

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 January 01, 2022 to NYS DEC

SECT	10N 1 – FAC	CILITY INFORMATIO	N /_A	UG 0 8 2023
	FACILITY	INFORMATION		ou 0 6 2023
FACILITY NAME:			DIV. OF MA	TERIALS MANAGEMENT
Frenchs Garage U				<u> </u>
FACILITY LOCATION ADDRESS:	FACILITY	CITY:	STATE:	ZIP CODE:
769 CO HWY I	Mt. U	pton	NY	13809
FACILITY TOWN:	FACILITY	_	FACILITY PHO	NE NUMBER:
unadula	otse	90	NONE	
FACILITY NYS PLANNING UNIT: (A list of	NYS Planning Un	ts can be found at the end of		SDEC GION #: 4
FACILITY TYPE: Wehicle Dismantler DMV I.D. # 7119248	_	Vehicle Repair Shop Period Period	NYS DEC ACTIVIT	TY CODE:
FACILITY CONTACT: Torya Hayes	public private	CONTACT PHONE NUMBER: 607-895	contact 585H N	FAX NUMBER:
CONTACT EMAIL ADDRESS:				
	OWNER	INFORMATION		
owner name: Tonja Hayes Timothy French , Harry Fren		PHONE NUMBER: 07-895-5854	OWNER FAX N	UMBER:
OWNER ADDRESS:	OWNER O	ton	STATE:	ZIP CODE:
OWNER CONTACT:	1 .	CONTACT EMAIL ADDR		
Tonya Hayes		office@ gmail	.com	
	researche de la company de	R INFORMATION		
OPERATOR NAME: Same as OWARD	ove		□ public private	
	The state of the s	FERENCES		
Preferred address to receive corresponder. Other (provide):	oce: 🎵 Facility lo	ocation address	Owner addres	rs
Preferred email address: Facility Contact Other (provide):	t 🗖 o	wner Contact		
Preferred individual to receive corresponded Other (provide):	ence: K	ity Contact 🔲 Own	er Contact	
Did you operate in 2022? XYes; Comp	olete this form.			
□ No; Comple	ete and submit	Sections 1 and 13		

SECTION 2A VDF/REPAIR SHOPS- END-OF-LIFE VEHICLE	
• Provide the number of ELVs received from January 1 to December 31:	
 Provide the number of ELVs crushed and/or removed from the facility from January 1 to December 31: 	510
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: 	510
Provide the approximate area used for the storage of vehicles (acres):	
 Provide the names of scrap metal processors to which you sold or sent de 	commissioned ELVs:
1) Otogo auto Crusher	
2)	
3)	
	S (ELVs) PROCESSEI
3)SECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLE	
SECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLE • Provide the number of ELVs crushed from January 1 to December 3:	
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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. \sqrt{s} or X's) are not acceptable</u>. Report only fluids generated from dismantling operations (not general car repair, etc.).

		Fluid	Destination Name & Address		
Waste Fluid Recovered	Used on-site (oil heater, etc.)	Stored on-site at year-end	GIVEN QUAY Sold? Recycled off-site	Disposed off-site*	(Indicate permitted facility or permitted Part 364 transporter accepting waste fluids.)
Refrigerant (pounds)	200	0	200	o	Country Side Auto Baintrudge
Used Oil** (gallons)	2000	0	8	Ø.	
Diesel Fuel (gallons)	0	0	O	Ø	
Gasoline (gallons)	350	0	υ	Ď	
Engine Coolant/ Antifreeze (gallons)	200	0	O	o	
Window Washing Fluid (gallons)	50	0	0	0	
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.

MatarialTown	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	8	٥	10	O1890 Aut	ocuores	⊡ ∕∕es	□No	
Aluminum Scrap Metal	0	0	/	,,	"	☐ Yes	□No	
Lead Weights	0	0	.5	V	<i>II</i>	₩Ŷes	□No	
Non – Ferrous Scrap Metal	0	0	.5	ıl	11	₩Yes	□No	
Other (specify):	O	0	The second of th		, A/A/A (1991)	□Yes	□No	
				17%	MAN CONTRACTOR OF THE CONTRACT	□Yes	□No	

SECTION 5 - MERCURY SWITCHES COLLECTED

Provide the number of mercury-containing devices <u>recovered</u> . Including but not limited to hood & trunk liq (H&TS) and antilock brake assemblies (ABS).	ghting switches				
H&TS O ABS O (Number)					
Indicate permitted facility or permitted transporter accepting mercury containing devices: We didn't buy any and thus due to absure down The bullings					
	F10-20-				
SECTION 6 – AIR BAGS COLLECTED					
Provide the number of air bags recovered.					
Number of Air Bags Removed: Number of Air Bags Deployed:	0				
Indicate permitted facility or permitted transporter accepting air bags: We had none as we class by any cass thucks u 2006	<u> </u>				

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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: Webought no vehicles in 2022 we began process of Shuffing down	n the				
Any materials disposed must undergo a hazardous waste determination and prohazardous.	oper handling, sto	orage and disposal, if			
SECTION 8 - WASTE TIRES COLL	ECTED				
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:	_0_	during operating year			
Number of waste tires shipped off-site for recycling, disposal, other:	_95	during operating year			
Farmer down Road took themael					
SECTION 9 - SELF INSPECTIO	NS				
Number of self-inspections conducted for the year:	-				
Are self-inspection records up-to-date with inspector name, what was inspective of the self-inspection records up-to-date with inspector name, what was inspective of the self-inspection records up-to-date with inspector name, what was inspective of the self-inspection records up-to-date with inspector name, what was inspective of the self-inspector name, where the self-inspector name, where the self-inspector name, where the self-inspector name is the self-inspector name in the self-inspector name is the self-inspec	cted, time and dat	te of inspection?			
At a minimum, are fluid storage areas, vehicles, vehicle storage areas inspected for leaks/spills? Yes No					
SECTION 10 - PROBLEMS	<u>-</u>				
Were any problems encountered during the reporting period (e.g., specific occurrences which have led to changes in facility procedures)?					
Yes No If yes, attach additional sheets identifying each problem and	the methods for	resolution of the problem			
SECTION 11 - CHANGES					
Were there any changes from approved reports, plans, specifications, and p	ermit conditions?				
Yes No If yes, attach additional sheets identifying changes with a ju	stification for eac	ch 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?	Ø			
 Is a system in place to control vegetation and prevent it from encroaching onto fire access lanes or driveways? 		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?		V		
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?		Ø		
7. Does your facility have a written Contingency Plan?		W		
8. Are facility personnel trained to implement the Contingency Plan?		V		
9. Does your Contingency Plan include actions to be taken in the event of the following	ng?	•	·	
9a. Fire.		P		
9b. Spill or release of vehicle waste fluids.		V		
9c. Unauthorized material received at facility.		V		
10. Are spills of waste fluids, if any occur, reported to the NYSDEC Spills Hotline within two hours of detection?		V		
11. Are all vehicle residues prevented from migrating from or running off your property?		P		
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?		7		
14. Are waste fluids kept from being discharged onto the ground or into surface waters?		9		
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)?		N		
16. Are fluids drained from end-of-life vehicles on a pad constructed of concrete or equivalent material?		7		
17. Are you doing the following with your concrete (or equivalent surface) pad that is us draining, crushing, etc.?	sed for	vehicle	dismar	ntling, fluid
17a. Cleaning daily.		P		
17b. Cleaning spills as they occur.		P.		
17c. Collecting and properly disposing of absorbent materials.		4		

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					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?	d follow	ing bes	t 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.		V,		
	18c. Mercury switches or other mercury containing devices, if any.		V		
	18d. Refrigerants, if any.		V		
	18e. Air bags.		N		
	18f. PCB capacitors, if any.			,	
19.	Are fluids stored separately & in containers that are compatible with their contents?		U		
20.	Are fluids stored in closed containers?		V		
21.	Are containers which contain waste fluids in good condition and not visibly leaking?		团		
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?		V,		
24.	Are lead-acid batteries stored upright and off the ground?		V		
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?		Ø		
27.	Are <u>leaking</u> lead-acid batteries, if any are encountered, stored in leak-proof containers separated from intact batteries?		Q		
	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?		Ø		
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?	V			
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?		Ø	W	
	32c. Are combustion gases from used oil space heaters vented to the outside ambient air?				

			Date of Return to
NA	Yes	No	Compliance
	V		
	V		
	V		
	V		
	V		
√			
	_	NA	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.

Donya Hayes Signature	<u>B</u> 3/10/23
Name (Print or Type)	Title (Print or Type)
Email (Pfint o	or Tyne)
	туре <i>)</i>
769 OD HWY / Address	MH UDION City
	()NAPhone Number
My Personal enail + Phone #	Can boused.
tonya teoffice@gmaid.Com bun-895-5854	
W1-895-5854	
ATTACHMENTS: YESNO pg .	