

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

Submit the Annual Report no later than March 1, 2023

This annual report is for the year of operation from <u>January 01, 2022</u> to <u>December 31, 2022</u>

SECTION 1 – FACILITY INFORMATION

| FACILITY INFORMATION | | | | | | |
|--|---------------------------------------|--|-----------------|---------------------|--|--|
| FACILITY NAME: | | | | | | |
| FACILITY LOCATION ADDRESS: | FACILITY | CITY: | ST | TATE: ZIP CODE: | | |
| FACILITY TOWN: | FACILITY | COUNTY: | FACILITY | PHONE NUMBER: | | |
| FACILITY NYS PLANNING UNIT: (A list of N | _ I YS Planning Uni | ts can be found at the end o | f this report). | NYSDEC REGION #: | | |
| FACILITY TYPE: ☐ Vehicle Dismantler DMV I.D. # | | Vehicle Repair Shop Vehicle Crusher | NYS DEC A | CTIVITY CODE: | | |
| FACILITY CONTACT: | □ public | | | TACT FAX NUMBER: | | |
| CONTACT EMAIL ADDRESS: | | | | | | |
| | OWNER | INFORMATION | - 1 | | | |
| OWNER NAME: | OWNER PHONE NUMBER: OWNER FAX NUMBER: | | | FAX NUMBER: | | |
| OWNER ADDRESS: | OWNER CITY: STATE: ZIP COL | | | ATE: ZIP CODE: | | |
| OWNER CONTACT: | OWNER C | ONTACT EMAIL ADDR | RESS: | * | | |
| | OPERATO | R INFORMATION | | | | |
| OPERATOR NAME: same as owner | | | | ublic rivate | | |
| | PREI | FERENCES | | | | |
| Preferred address to receive correspondence: Facility location address Owner address | | | | | | |
| Preferred email address: | | | | | | |
| Preferred individual to receive corresponden | oce: ☐ Facili | ty Contact | ner Contact | | | |
| Did you operate in 2022? ☐ Yes; Comple | ete this form. | | | | | |
| ☐ No; Complete and submit Sections 1 and 13 | | | | | | |

| Provide the number of ELVs received from January 1 to December 3 | 1: |
|--|--------------------------|
| | |
| Provide the number of ELVs crushed and/or removed from the facility from January 1 to December 31: | ty |
| from January 1 to December 31: | |
| Provide the number of ELVs stored at the facility as of December 31 | : |
| . Don't le the high est accept on af ELVe stored at the facility. | |
| Provide the highest number of ELVs stored at the facility at any one time from January 1 to December 31: | |
| at any one ame nom canally 1 to become of. | |
| Provide the approximate area used for the storage of vehicles (acres | s): acres |
| Trevide the approximate area about of the elerage of verificities (action | dol do |
| Provide the names of scrap metal processors to which you sold or se | ent decommissioned ELVs: |
| 1) | |
| | |
| 2) | |
| | |
| 2) | |
| 3) | |
| 0) | |
| | ICLES (ELVA) PROCESSE |
| | ICLES (ELVs) PROCESSE |
| SECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEH | |
| SECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEH | |
| • Provide the number of ELVs crushed from January 1 to December 3 | 3: |
| • Provide the names of each facility where you crushed decommission | ed ELVs: |
| • Provide the names of each facility where you crushed decommission | ed ELVs: |
| • Provide the number of ELVs crushed from January 1 to December 3 • Provide the names of each facility where you crushed decommission 1) | B: ed ELVs: |
| • Provide the number of ELVs crushed from January 1 to December 3 • Provide the names of each facility where you crushed decommission 1) | B: ed ELVs: |
| • Provide the number of ELVs crushed from January 1 to December 3 • Provide the names of each facility where you crushed decommission 1) | ed ELVs: |
| • Provide the number of ELVs crushed from January 1 to December 3 • Provide the names of each facility where you crushed decommission 1) | ed ELVs: |
| • Provide the number of ELVs crushed from January 1 to December 3 • Provide the names of each facility where you crushed decommission 1) | ed ELVs: |
| • Provide the number of ELVs crushed from January 1 to December 3 • Provide the names of each facility where you crushed decommission 1) | ed ELVs: |
| Provide the number of ELVs crushed from January 1 to December 3 Provide the names of each facility where you crushed decommission 1) 2) 4) | ed ELVs: |
| • Provide the number of ELVs crushed from January 1 to December 3 • Provide the names of each facility where you crushed decommission 1) | ed ELVs: |

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. \sqrt{s} or X's) are not acceptable</u>. 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) | | | | | |
| Used Oil** (gallons) | | | | | |
| Diesel Fuel (gallons) | | | | | |
| Gasoline (gallons) | | | | | |
| 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.

| Material Types Received Stored On Site Sent Off Site | Destination | | | | | |
|--|---------------------------------------|----------------------------|--|--|------------------------|--------|
| Material Types | (tons) | (tons) (tons) | NYS <u>Planning Unit (or state if</u> other than New York) | Me | Scrap etal essor | |
| Ferrous Scrap Metal | | | | | □Yes | □No |
| Aluminum Scrap Metal | | | | | □Yes | □No |
| Lead Weights | | | | | □Yes | □No |
| Non – Ferrous Scrap Metal | | | | | □Yes | □No |
| Other (specify): | | | | | □Yes | □No |
| | | | | | □Yes | □No |
| Provide the number (H&TS) and antilog | er of mercury-con ck brake assembl | taining devices <u>rec</u> | | HES COLLECTED ng but not limited to hood & trunk li | ghting sw | itches |
| | H&TS (Number) | | | ABS (Number) | | |
| Indicate permitted | facility or permitte | ed transporter acce | epting mercury co | ontaining devices: | | |
| | | SECTION 6 - | AIR BAGS C | COLLECTED | | |
| Provide the number | er of air bags <u>reco</u> | overed. | | | | |
| Number of Air Bag | gs Removed: | | Num | nber of Air Bags Deployed: | | |
| Indicate permitted | I facility or permit | ted transporter ac | cepting air bags | : | | |
| | | | | | | |

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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: | | | | |
| Indicate permitted facility or permitted transporter accepting lead-acid batteries | 3: | | | |
| | | | | |
| | | | | |
| Any materials disposed must undergo a hazardous waste determination and p hazardous. | proper handling, storage and disposal, if | | | |
| SECTION 8 – WASTE TIRES COL | LECTED | | | |
| Number of waste tires stored on-site: | 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: | during operating year | | | |
| Indicate name of facility(ies) accepting waste tires: | | | | |
| | | | | |
| | | | | |
| SECTION 9 – SELF INSPECTION Number of self-inspections conducted for the year: | ONS | | | |
| Are self-inspection records up-to-date with inspector name, what was inspection of the year. □ Yes □ No | ected, time and date of inspection? | | | |
| At a minimum, are fluid storage areas, vehicles, vehicle storage areas insp ☐ Yes ☐ No | pected for leaks/spills? | | | |
| SECTION 10 – PROBLEMS | S | | | |
| Were any problems encountered during the reporting period (e.g., specific of facility procedures)? | occurrences which have led to changes in | | | |
| ☐ Yes ☐ No If yes, attach additional sheets identifying each problem are | nd the methods for resolution of the problem | | | |
| SECTION 11 – CHANGES | | | | |
| Were there any changes from approved reports, plans, specifications, and | permit conditions? | | | |
| ☐ Yes ☐ No If yes, attach additional sheets identifying changes with a justification for each change. | | | | |

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? | | | | |
| 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? | | | | |
| 6. Have all observed leaks been remedied or contained? | | | | |
| 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 follow | ing? | | | |
| 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? | | | | |
| 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? | | | | |
| 14. Are waste fluids kept from being discharged onto the ground or into surface waters? | | | | |
| 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 draining, crushing, etc.? | used for | vehicle | dismar | ntling, fluid |
| 17a. Cleaning daily. | | | | |
| 17b. Cleaning spills as they occur. | | | | |
| 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? | ed follov | 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). | | | | |
| | 18b. Lead acid batteries. | | | | |
| | 18c. Mercury switches or other mercury containing devices, if any. | | | | |
| | 18d. Refrigerants, if any. | | | | |
| | 18e. Air bags. | | | | |
| | 18f. PCB capacitors, if any. | | | | |
| 19. | Are fluids stored separately & in containers that are compatible with their contents? | | | | |
| 20. | Are fluids stored in closed containers? | | | | |
| 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? | | | | |
| 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? | | | | |
| 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? | | | | |
| 28. | Are mercury switches and other mercury containing devices stored in appropriate, labeled containers and then sent for recycling? | | | | |
| 29. | Are PCB capacitors, if any are encountered, removed and stored in appropriate, labeled containers for recycling or disposal? | | | | |
| 30. | Is used oil stored in accordance with local building codes, local fire codes, and the NYS Uniform Fire Prevention & Building Code? | | | | |
| 31. | If sent off-site, is used oil transported via a permitted hauler? | | | | |
| 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?

| | | | | Date of Return t |
|--|----|-----|----|------------------|
| Waste Management Compliance Checklist | NA | Yes | No | Compliance |
| 33. Is waste oil kept from being mixed with brake cleaner, carb cleaner, antifreeze, solvents, gasoline, or degreasers? | | | | |
| 34. Are sludges from sumps and oil/water separators stored in covered, closed and labeled containers? | | | | |
| 35. Are sludges properly recycled or disposed? | | | | |
| 36. Are used oil filters properly drained, crushed or dismantled? | | | | |
| 37. Are drained oil filters properly recycled or disposed? | | | | |
| 38. 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? | | | | |
| 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? | | | | |
| 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 |
| monur | | _ | | gallons |
| Do you have any other Environmental Conservation Law or regulatory violations? (Attach additional sheets as necessary.) | | | | |
| COMMENTS? (Attach additional sheets if necessary) | | | | |

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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.

| Signature | Date |
|----------------------|------------------------|
| | |
| Name (Print or Type) | Title (Print or Type) |
| Name (Fint or Type) | Title (Fillit of Type) |
| | |
| Ema | ail (Print or Type) |
| | |
| | |
| Address | City |
| | |
| | |
| State and Zip | Phone Number |
| | |
| | |

ATTACHMENTS: ____YES ____NO

SECTION 13 - SIGNATURE AND DATE BY OWNER OR OPERATOR

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| Marker 2 Signature | 3-1-23 Date |
|------------------------------|----------------------------------|
| MAtthew Ticcony | President |
| Name (Print or Type) | Title (Print or Type) |
| mosar mart O(a) Email (Pr | rint or Type) |
| 58 Honeywell Lune Address | Hydre Park City |
| NY 12538 State and Zip | (845) 471 - 2377 Phone Number |

ATTACHMENTS: YES NO

* This page for reference only. Please do not return with submittal. *

Division of Materials Management New York State Department of Environmental Conservation Albany, New York 12233-7260

Forms for all solid waste management facilities can be found at http://www.dec.ny.gov/chemical/52706.html and a brief description of each type of facility can be found at http://www.dec.ny.gov/chemical/8495.html.

VEHICLE DISMANTLING FACILITIES, MOTOR VEHICLE REPAIR SHOPS AND MOBILE VEHICLE CRUSHERS Annual Report

Submit the Annual Report no later than March 1, 2022.

Reporting of the information indicated on this Vehicle Dismantling, Motor Vehicle Repair Shop and Mobile Vehicle Crusher Annual Report form is required pursuant to 6 NYCRR 360-12.1(c) and 360.19(k)(12). Failure to provide the required information requested is a violation of Environmental Conservation Law. Timely submission of a properly completed form to the Department's Regional Office that has jurisdiction over your facility and to the Department's Central Office is required to meet the Annual Report requirements of 6 NYCRR Part 360.

Reporting of the information indicated on this Mandatory Annual Report including Self-Certification for Vehicle Dismantling Facilities fulfills the reporting requirements pursuant to 6 NYCRR 360-12.1(c).

Entries on the report forms should be either typewritten or neatly printed in black ink. Attach additional sheets if space on the pages is insufficient or supplementary information is required or appropriate.

*This page for reference only. Please do not return with submittal.

New York State Planning Units & Regions

When completing the annual report, please use the <u>Planning Unit</u> listed below that corresponds with the municipality and county. Note: The Planning Unit is not the DEC Region.

| DEC Region | Planning Unit | County | Municipality |
|---------------|---|-------------|---|
| Region | Glen Cove | | Glen Cove (City) |
| | Hempstead | | Hempstead (Town) |
| | Long Beach | | Long Beach (City) |
| | North Hempstead Solid Waste Management | Nassau | North Hempstead (Town), except 8 |
| | Authority | | villages (see below) |
| | Oyster Bay Solid Waste Disposal District | | Oyster Bay (Town), except 16 villages (see below) |
| | Babylon | | Babylon (Town) |
| | Brookhaven | | Brookhaven (Town) |
| 1 | East Hampton | | East Hampton (Town) |
| | Fishers Island Waste Management District | | Fishers Island |
| | Huntington | _ | Huntington (Town) |
| | Islip Resource Recovery Agency | Suffolk | Islip (Town) |
| | Riverhead | | Riverhead (Town) |
| | Shelter Island | _ | Shelter Island (Town) |
| | Smithtown | | Smithtown (Town) |
| | Southampton | | Southampton (Town) |
| | Southold | | Southold (Town), except Fishers Island |
| | | Bronx | Bronx |
| | | Kings | Kings (Brooklyn) |
| 2 | New York City | New York | New York (Manhattan) |
| | | Queens | Queens |
| | | Richmond | Richmond (Staten Island) |
| | Dutchess County | Dutchess | |
| | Orange County | Orange | |
| | Putnam County | Putnam | |
| 3 | Rockland County Solid Waste Management Authority (RCSWMA) | Rockland | |
| | Sullivan County | Sullivan | |
| | Ulster County Resource Recovery Agency (UCRRA) | Ulster | |
| | Westchester County | Westchester | |
| | | | Cohoes (City) |
| | | | Colonie (Town) |
| | Colonie | Albany | Colonie (Village) |
| | | | Menands (Village) |
| | | | Watervliet (City) |
| | | | Albany (City) |
| | | | Altamont (Village) |
| 4 | | | Berne (Town) |
| _ | | | Bethelehem (Town) |
| | Capital Region Solid Waste Management | | Green Island (Town/Village) |
| | | Albany | Guilderland (Town) |
| | Partnership | | Knox (Town) |
| | | | New Scotland (Town) |
| | | | Rensselaerville (Town) |
| | | | Voorheesville (Village) |
| | | | Westerlo (Town) |

| | | | East Greenbush (Town) |
|---|---|--------------|---|
| | | Rensselaer | Rensselaer (City) |
| | | | Castleton-on-Hudson (Village) |
| | | | Hoosick Falls (Village) |
| | | | Nassau (Village) |
| | Eastern Rensselaer County Solid Waste | Damasalaan | |
| | Management Authority | Rensselaer | Pittstown (Town) |
| | | | Schaghticoke (Town/Village) |
| 4 | | | Stephentown (Town) |
| • | | | Valley Falls (Village) |
| | Columbia County | Columbia | All, except Town of Canaan |
| | Delaware County | Delaware | |
| | Greene County | Greene | |
| | Montgomery County | Montgomery | |
| | Otsego County | Otsego | |
| | Schoharie County | Schoharie | |
| | Schenectady County | Schenectady | |
| | Clinton County | Clinton | |
| | Essex County | Essex | |
| | County of Franklin Solid Waste Management | | |
| | Authority (CFSWMA) | Franklin | |
| 5 | Fulton County | Fulton | |
| | Hamilton County | Hamilton | |
| | Saratoga County | Saratoga | |
| | Warren County | Warren | |
| | Washington County | Washington | |
| | - Videning Con County | Jefferson | |
| | Development Authority of the North Country (DANC) | Lewis | |
| 6 | | St. Lawrence | |
| O | | Oneida | |
| | Oneida-Herkimer Solid Waste Authority | Herkimer | |
| | Broome County | Broome | |
| | Cayuga County | Cayuga | |
| | | | |
| | Chenango County | Chenango | |
| | Cortland County | Cortland | |
| 7 | Madison County | Madison | All recordising aliking |
| | Onondaga County | Onondaga | All municipalities, except Town and Village of Skaneatles (See below) |
| | Oswego County | Oswego | |
| | Tioga County | Tioga | |
| | Tompkins County | Tompkins | |
| | Chemung County | Chemung | |
| | GLOW Region Solid Waste Management | Genesee | |
| | Committee | Livingston | |
| | Monroe County | Monroe | |
| 0 | Ontario County | Ontario | |
| 8 | Orleans County | Orleans | |
| | Schuyler County | Schuyler | |
| | Seneca County | Seneca | |
| | Steuben County | Steuben | |
| | Wayne County | Wayne | |
| | Yates County | Yates | |
| | | | |
| 0 | Allegany County | Allegany | |
| 9 | Cattaraugus County | Cattaraugus | |
| | Chautauqua County | Chautauqua | |

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| | GLOW Region Solid Waste Management Committee | Wyoming | |
|---|--|---------|--|
| | Niagara | Niagara | |
| 9 | Northeast-Southtowns Solid Waste Management Board (NEST) | Erie | Akron (Village) Alden (Town/Village) Angola (Village) Aurora (Town) Blasdell (Village) Boston (Town) Brant (Town) Cheektowaga (Town) Colden (Town) Colden (Town) Concord (Town) Depew (Village) East Aurora (Village) Eden (Town) Elma (Town) Evans (Town) Farnham (Village) Gowanda (Village) Hamburg (Town/Village) Holland (Town) Lackawanna (City) Lancaster (Town/Village) Marilla (Town) Newstead (Town) North Collins (Town/Village) Orchard Park (Town/Village) Sardinia (Town) Sloan (Village) Springville (Village) Wales (Town) |
| | Northwest Communities Solid Waste Management Board (NWCB) | Erie | West Seneca (Town) Amherst (Town) Grand Island (Town) Kenmore (Village) Tonawanda (Town/Village) |

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Municipalities Not Currently Affiliated With a Recognized Planning Unit

| DEC | County | Non-Mombor Municipality | |
|--------|------------|---|--|
| Region | County | Non-Member Municipality | |
| 1 | Nassau | Great Neck Estates (Village) Great Neck Plaza (Village) Mineola (Village) New Hyde Park (Village) Plandome (Village) Plandome (Village) Westbury (Village) Westbury (Village) Bayville (Village) Brookville (Village) Contre Island (Village) Cove Neck (Village) Glenwood – Glen Head Garbage District Lattington (Village) Laurel Hollow (Village) Matinecock (Village) Mill Neck (Village) Muttontown (Village) Old Brookville (Village) Old Westbury (Village) Roslyn Harbor (Village) Roslyn Harbor (Village) Upper Brookville (Village) | |
| | Albany | Coeymans (Town) Ravena (Village) | |
| 4 | Rensselaer | Berlin (Town) Brunswick (Town) Grafton (Town) Hoosick (Town) Nassau (Town) Petersburg (Town) Poestenkill (Town) North Greenbush (Town) | |
| | | Sand Lake (Town) Schodack (Town) Troy (City) Canaan (Town) | |
| 7 | Onondaga | Skaneatles (Town/Village) | |
| 9 | Erie | Buffalo (City) | |

New York State Department of Environmental Conservation
Division of Materials Management
Bureau of Solid Waste Management

MATERIAL MANAGEMENT PROGRAM CONTACTS

CENTRAL OFFICE

Bureau of Solid Waste Management 625 Broadway Albany, NY 12233-7260

Phone: (518) 402-8678

For Submission of Solid Waste Management Facility Annual Reports only:

Fax: (518) 402-9041

Email: swmfannualreport@dec.ny.gov

REGIONAL OFFICE ADDRESS & LEAD CONTACT PERSON

REGION 1 (Nassau, Suffolk)

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