No                    |  |  |  |  |
| Lead Weights                 | 1        | 1              | 5             | Monroe County, Erie County                                 | Yes    | □No                    |  |  |  |  |
| Non – Ferrous<br>Scrap Metal | 65       | 30             | 70            | Monroe County, Erie County                                 | ✓Yes   | □No.                   |  |  |  |  |
| Other (specify)              |          |                |               |  | □Yes   | □No                    |  |  |  |  |
|                              |          |                |               |  | □Yes   | □No                    |  |  |  |  |

#### SECTION 5 - MERCURY SWITCHES COLLECTED

| Provide the number of mercury-containing devices (H&TS) and antilock brake assemblies (ABS).   | s recovered. Including but not limited to hood & trunk lighting switches |
|--|--|
| H&TS(Number)   | ABS  |
| (Mumber)   | (Number)   |
| Indicate permitted facility or permitted transporter   | accepting mercury containing devices:                                    |
| mercury switches stored on site will be se   | ent to ELVS upon adequate quantity acquired                              |
|  |  |
|  |  |
|  |  |
|  |  |
| SECTION  | 6 – AIR BAGS COLLECTED   |
|  | 6 – AIR BAGS COLLECTED   |
| Provide the number of air bags recovered.  | 6 – AIR BAGS COLLECTED  Number of Air Bags Deployed:                     |
| SECTION  Provide the number of air bags recovered.  Number of Air Bags Removed:  Indicate permitted facility or permitted transporte | Number of Air Bags Deployed:   |

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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:  ///Asocity Ficon Individual Buy - Back Puchase Indicate permitted facility or permitted transporter accepting lead-acid batteri Tonolli Canada LTD  | 3102<br>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:   | 300   | as of December 31                                      |
| Number of used tires available for sale on-site:  | none  | as of December 31                                      |
| Number of used tires sold:  | none  | during operating year                                  |
| Number of waste tires shipped off-site for recycling, disposal, other:  | 1400  | during operating year                                  |
| 그렇게 되면 그렇게 보면 하는데 그렇게 하지만 하는데 하는데 바람이 아무리를 하는데 보이고 있다.  |   |  |
| ndicate name of facility(ies) accepting waste tires:  Union Scrap Processing  Nucor Auburn  |   |  |
| Union Scrap Processing  | TIONS   |  |
| Jnion Scrap Processing Nucor Auburn   |   | date of inspection?                                    |
| SECTION 9 – SELF INSPECT  Number of self-inspections conducted for the year:  IN ACCOLUMNCE WITH STIMMATER PERMIT  Are self-inspection records up-to-date with inspector name, what was ins   | pected, time and  |  |
| SECTION 9 – SELF INSPECT  Number of self-inspections conducted for the year:  IN ACCOLUMNICE WITH STIFFMENT PERMIT  Are self-inspection records up-to-date with inspector name, what was ins  Yes \[ \text{No} \text{No} \] At a minimum, are fluid storage areas, vehicles, vehicle storage areas inspections.   | pected, time and o  |  |
| SECTION 9 – SELF INSPECT  Number of self-inspections conducted for the year:  IN ACCOLDENCE WITH STATIONAGE PERMIT  Are self-inspection records up-to-date with inspector name, what was ins  Yes No  At a minimum, are fluid storage areas, vehicles, vehicle storage areas ins  Yes No  | pected, time and of spected for leaks/s                                       | pills?   |
| SECTION 9 – SELF INSPECT  Number of self-inspections conducted for the year:  IN ACCOCUACE WITH STIMMATER PERMIT  Are self-inspection records up-to-date with inspector name, what was ins  Yes No  At a minimum, are fluid storage areas, vehicles, vehicle storage areas ins  Yes No  SECTION 10 – PROBLEM  Were any problems encountered during the reporting period (e.g., specific   | pected, time and of spected for leaks/s                                       | ch have led to changes in                              |
| SECTION 9 – SELF INSPECT  Number of self-inspections conducted for the year:  IN ACCOLDANCE WITH STATIONARY PERMIT  Are self-inspection records up-to-date with inspector name, what was ins  Yes No  At a minimum, are fluid storage areas, vehicles, vehicle storage areas ins  Yes No  SECTION 10 – PROBLEM  Were any problems encountered during the reporting period (e.g., specific facility procedures)?   | pected, time and of spected for leaks/s coccurrences which and the methods is | ch have led to changes in                              |
| SECTION 9 – SELF INSPECT  Number of self-inspections conducted for the year:  IN ACCOLOLICE WITH STATEMENT PERMIT  Are self-inspection records up-to-date with inspector name, what was ins  Yes No  At a minimum, are fluid storage areas, vehicles, vehicle storage areas ins  Yes No  SECTION 10 – PROBLEM  Were any problems encountered during the reporting period (e.g., specific facility procedures)?  Yes No  If yes, attach additional sheets identifying each problem | pected, time and of spected for leaks/s coccurrences which and the methods is | ch have led to changes in or resolution of the problem |

## SECTION 12 - COMPLIANCE CERTIFICATION

### As of December 31, 2018:

|          |   |          |         |        | Mark of Halling to |
|----------|---|----------|---------|--------|--------------------|
|          | Waste Management Compliance Checklist   | HA       | Yes     | 1No    | Signification      |
| 1.<br>MO | If your facility stores LESS THAN 1,000 tires, check NA. If your facility stores RE 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?                                       |          | V       |        |                    |
| 3.       | Have you recorded the date of receipt for all end-of-life vehicles received?  |          | V       |        |                    |
| 4.       | 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?   |          | V       |        |                    |
| 6.       | Have all observed leaks been remedied or contained?   |          | V       |        |                    |
| 7.       | Does your facility have a written Contingency Plan?   |          | V       |        |                    |
| 8.       | Are facility personnel trained to implement the Contingency Plan?   |          | V       |        |                    |
| 9.       | Does your Contingency Plan include actions to be taken in the event of the follow   | ing?     |         |        |                    |
|          | 9a. Fire.   |          | V       |        |                    |
|          | 9b. Spill or release of vehicle waste fluids.   |          | V       |        |                    |
|          | 9c. Unauthorized material received at facility.   |          | ~       |        |                    |
| 10.      | Are spills of waste fluids, if any occur, reported to the NYSDEC Spills Hotline within two hours of detection?  |          | V       |        |                    |
| 11.      | Are all vehicle residues prevented from migrating from or running off your property?  |          | V       |        |                    |
| 12.      | Is dust controlled to prevent interference with facility operations or from leaving facility site?  |          | V       |        |                    |
| 13.      | Are vectors (mosquitoes, rats, mice, etc.) controlled to prevent interference with facility operations?   |          | V       |        |                    |
| 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)?   |          | V       |        |                    |
|          | 15a. Are the access controls working (i.e. controlling access)?   |          | V       |        |                    |
| 16.      | Are fluids drained from end-of-life vehicles on a pad constructed of concrete or equivalent material?   |          | V       |        |                    |
| 17.      | Are you doing the following with your concrete (or equivalent surface) pad that is udraining, crushing, etc.?   | used for | vehicle | dismar | ntling, fluid      |
|          | 17a. Cleaning daily.  |          | V       |        |                    |
|          | 17b. Cleaning spills as they occur.   |          | V       |        |                    |
|          | 17c. Collecting and properly disposing of absorbent materials.  |          | V       |        |                    |

|     |   |           |         |         | Date of Return 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 folloy | wing be | 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). |           | V       |         |                   |
|     | 18b. Lead acid batteries.   | П         | V       |         |                   |
|     | 18c. Mercury switches or other mercury containing devices, if any.  |           | V       |         |                   |
|     | 18d. Refrigerants, if any.  | V         |         |         |                   |
|     | 18e. Air bags.  | V         |         |         |                   |
|     | 18f. PCB capacitors, if any.  | V         |         |         |                   |
| 19. | Are fluids stored separately & in containers that are compatible with their contents?   |           | V       |         |                   |
| 20. | Are fluids stored in closed containers?   |           | V       |         |                   |
| 21. | Are containers which contain waste fluids in good condition and not visibly leaking?  |           | V       |         |                   |
| 22. | 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?   |           | V       |         |                   |
| 24. | Are lead-acid batteries stored upright and off the ground?  |           | V       |         |                   |
| 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?                          |           | V       |         |                   |
| 29. | Are PCB capacitors, if any are encountered, removed and stored in appropriate, labeled containers for recycling or disposal?                              | V         |         |         |                   |
| 30. | Is used oil stored in accordance with local building codes, local fire codes, and the NYS Uniform Fire Prevention & Building Code?                        |           | V       |         |                   |
| 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 3   | 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?                                  | V         |         |         |                   |
|     | 32b. Do on-site space heaters burn only used oil that is generated on-site or received from household do-it-yourself generators?                          | V         |         |         |                   |
|     | 32c. Are combustion gases from used oil space heaters vented to the outside ambient air?  | V         |         |         |                   |

| Waste Management Compliance Checklist  | N.A. | Yes | No  | Constants             |
|--|------|-----|-----|-----------------------|
| 3. Is waste oil kept from being mixed with brake cleaner, carb cleaner, antifreeze, solvents, gasoline, or degreasers?   | V    |     |     |                       |
| 34. Are sludges from sumps and oil/water separators stored in covered, closed and labeled containers?  | V    |     |     |                       |
| 35. Are sludges properly recycled or disposed?   | V    |     |     |                       |
| 6. Are used oil filters properly drained, crushed or dismantled?   | V    |     |     |                       |
| 7. Are drained oil filters properly recycled or disposed?  | V    |     | 1   |                       |
| <ol> <li>If your facility does not require an SPDES Multi-Sector General Permit (MSGP)<br/>for Stormwater Discharge, check NA for 38a, 38b, 38c. If your facility requires<br/>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?  |      | V   |     |                       |
| 38b. Is the information provided in the facility's original Notice of Intent or<br>Termination submission for the SPDES MSGP still accurate and up to<br>date?   |      | V   |     |                       |
| 38c. Has the facility's Annual Certification Report for the SPDES MSGP been submitted within the previous year?  |      | V   |     |                       |
| 89. If your facility does not handle cleaning solvents, degreasers, battery acids or<br>non-vehicle wastes write NA. If these materials are handled at your facility, what is<br>he maximum amount of this material that your facility generates in any calendar<br>nonth? |      | 1   | I/A | _ pounds<br>_ gallons |
| Do you have any other Environmental Conservation Law or regulatory violations? (Attach additional sheets as necessary.)  No  |      |     |     |                       |
| COMMENTS? (Attach additional sheets if necessary)  |      |     |     |                       |

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#### 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.

| RIII.                | 2/24/2021             |
|----------------------|-----------------------|
| Signature            | Date                  |
| Richard Ingram       | owner                 |
| Name (Print or Type) | Title (Print or Type) |
| rickli@att.net       |                       |
| Email                | (Print or Type)       |
| 3898 Tinney Rd       | Penn Yan              |
| Address              | City                  |
| NY 14527             | 315 536 6855          |
| State and Zip        | Phone Number          |

ATTACHMENTS: YES NO