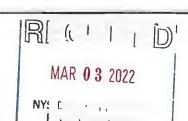


VEHICLE DISMANTLING FACILITY, MOTOR VEHICLE REPAIR SHOP AND MOBILE VEHICLE CRUSHER ANNUAL REPORT

Submit the Annual Report no later than March 1, 2022

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

| SECTI | ON 1 - FA | CILITY INFORMATION | N | | |
|--|-----------------|---------------------------------------|------------|--------------------|----------------------|
| | FACILITY | INFORMATION | | | |
| Teets & Son. | Scrap n | net LLC | | | |
| FACILITY LOCATION ADDRESS: | FACILITY | | | STATE: | ZIP CODE: |
| 738 Black Oak Rd | | NA | | NY | 14867 |
| FACILITY TOWN: | FACILITY | COUNTY: | FACII | LITY PHON | IE NUMBER: |
| Newfield | Tom | 8Kins | 607 | -272 | -1908 |
| FACILITY NYS PLANNING UNIT: (A list of N | YS Planning Uni | its can be found at the end of | this repo | | SDEC GION #: 7 |
| FACILITY TYPE: Vehicle Dismantler DMV I.D. # | _ | Vehicle Repair Shop Nehicle Crusher | NYS DE | CACTIVIT | Y CODE: |
| | | 1 | | , ,,,, | |
| RICHIL C. Teeter JR. CONTACT EMAIL ADDRESS: | public private | CONTACT PHONE NUMBER: | | | FAX NUMBER: 72 -1077 |
| CONTACT EMAIL ADDRESS. | OWNER | INCORMATION | | | · |
| OWNER MARK | T | INFORMATION | Loveni | ED FAVAII | |
| OWNER NAME: Richard e Teeter TR | | HONE NUMBER: 272-1908 | | ER FAX NU 272 - | |
| OWNER ADDRESS: 738 BLCH OKRAL | OWNER C | ert: | | STATE: | ZIP CODE: |
| OWNER CONTACT: R.Ch Teeter In | | ONTACT EMAIL ADDRE | SS: | | 1.4.6 |
| VI. Ch /EETE J.L | OPERATO | ////+ R INFORMATION | | | |
| OPERATOR NAME: Same as owner | | K IN OKMATION | [| public | |
| | PREI | FERENCES | | private | |
| Preferred address to receive correspondence Other (provide): | | | Ø(o | wner address | |
| Preferred email address: Facility Contact Other (provide): | Ov | wner Contact | | | |
| Preferred individual to receive correspondent Other (provide): | ce: Facilit | ty Contact Owne | er Contact | | - Mosel #C |
| Did you operate in 2021? Yes; Comple | ete this form. | | | | |
| This Complete | o and cubmit (| Sections 1 and 13 | | | |



| SECTION 2A VDF/REPAIR SHOPS- END-OF-LIFE VEHICLES (| ELVs) PROCESSED |
|---|----------------------|
| Provide the number of ELVs received from January 1 to December 31: | 862 |
| Provide the number of ELVs crushed and/or removed from the facility from January 1 to December 31: | 862 |
| Provide the number of ELVs stored at the facility as of December 31: | |
| Provide the highest number of ELVs stored at the facility at any one time from January 1 to December 31: | 50 |
| 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 decom | nmissioned ELVs: |
| 1) Weist man Shrelding LLC ovego NY 1382 | 27 |
| 2) Union Scrap Processing Ine North Chili, NY | 14514 |
| | |
| 3) | |
| SECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLES (| ELVs) PROCESSED |
| | ELVs) PROCESSED |
| SECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLES (| ELVs) PROCESSED N/A |
| SECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLES (I • Provide the number of ELVs crushed from January 1 to December 3: • Provide the names of each facility where you crushed decommissioned ELVs: | ELVs) PROCESSED N/A |
| SECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLES (I.e., Provide the number of ELVs crushed from January 1 to December 3: • Provide the names of each facility where you crushed decommissioned ELVs: | ELVs) PROCESSED N/A |
| SECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLES (I • Provide the number of ELVs crushed from January 1 to December 3: • Provide the names of each facility where you crushed decommissioned ELVs: 1) | ELVs) PROCESSED N/A |
| SECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLES (I • Provide the number of ELVs crushed from January 1 to December 3: • Provide the names of each facility where you crushed decommissioned ELVs: 1) | ELVs) PROCESSED 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.) | 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) | Ø | Ø | Ø | Ø | Ø |
| Used Oil** (gallons) | 715 | 150 | Ø | g | Acility |
| Diesel Fuel (gallons) | 105 | Ø | Ø | 9 | 11 11 |
| Gasoline (gallons) | 100 | Ø | Ø | Ø | 11 17 |
| Engine Coolant/ Antifreeze (gallons) | 210 | Ø | Ø | 58 | 11 11 Used of gaveaux |
| Window Washing Fluid (gallons) | 15 | Ø | Ø | Ø | 11 11 |
| 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

| - 1 | Эе | FIL | 7/1 | |
|-----|----|-----|-----|--|
| , | ~ | 110 | ,, | |

| | 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) | | To Scrap Metal Processor | |
| Ferrous Scrap Metal | 7,000 | 200 | 6,800 | Weistman | Streshors | Yes | □No |
| Aluminum Scrap Metal | 70 | 0 | 70 | t/ | 1/ | Yes | □No |
| Lead Weights | 1 | 0 | / | 11 | 1/ | Yes | □No |
| Non – Ferrous Scrap Metal | 275 | 0 | 275 | 11 | 1/ | Yes | □No |
| Other (specify): | | | | | | Yes | □No |
| | _ | | | | | □Yes | □No |

SECTION 5 - MERCURY SWITCHES COLLECTED

| Provide the number of mercury-containing devices recovered (H&TS) and antilock brake assemblies (ABS). H&TS | !. Including but not limited to hood & trunk lighting switches ABS (Number) |
|--|--|
| Indicate permitted facility or permitted transporter accepting m | nercury containing devices: |
| | |
| SECTION 6 – AIR E | BAGS COLLECTED |
| Provide the number of air bags recovered. | O |
| Number of Air Bags Removed: | Number of Air Bags Deployed: |
| Indicate permitted facility or permitted transporter accepting | gair bags: |
| | |

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; | 700 | - |
| Indicate permitted facility or permitted transporter accepting lead-acid batteri | ies: | |
| green blot recy 5-9 alice | e St B, | Achimton Ny |
| | | |
| Any materials disposed must undergo a hazardous waste determination and hazardous. | f proper handling, s | storage and disposal, if |
| SECTION 8 - WASTE TIRES CO | LLECTED | |
| Number of waste tires stored on-site: | 900 | 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: | 4,000 | during operating year |
| Indicate name of facility(ies) accepting waste tires: | | , 1 |
| ovaço NY 13827 buffalo | : Covern | lle |
| OVOSO NY 13827 buffalo | NY | |
| | | |
| | | |
| SECTION 9 - SELF INSPECT | rions | |
| Number of self-inspections conducted for the year: | | 52 |
| Are self-inspection records up-to-date with inspector name, what was ins | pected, time and d | late of inspection? |
| At a minimum, are fluid storage areas, vehicles, vehicle storage areas ins | spected for leaks/s | pills? |
| SECTION 10 - PROBLEM | ns | |
| Were any problems encountered during the reporting period (e.g., specific facility procedures)? | occurrences whic | h have led to changes in |
| Yes No If yes, attach additional sheets identifying each problem | and the methods fo | or resolution of the problem |
| SECTION 11 - CHANGE | S | |
| Were there any changes from approved reports, plans, specifications, and | d permit conditions | s? |
| Yes Kno If yes, attach additional sheets identifying changes with | a justification for e | ach change. |

SECTION 12 – COMPLIANCE CERTIFICATION

As of December 31, 2021:

| Waste Management Compliance Checklist | NΑ | Yes | No | Date of Return to |
|--|---------|---------|--------|-------------------|
| 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? | | | | |
| Is a system in place to control vegetation and prevent it from encroaching onto fire access lanes or driveways? | | | | : |
| 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? | | X | | |
| 6. Have all observed leaks been remedied or contained? | | X | | |
| 7. Does your facility have a written Contingency Plan? | | | | |
| 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. | | V | | |
| 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? | | V | | |
| 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? | | V | | |
| 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)? | | 以 | | |
| 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 u draining, crushing, etc.? | sed for | vehicle | dismar | ntling, fluid |
| 17a. Cleaning daily. | | X | | |
| 17b. Cleaning spills as they occur. | | K | | |
| 17c. Collecting and properly disposing of absorbent materials. | | | | |

| | | | | | 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? | | ara read S | z-11:555. Å | |
| | 18a. Fluids (including engine oil, transmission fluid, transaxle fluid, front and rear axle fluid, brake fluid, power steering fluid, coolant, and fuel). | | X | | |
| 1 | 8b. Lead acid batteries. | | X | | |
| 1 | 8c. Mercury switches or other mercury containing devices, if any. | | KI | | |
| 1 | 8d. Refrigerants, if any. | | X | | |
| 1 | 8e. Air bags. | | X | | |
| 1 | 8f. 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? | | | | |
| 22. / | Are containers clearly and legibly labeled to describe their contents? | | X | | |
| 23. / | Are containers stored on a bermed pad constructed of concrete or equivalent material? | | Image: Control of the | | |
| 24. / | Are lead-acid batteries stored upright and off the ground? | | X | | |
| 25. <i>i</i> | Are lead-acid batteries covered to protect them from precipitation? | | X | | |
| 26. <i>A</i> | 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? | | X | | |
| | 27a. Are provisions in place to absorb any acid leakage? | | X | | |
| 28. <i>A</i> | Are mercury switches and other mercury containing devices stored in appropriate, labeled containers and then sent for recycling? | | \mathbf{X} | | |
| | Are PCB capacitors, if any are encountered, removed and stored in appropriate, labeled containers for recycling or disposal? | | X | | |
| | s used oil stored in accordance with local building codes, local fire codes, and the NYS Uniform Fire Prevention & Building Code? | | X | | |
| 31. I | f sent off-site, is used oil transported via a permitted hauler? | X | | | |
| 32. I | f you do not burn used oil onsite check NA for 32a., 32b., 32c. If you do, then answ | er 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? | | M | | |
| | 32b. Do on-site space heaters burn only used oil that is generated on-site or received from household do-it-yourself generators? | | Ď | | |
| | 32c. Are combustion gases from used oil space heaters vented to the outside ambient air? | | X | | |

| NA | Yes | No | Date of Return to |
|----|--------|-----|----------------------|
| | | | |
| | | | |
| | X | | 1 |
| | X | l L | |
| | 1 1 1 | | |
| | X | | |
| | | | |
| | | | |
| | X | | |
| | X | | |
| | - / | N/) | ∯_ pounds gallons |
| | | | |
| | | | |
| | | | |

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.

2) of the Environmental Conservation Law and section 210.45 of the Penal Law.

| Conservation |

ATTACHMENTS: YES NO