



Department of Environmental Conservation

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

RECEIVED

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

MAR 02 2022
DIVISION OF MATERIALS MANAGEMENT

SECTION 1 - FACILITY INFORMATION

FACILITY INFORMATION			
FACILITY NAME: <i>George E and Judy A Hall - Home and collection of our old Vehicles</i>			
FACILITY LOCATION ADDRESS: <i>10790 Limburg Fks Rd</i>		FACILITY CITY: <i>Carthage</i>	STATE: ZIP CODE: <i>NY 13619</i>
FACILITY TOWN: <i>Denmark</i>		FACILITY COUNTY: <i>Lewis</i>	FACILITY PHONE NUMBER: <i>315 493-2932</i>
FACILITY NYS PLANNING UNIT: (A list of NYS Planning Units can be found at the end of this report). <i>Development Authority of North Country (DANC)</i>			NYSDEC REGION #: <i>6</i>
FACILITY TYPE: <input type="checkbox"/> Vehicle Dismantler		<input type="checkbox"/> Motor Vehicle Repair Shop	NYS DEC ACTIVITY CODE:
DMV I.D. # <i>NA</i>		<input type="checkbox"/> Mobile Vehicle Crusher	
FACILITY CONTACT: <i>Same as owners</i>		<input type="checkbox"/> public CONTACT PHONE NUMBER: <i>315 493 2932</i>	<input checked="" type="checkbox"/> private CONTACT FAX NUMBER:
CONTACT EMAIL ADDRESS:			
OWNER INFORMATION			
OWNER NAME: <i>George E and Judy A Hall</i>		OWNER PHONE NUMBER: <i>315 493 2932</i>	OWNER FAX NUMBER:
OWNER ADDRESS: <i>10790 Limburg Fks Rd</i>		OWNER CITY: <i>Carthage</i>	STATE: ZIP CODE: <i>NY 13619</i>
OWNER CONTACT:		OWNER CONTACT EMAIL ADDRESS:	
OPERATOR INFORMATION			
OPERATOR NAME: <input checked="" type="checkbox"/> same as owner			<input type="checkbox"/> public <input checked="" type="checkbox"/> private
PREFERENCES			
Preferred address to receive correspondence: <input type="checkbox"/> Facility location address <input checked="" type="checkbox"/> Owner address <input type="checkbox"/> Other (provide):			
Preferred email address: <input type="checkbox"/> Facility Contact <input type="checkbox"/> Owner Contact <input type="checkbox"/> Other (provide):			
Preferred individual to receive correspondence: <input type="checkbox"/> Facility Contact <input type="checkbox"/> Owner Contact <input type="checkbox"/> Other (provide):			

Did you operate in 2021? Yes; Complete this form.

No; Complete and submit Sections 1 and 13

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.

George E Hall
Signature
Judy A Hall

2-25-22
Date

George E & Judy A Hall
Name (Print or Type)

OWNER
Title (Print or Type)

Email (Print or Type)

10790 Limburg Fks Rd
Address

Carthage
City

NY 13619
State and Zip

(315) 493-2932
Phone Number

ATTACHMENTS: YES NO