VEHICLE DISMANTLING FACILITY, MOTOR VEHICLE REPAIR SHOP								
AND MOBILE VEHICLE CRUSHER ANNUAL REPORT								
Submit the Annual Report no later than March 1, 2022								
JAN <b>1 3</b> 2022 This annual report is for the year of operation from <u>January 01, 2021</u> to <u>December 31, 2021</u>								
NY'S DEC Region 9 - Buffalo SECTION 1 – FACILITY INFORMATION								
FACILITY INFORMATION								
	10							
FACILITY LOCATION ADDRESS:	FACILITY CITY: STATE: ZIP CODE:							
873 RT. 39								
FACILITY TOWN:	FACILITY COUNTY:							
HANOVER	CHAUTAUQUA	(/1	6) 96:	5-2929				
FACILITY NYS PLANNING UNIT: (A list of NYS Planning Units can be found at the end of this report).       NYSDEC         CHAUTAUQUA COUNTY       REGION #: 9								
FACILITY TYPE: 🕢 Vehicle Dismantler	Motor Vehicle Repair Shop	NYS DE	C ACTIVIT	Y CODE:				
DMV I.D. # 7074206 Device Crusher 07V5004								
FACILITY CONTACT:	public CONTACT PHONE	0	CONTACT	FAX NUMBER:				
DAVID N. VALENTINE	<b>Private NUMBER:</b> (716) 965-2042	1	IONE					
CONTACT EMAIL ADDRESS: NONE								
	OWNER INFORMATION							
OWNER NAME: DAVID N. VALENTINE	OWNER PHONE NUMBER: (716) 965-2042	NON	ER FAX N					
OWNER ADDRESS: 917 RT. 39	OWNER CITY: FORESTVILLE		STATE: NY	<b>ZIP CODE:</b> 14062				
OWNER CONTACT:	OWNER CONTACT EMAIL ADDI	RESS:	L					
DAVID N. VALENTINE	NONE							
	OPERATOR INFORMATION							
<b>OPERATOR NAME:</b> Same as owner			public ☑private					
	PREFERENCES		****					
Preferred address to receive correspondence:       Facility location address       Image: Owner address         Other (provide):       Image: Other (provide):       Image: Other (provide):								
Preferred email address: Facility Contact	Owner Contact							
Preferred individual to receive correspondence Other (provide):	9: Facility Contact 🔽 Ow	ner Contact						
			1,94° - 24 - 24 - 24 - 24 - 24 - 24 - 24 -					
Did you operate in 2021? Ves; Complete	e this form.							
🗌 No; Complete	and submit Sections 1 and 12.							

SECTION 2A VDF/REPAIR SHOPS- END-OF-LIFE VEHICLES	0
Provide the number of ELVs received from January 1 to December 31:	~
• Provide the number of ELVs crushed and/or removed from the facility	0
from January 1 to December 31:	1147
Provide the number of ELVs stored at the facility as of December 31:	1147
<ul> <li>Provide the highest number of ELVs stored at the facility</li> </ul>	1147
at any one time from January 1 to December 31:	
<ul> <li>Provide the approximate area used for the storage of vehicles (acres):</li> </ul>	10acre
Provide the names of scrap metal processors to which you sold or sent de	commissioned ELVs:
1)	
2)	
3)	
3) SECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLE	S (ELVs) PROCESS
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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>  $\sqrt{s}$  or X's) are not acceptable. Report only fluids generated from dismantling operations (not general car repair, etc.).

	Fluid	Destination Name & Address			
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.)	
	2				
	2				
	0				
	0				
	0				
	0				
	0				
	on-site (oil heater,	Used on-site (oil heater, etc.)Stored on-site at year-end222000000000	on-site (oil heater, etc.)Stored on-site at year-endSold/ Recycled off-site222000000000	Used on-site (oil heater, etc.)Stored on-site at year-endSold/ Recycled off-siteDisposed off-site*22222011001100110011001100110011	

\* 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	icrap etal essor	
Ferrous Scrap Metal	0	62	0		□Yes	√No	
Aluminum Scrap Metal	0	1/6	3/4		Yes	□No	
Lead Weights	0	50 lbs.	0		□Yes	∕No	
Non – Ferrous Scrap Metal	0	3/4	1 1/4		r∕Yes	□No	
Other (specify):					□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 0 (Number)

ABS	0	
(Numbe	r)	

Indicate permitted facility or permitted transporter accepting mercury containing devices:

	SECTION 6 – AIF	R BAGS COLLECTED	
Provide the number of air bags <u>recov</u>	ered.		
Number of Air Bags Removed:	0	Number of Air Bags Deployed:	0
Indicate permitted facility or permitte	d transporter accept		

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# SECTION 12 - COMPLIANCE CERTIFICATION

### As of December 31, 2021:

				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?				
<ol> <li>Is a system in place to control vegetation and prevent it from encroaching onto fire access lanes or driveways?</li> </ol>		$\overline{\mathbf{V}}$		
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?		$\Box$		
6. Have all observed leaks been remedied or contained?		$\Box$		
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.				
9b. Spill or release of vehicle waste fluids.				
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?		$\mathbf{\nabla}$		
11. Are all vehicle residues prevented from migrating from or running off your property?				
<ol> <li>Is dust controlled to prevent interference with facility operations or from leaving facility site?</li> </ol>		$\overline{\mathbf{N}}$		
13. Are vectors (mosquitoes, rats, mice, etc.) controlled to prevent interference with facility operations?		$\overline{\mathbf{V}}$		
14. Are waste fluids kept from being discharged onto the ground or into surface waters?		$\mathbf{\nabla}$		
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)?				
16. Are fluids drained from end-of-life vehicles on a pad constructed of concrete or equivalent material?				
17. Are you doing the following with your concrete (or equivalent surface) pad that is u draining, crushing, etc.?	sed for	vehicle	dismai	ntling, fluid
17a. Cleaning daily.		$\overline{\mathbf{V}}$		
17b. Cleaning spills as they occur.				
17c. Collecting and properly disposing of absorbent materials.		$\checkmark$		

### 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	B	WASTE	TIRES	COLLECTED
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Number of waste tires stored on-site:	260	as of December 31
Number of used tires available for sale on-site:	8	as of December 31
Number of used tires sold:	generation and the second s	during operating year
Number of waste tires shipped off-site for recycling, disposal, other:		during operating year
Indicate name of facility(ies) accepting waste tires:		

SECTION 9 – SELF INSPECTIONS					
Number of self-inspections conducted for the year:	DAILY				
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 Vo If yes, attach additional sheets identifying each problem and the met	thods for resolution of the problem				
SECTION 11 - CHANGES					
Were there any changes from approved reports, plans, specifications, and permit co	nditions?				
Yes No If yes, attach additional sheets identifying changes with a justification	on for each change.				

Waste Management Compliance Checklist	NA	Yes	No	Date of Return to Compliance
33. Is waste oil kept from being mixed with brake cleaner, carb cleaner, antifreeze, solvents, gasoline, or degreasers?		$\overline{\mathbf{V}}$		
34. Are sludges from sumps and oil/water separators stored in covered, closed and labeled containers?	$\mathbf{\nabla}$			
35. Are sludges properly recycled or disposed?	$\checkmark$			
36. Are used oil filters properly drained, crushed or dismantled?		$\checkmark$		
37. Are drained oil filters properly recycled or disposed?		$\checkmark$		
<ol> <li>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:</li> </ol>				
38a. If required by the SPDES MSGP, has a Stormwater Pollution Prevention Plan been prepared for this facility?				
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?				
38c. Has the facility's Annual Certification Report for the SPDES MSGP been submitted within the previous year?	$\overline{\mathbf{V}}$			
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?				pounds gallons

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

COMMENTS? (Attach additional sheets if necessary)

				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 a axle fluid, brake fluid, power steering fluid, coolant, and fuel).	and rear			
18b. Lead acid batteries.		$\checkmark$		
18c. Mercury switches or other mercury containing devices, if any.		$\mathbf{\mathbf{V}}$		
18d. Refrigerants, if any.		$\checkmark$		
18e. Air bags.		$\checkmark$		
18f. PCB capacitors, if any.		$\checkmark$		
19. Are fluids stored separately & in containers that are compatible with their contents?		$\mathbf{\overline{\mathbf{N}}}$		
20. Are fluids stored in closed containers?		$\checkmark$		
21. Are containers which contain waste fluids in good condition and not visibl leaking?	ly	$\mathbf{\nabla}$		
22. Are containers clearly and legibly labeled to describe their contents?		$\checkmark$		
23. Are containers stored on a bermed pad constructed of concrete or equiva material?	alent	$\checkmark$		
24. Are lead-acid batteries stored upright and off the ground?		$\checkmark$		
25. Are lead-acid batteries covered to protect them from precipitation?		$\mathbf{\overline{\mathbf{N}}}$		
26. Are all lead-acid batteries sent for recycling within one-year of receipt?		$\mathbf{\overline{\mathbf{N}}}$		
27. Are <u>leaking</u> lead-acid batteries, if any are encountered, stored in leak-pro containers separated from intact batteries?	of	$\mathbf{\overline{\mathbf{A}}}$		
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?		$\mathbf{\overline{\mathbf{A}}}$		
30. Is used oil stored in accordance with local building codes, local fire codes the NYS Uniform Fire Prevention & Building Code?	s, and	$\mathbf{\overline{\mathbf{A}}}$		
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 answer 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-sit received from household do-it-yourself generators?	te or			
32c. Are combustion gases from used oil space heaters vented to the ou ambient air?	utside			<b>ange</b> ,

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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: SWMFannuaireport@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.

Naved 71 Valintine 1/11/22 Signature Date

DAVID N. VALENTINE OWNER

Name (Print or Type)

Title (Print or Type)

NONE

Email (Print or Type)

917 RT 39

Address

FORESTVILLE City

NY 14062

State and Zip

(716)965\_2042 Phone Number

ATTACHMENTS: YES NO

### VALENTINE AUTO WRECKING

#### ANNUAL REPORT ATTACHMENT:

Section 9 – Self Inspections

Number of self-inspections conducted for the year:

As owner and operator of this business, I inspect the premises continuously. I therefore answered this question "daily" rather than a number.