

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	ON	
	FACILITY INFORMATION		
FACILITY NAME: Harrys Auto			
FACILITY LOCATION ADDRESS: 182 Co Hwy 107	FACILITY CITY: Johnstown	STA NY	TE: ZIP CODE: 12095
FACILITY TOWN: Johnstown	FACILITY COUNTY: Fulton	FACILITY F 518-762-49	PHONE NUMBER: 941
FACILITY NYS PLANNING UNIT:	A list of NYS Planning Units can be found at the end of	f this report).	NYSDEC 5 REGION #:
FACILITY TYPE: Vehicle Dismi	antler Motor Vehicle Repair Shop Mobile Vehicle Crusher	NYS DEC ACT	IIVITY CODE:
FACILITY CONTACT: Rob VanAernam	public CONTACT PHONE NUMBER: 5188484357	CONT	ACT FAX NUMBER:
CONTACT EMAIL ADDRESS:Rev	11@frontiernet.net		
	OWNER INFORMATION		
OWNER NAME: Robert VanAernam	OWNER PHONE NUMBER: 5187624941	OWNER FA	AX NUMBER:
OWNER ADDRESS: 180 Co Hwy 107	OWNER CITY: Johnstown	STA ny	TE: ZIP CODE: 12095
OWNER CONTACT: Robert VanAernam	OWNER CONTACT EMAIL ADDR Rev11@frontiernet.net	RESS:	
	OPERATOR INFORMATION		and the second s
OPERATOR NAME: same	e as owner	∏pul ☑pri	
	PREFERENCES		
Preferred address to receive corres Other (provide):	spondence: Facility location address	Owner a	ddress
Preferred email address: Facili	ty Contact Owner Contact		
Preferred individual to receive corre	espondence: Facility Contact	ner Contact	
Did you operate in 2022? 🗹 Ye	s; Complete this form.		
□No;	Complete and submit Sections 1 and 13		

	100
Provide the number of ELVs received from January 1 to December 31:	
Provide the number of ELVs crushed and/or removed from the facility	300
from January 1 to December 31:	600
Provide the number of ELVs stored at the facility as of December 31:	
Provide the highest number of ELVs stored at the facility	750
at any one time from January 1 to December 31:	
	20
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 Sims Metal Management 	decommissioned ELVs:
1)	-
2)	_
3)	-
SECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICE	ES (ELVs) PROCESSED
	LES (ELVs) PROCESSED
	LES (ELVs) PROCESSED
Provide the number of ELVs crushed from January 1 to December 3:	
• Provide the number of ELVs crushed from January 1 to December 3: • Provide the names of each facility where you crushed decommissioned	
Provide the number of ELVs crushed from January 1 to December 3:	
 Provide the number of ELVs crushed from January 1 to December 3: Provide the names of each facility where you crushed decommissioned 	 ELVs: _
Provide the number of ELVs crushed from January 1 to December 3: Provide the names of each facility where you crushed decommissioned 1) 2)	ELVs:
Provide the number of ELVs crushed from January 1 to December 3: Provide the names of each facility where you crushed decommissioned 1)	ELVs:
Provide the number of ELVs crushed from January 1 to December 3: Provide the names of each facility where you crushed decommissioned 1) 2)	ELVs:
Provide the number of ELVs crushed from January 1 to December 3: Provide the names of each facility where you crushed decommissioned 1) 2) 4)	ELVs:
Provide the number of ELVs crushed from January 1 to December 3: Provide the names of each facility where you crushed decommissioned 1) 2) 3)	ELVs:

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)	40				
Used Oil** (gallons)	600	400	500		Sheldon Oil
Diesel Fuel (gallons)	450	200			
Gasoline (gallons)	350	200			
Engine Coolant/ Antifreeze (gallons)	100	300	500		Sheldon Oil
WindowWashing Fluid (gallons)	20	55			
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.

	Paration d	040-04 0- 040	Sent Off Site	Destination	To Scran	
Material Types	Received (tons)	Stored On Site (tons)	(tons)	NYS <u>Planning Unit</u> (or state if other than New York)		
Ferrous Scrap Metal	0	0	0		□Yes	☑No
Aluminum Scrap Metal	0	0	0		□Yes	⊡No
Lead Weights	0	0	0		□Yes	ØN¢
Non – Ferrous Scrap Metal	0	0	0		□Yes	⊡No
Other (specify):					Yes	☑No
					Yes	⊡No
indicate permitted	H&TS (Number	itted transporter acc	epting mercury o	ABS (Number) containing devices:		
		SECTION 6	– AIR BAGS	COLLECTED		
Provide the numb Number of Air Ba Indicate permitte	gs Removed:		Nu	mber of Air Bags Deployed:	0	
Reprinted (12/22))					

SECTION 7 – LEAD-ACID BATTERIES COLLECTED

Provide the number of lead-acid batteries <u>reco</u>	vered and their disposition.	100	
Number of Lead-Acid Batteries collected from	ELVs:		
Indicate permitted facility or permitted transpor	rter accepting lead-acid batteries:		
Any materials disposed must undergo a hazar hazardous.	dous waste determination and pro	per handling, s	torage and disposal, if
	N 8 – WASTE TIRES COLLE	1000	as of December 31
Number of waste tires stored on-site Number of used tires available for sale on-site	. .	500	as of December 31
Number of used tires available for sale off-site Number of used tires sold:	.	100	during operating year
Number of waste tires shipped off-site for rec	ycling, disposal, other:	300	during operating year
Indicate name of facility(ies) accepting waste Rensselaer iron & steel inc	tires:		
SEC	TION 9 - SELF INSPECTIO)NS	2
Number of self-inspections conducted for	the year:		
Are self-inspection records up-to-date with ☐ Yes ☑ No	n inspector name, what was inspec	cted, time and	date of inspection?
At a minimum, are fluid storage areas, ve	hicles, vehicle storage areas inspe	ected for leaks/	spills?
	SECTION 10 - PROBLEMS		
Were any problems encountered during the facility procedures)?	ne reporting period (e.g., specific oc	ccurrences whi	ch have led to changes in
☐ Yes ☑ No If yes, attach additional s	sheets identifying each problem and	d the methods	for resolution of the problem
	SECTION 11 - CHANGES		
Were there any changes from approved r	eports, plans, specifications, and p	permit condition	ns?
☐ Yes ☑ No If yes, attach additional	sheets identifying changes with a j	ustification 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?	2			
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?		2		
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.		V		
9c. Unauthorized material received at facility.	111111111111111111111111111111111111111	~		,,,
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?		V		
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?		~		
15. Is access to your facility controlled by: fences, gates, sign and/or natural barriers (not vehicles)?	and the same of th	V		
15a. Are the access controls working (i.e. controlling access)?		~	and the second	
16. Are fluids drained from end-of-life vehicles on a pad constructed of concrete or equivalent material?		V		
17. Are you doing the following with your concrete (or equivalent surface) pad that is draining, crushing, etc.?	used fo	r vehicle	e disma	intling, fluid
17a. Cleaning daily.		V	tall or	
17b. Cleaning spills as they occur.		V		
17c. Collecting and properly disposing of absorbent materials.		V		

				Date of Return to
Waste Management Compliance Checklist	NA	Yes	No	Compliance
18. Have the following wastes been drained, removed, deployed, collected and/or sto practices, prior to vehicle crushing or shredding?	ored fallow	ing be	st mana	gement
18a. Fluids (including engine oil, transmission fluid, transaxle fluid, front and rear axle fluid, brake fluid, power steering fluid, coolant, and fuel).		2		
18b. Lead acid batteries.		~		
18c. Mercury switches or other mercury containing devices, if any.		~		
18d. Refrigerants, if any.				
18e. Air bags.		1		
18f. PCB capacitors, if any.		1		
19. Are fluids stored separately & in containers that are compatible with their contents?		V		-
20. Are fluids stored in closed containers?		1		
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?		V		
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?		1		
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?		V		
27. Are <u>leaking</u> lead-acid batteries, if any are encountered, stored in leak-proof containers separated from intact batteries?		V		
27a. Are provisions in place to absorb any acid leakage?		1		
28. Are mercury switches and other mercury containing devices stored in appropriate, labeled containers and then sent for recycling?		V		
29. Are PCB capacitors, if any are encountered, removed and stored in appropriate, labeled containers for recycling or disposal?		V		
30. Is used oil stored in accordance with local building codes, local fire codes, and the NYS Uniform Fire Prevention & Building Code?		V		
31. If sent off-site, is used oil transported via a permitted hauler?		V		<u>.</u>
32. If you do not burn used oil onsite check NA for 32a., 32b., 32c. If you do, then a	nswer 32	a., 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?		V		
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?		V		

				alastina di Pira		
						Date of Return to
	Waste Manageme	nt Compliance Checklist	NA	Yes	No	Compliance
33.	Is waste oil kept from being mixed solvents, gasoline, or degreasers'	with brake cleaner, carb cleaner, antifreeze,		V	***************************************	
34.	Are sludges from sumps and oil/walabeled containers?	ter separators stored in covered, closed and		V		
35.	Are sludges properly recycled or di	sposed?		~		
36.	Are used oil filters properly drained	, crushed or dismantled?		~		
	Are drained oil filters properly recyc			V		
38.	If your facility does not require an S for Stormwater Discharge, check an SPDES MSGP answer 38a, 38	PDES Multi-Sector General Permit (MSGP) NA for 38a, 38b, 38c. If your facility requires b, 38c:				
	38a. If required by the SPDES MS Plan been prepared for this fa	SGP, has a Stormwater Pollution Prevention acility?	~			
	38b. Is the information provided in Termination submission for t date?	the facility's original Notice of Intent or ne SPDES MSGP still accurate and up to	V			
	38c. Has the facility's Annual Cer submitted within the previou	tification Report for the SPDES MSGP been s year?	V		; ;	L
no the	n-vehicle wastes write NA. If these n	ning solvents, degreasers, battery acids or naterials are handled at your facility, what is nat your facility generates in any calendar		na — n —		pounds gallons
	Do you have any other Environment (Attach additional sheets as necessa	al Conservation Law or regulatory violations? ary.)				
	COMMENTS? (Attach additional sh	eets if necessary)				
				<u> </u>		40

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.

03(2) of the #hvironmental Conservation Lav	v and section 210.45 of the Penal La 2/13 /2023
Signature	Date
Robert VanAernam	Owner
Name (Print or Type)	Title (Print or Type)
Rev11@frontiernet.net	
Email	(Print or Type)
182 Co Hwy 107	Johnstown
Address	City
ny 12095	518 762 4941
State and Zip	Phone Number
ACHMENTS: YES NO	