

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

Submit the Annual Report no later than March 1, 2022

This annual report is for the year of operation from January 01, 2021 to December 31, 2021

SECTION 1 – FACILITY INFORMATION

	FACILITY	INFORMAT	ION		, t		
FACILITY NAME:				CET/ED			
Gershow Recycling of Lindenhurst RECEIVED NYSDEC - Region 1							
FACILITY LOCATION ADDRESS:	FACILITY	CITY:	LIAD	0.9.21	22 STAT	E: ZIP CODE:	
635 Muncy Ave	Linde	nhurst				1	
FACILITY TOWN:	FACILITY	COUNTY:	Division o			HONE NUMBER:	
Babylon Suffolk (631)587-1991							
FACILITY NYS PLANNING UNIT: (A list of NY Babylon (Town)	/S Planning Uni	ts can be foun	d at the end	of this re	port).	NYSDEC REGION #: R1	
FACILITY TYPE: Vehicle Dismantler	Motor	Vehicle Rep	pair Shop	NYS D	EC ACT	VITY CODE:	
DMV I.D. #7054828 (Scrap Processor)	Mobile	Vehicle Cr	usher	52J67			
FACILITY CONTACT:	public public	CONTACT	PHONE		CONTA	CT FAX NUMBER:	
Joe Bertuccio	private	NUMBER: (631)289-6188			(631)	289-6368	
CONTACT EMAIL ADDRESS: decinfo@gers	show.com						
	OWNER	INFORMATI	ON				
OWNER NAME:		HONE NUM	BER:			X NUMBER:	
Gershow Recycling Corporation	(631)289			(63	1)289-6		
OWNER ADDRESS: P.O. Box 526	OWNER C Medford	ITY:			STAT NY	E: ZIP CODE: 11763	
OWNER CONTACT:	OWNER C	ONTACT E	MAIL ADDI	RESS:			
Joe Bertuccio	decinfo(@gersho	w.com				
	OPERATO	R INFORMA	TION				
OPERATOR NAME:					□pub ☑priva		
	PRE	FERENCES					
Preferred address to receive correspondence: Facility location address Other (provide): Owner address							
Preferred email address: Facility Contact Other (provide):							
Preferred individual to receive correspondence: Facility Contact Other (provide): Owner Contact							
Did you operate in 2021? Yes; Complet	e this form.				A	E-FILE	
No; Complete and submit Sections 1 and 13							

SECTION 2A VDF/REPAIR SHOPS- END-OF-LIFE VEHICLE	2,931
Provide the number of ELVs received from January 1 to December 31:	<u> </u>
Provide the number of ELVs crushed and/or removed from the facility from January 1 to December 31:	2,904
Provide the number of ELVs stored at the facility as of December 31:	27
Provide the highest number of ELVs stored at the facility at any one time from January 1 to December 31:	30
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:
shredded at Gershow Recycling of	
Medford.	
Medford.	S (ELVs) PROCESSED
-1	s (ELVs) PROCESSED N/A
Medford. SECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLE	N/A
Medford. SECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLE Provide the number of ELVs crushed from January 1 to December 3: Provide the names of each facility where you crushed decommissioned EL N/A	N/A
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Medford. SECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLE Provide the number of ELVs crushed from January 1 to December 3: Provide the names of each facility where you crushed decommissioned EL N/A 2) 3)	N/A

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.)	on-site on-site at Recycled off-site		Disposed off-site*	(Indicate permitted facility or permitted Part 364 transporter accepting waste fluids.)			
Refrigerant (pounds)								
Used Oil** (gallons)								
Diesel Fuel (gallons)	All ELV's	are sent	to	Medford				
Gasoline (gallons)	facility	for	processing.					
Engine Coolant/ Antifreeze (gallons)								
Window Washing Fluid (gallons)								
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. Destination Received Stored On Site Sent Off Site **Material Types** (tons) (tons) (tons) To Scrap NYS Planning Unit (or state if Metal other than New York) Processor Ferrous Scrap ☐ Yes □No Metal This section to be mailed under Aluminum ∐Yes □No Scrap Metal .later date. separate cover at a Lead Weights Yes □No Non - Ferrous □No Scrap Metal Other (specify): Yes No □No ☐ Yes 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). H&TS N/A (Number) ABS (Number) Indicate permitted facility or permitted transporter accepting mercury containing devices: ELV's are sent to Medford facility for processing. SECTION 6 - AIR BAGS COLLECTED Provide the number of air bags recovered. N/A N/A Number of Air Bags Removed: Number of Air Bags Deployed: Indicate permitted facility or permitted transporter accepting air bags: ELV's are sent to Medford facility for processing.

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SECTION 7 – LEAD-ACID BATTERIES COLLECTED

Provide the number of lead-acid batteries <u>recovered</u> and their disposition.		
Number of Lead-Acid Batteries collected from ELVs:	2,931	_
Indicate permitted facility or permitted transporter accepting lead-acid batte	eries:	
Eco-BAT New York, LLC RSR Revere Smelting & Refining Co	orp.	
5 Ballard Rd Middletown, NY 10941		
Any materials disposed must undergo a hazardous waste determination an hazardous.	nd proper handling,	storage and disposal, if
SECTION 8 – WASTE TIRES CO	OLLECTED	
Number of waste tires stored on-site:	0	as of December 31
Number of used tires available for sale on-site:	0	as of December 31
Number of used tires sold:	0	during operating year
Number of waste tires shipped off-site for recycling, disposal, other:	0	during operating year
Indicate name of facility(ies) accepting waste tires:		
N/A		
SECTION 9 - SELF INSPEC	TIONS	40
Number of self-inspections conducted for the year:		12
Are self-inspection records up-to-date with inspector name, what was in ☐ Yes ☑ No	spected, time and	date of inspection?
At a minimum, are fluid storage areas, vehicles, vehicle storage areas in ✓ Yes ☐ No	nspected for leaks/	/spills?
SECTION 10 - PROBLE	MS	
Were any problems encountered during the reporting period (e.g., specif facility procedures)?	fic occurrences wh	ich have led to changes in
Yes No If yes, attach additional sheets identifying each problem	n and the methods	for resolution of the problem
SECTION 11 - CHANGI	ES	
Were there any changes from approved reports, plans, specifications, a	ınd permit conditio	ns?
Yes No If yes, attach additional sheets identifying changes with	h a justification for	each change.

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SECTION 12 - COMPLIANCE CERTIFICATION

As of December 31, 2021:

			Act by the		Date of Return to
	Waste Management Compliance Checklist	NA	Yes	No	Compliance
1. 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?	V			
2.	Is a system in place to control vegetation and prevent it from encroaching onto fire access lanes or driveways?		✓		
3.	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?		V		
6.	Have all observed leaks been remedied or contained?		▼		
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	ng?			
	9a. Fire.		1		
	9b. Spill or release of vehicle waste fluids.		>		
	9c. Unauthorized material received at facility.		1		
10.	Are spills of waste fluids, if any occur, reported to the NYSDEC Spills Hotline within two hours of detection?		1		
11.	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?		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)?		>		
	15a. Are the access controls working (i.e. controlling access)?		1		
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.?	ised for	vehicle	disma	ntling, fluid
	17a. Cleaning daily.		V		
	17b. Cleaning spills as they occur.		>		
	17c. Collecting and properly disposing of absorbent materials.		V		

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	BY SE WESTER LANDS TO THE RESIDENCE OF THE PROPERTY.				Date of Return to
	Waste Management Compliance Checklist	NA 1	Yes	No	Compliance
18.	Have the following wastes been drained, removed, deployed, collected and/or store practices, prior to vehicle crushing or shredding?	ed follow	ing be	st mana	gement
	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.		1		
	18c. Mercury switches or other mercury containing devices, if any.	1	B. 007/20031		
	18d. Refrigerants, if any.	1			
	18e. Air bags.	1			
	18f. PCB capacitors, if any.	1			
19.	Are fluids stored separately & in containers that are compatible with their contents?		✓		
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?		\		
24.	Are lead-acid batteries stored upright and off the ground?		1		
25.	Are lead-acid batteries covered to protect them from precipitation?		\		
26.	Are all lead-acid batteries sent for recycling within one-year of receipt?		<		
27.	Are <u>leaking</u> lead-acid batteries, if any are encountered, stored in leak-proof containers separated from intact batteries?		✓		
	27a. Are provisions in place to absorb any acid leakage?		1		
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?		1		
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?	<			
	32c. Are combustion gases from used oil space heaters vented to the outside ambient air?	V			

Waste Management Compliance Checklist	NA	Yes	No	Date of Return to
33. 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?	1			
36. Are used oil filters properly drained, crushed or dismantled?	1			
37. Are drained oil filters properly recycled or disposed?	V			
 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?		V		
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?		V		
38c. Has the facility's Annual Certification Report for the SPDES MSGP been submitted within the previous year?		✓		
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 gallons
Do you have any other Environmental Conservation Law or regulatory violations? (Attach additional sheets as necessary.) No			arrivan a and Mar	4-17-300-000-000-000-000-0
COMMENTS? (Attach additional sheets if necessary)				

SECTION 13 - 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.

P.DG	2/23/22
Signature	Date
Ray Colon	Manager
Name (Print or Type)	Title (Print or Type)
decinfo@gershow.co	OM (Print or Type)
P.O. Box 526	Medford
Address	City
NY 11763 State and Zip	631 289 6188 Phone Number

ATTACHMENTS:	YES	V	NO
ALIACHNILITIO.	 _ 1 4 0		LINO