NEW YORK Department of	E DISMANTLING FACILITY, MOTO	DR VEHICLE REPAIR SHOP			
	AND MOBILE VEHICLE CRUSHER	R ANNUAL REPORT			
Submit the Annual Report no later than March 1, 2023					
MAR 01 2023 This annual re	port is for the year of operation from <u>Jan</u>	uary 01, 2022 to December 31, 2022			
DIV. OF MATERIALS MANAGEMENT SE	CTION 1 - FACILITY INFORMATIC	N			
	FACILITY INFORMATION				
FACILITY NAME:					
CSIZM	ar Junkvard				
FACILITY LOCATION ADDRESS:	FACILITY CITY:	STATE: ZIP CODE:			
6192 Greig Rd	Glenfie.ld	N.Y. 13343			
FACILITY TOWN:	FACILITY COUNTY:	FACILITY PHONE NUMBER:			
Greig	Lewis	315-376-2105			
	t of NYS Planning Units can be found at the end of				
		REGION #:			
FACILITY TYPE: Vehicle Dismant	er Motor Vehicie Repair Shop	NYS DEC ACTIVITY CODE			
DMV I.D. # Lawis County lic	-150 Mobile Vehicle Crusher	(Hobby)			
FACILITY CONTACT:		CONTACT FAX NUMBER:			
Joseph Csizmar	Private NUMBER: 315 - 346 - 166	3 NA			
CONTACT EMAIL ADDRESS:					
	OWNER INFORMATION				
OWNER NAME:	OWNER PHONE NUMBER:	OWNER FAX NUMBER:			
OWNER ADDRESS:	<u>3/5-346-/663</u> OWNER CITY:				
6948 Convent st	Crochan	N.Y. 133.07			
OWNER CONTACT:	OWNER CONTACT EMAIL ADDR	ESS:			
315-486-8796	NI	7			
	OPERATOR INFORMATION				
	owner	☐public Nprivate			
	PREFERENCES				
Preferred address to receive correspon	dence: 🚺 Facility location address	Owner address			
Proferred email address: Other (provide):	ntact Owner Contact				
Preferred individual to receive correspo	ndence: 🔲 Facility Contact 🛛 🔍 Own	er Contact			
	amplata thia faur				
· · · ·	omplete this form.				
DNO; Cor	nplete and submit Sections 1 and 13				

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:	
Provide the number of ELVs stored at the facility as of December 31:	50
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):	<u> </u>
 Provide the names of scrap metal processors to which you sold or sent do 	ecommissioned ELVs:
1)None	
2)	
3)	
	ES (ELVs) PROCESSE
ECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLI	ES (ELVs) PROCESSEI
3) SECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLI • Provide the number of ELVs crushed from January 1 to December 3: • Provide the names of each facility where you crushed decommissioned E	
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SECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLI Provide the number of ELVs crushed from January 1 to December 3:	LVs:

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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. $\sqrt{15}$ 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 (oll 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)	0	0	0	0	
Used Oil** (gallons)	0	25gal	0	0	
Diesel Fuel (gallons)	40 gal			0	
Gasoline (gallons)	30gal	25g1	O	0	
Engine Coolant/ Antifreeze (gallons)	40gal 30gal 1 0 gal	8 gal	0	0	
Window Washing Fluid (gallons)	0	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.

	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	Zton	4000	0	N.Y.	□Yes	
Aluminum Scrap Metal	14	1/2	\bigcirc	Mr. V.	□Yes	⊠ №
Lead Weights	None	2 panto	0	NY	□Yes	
Non – Ferrous Scrap Metal	0	5 ton	0	N.Y.	PYes	™ No
Other (specify):					TYes	□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).

	\sim
H&TS	\square
(Number)

ABS	$\mathcal{O}_{}$
(Number)	

Indicate permitted facility or permitted transporter accepting mercury containing devices:

	None		
		R BAGS COLLECTED	
Provide the number of air bags recove Number of Air Bags Removed:	<u>. </u>	Number of Air Bags Deployed:	_0
Indicate permitted facility or permitted	transporter accepti	ng air bags:	

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: Rubicon Any materials disposed must undergo a hazardous waste determination and proper handling, storage and disposal, if hazardous. **SECTION 8 – WASTE TIRES COLLECTED** 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: County Recycli SECTION 9 - SELF INSPECTIONS Several Number of self-inspections conducted for the year: Are self-inspection records up-to-date with inspector name, what was inspected, time and date of inspection? No Inspections, Retroked Rooular(Sett At a minimum, are fluid storage areas, vehicles, vehicle storage areas inspected for leaks/spills? Yes 🗖 No SECTION 10 – PROBLEMS

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 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
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? 		\Box		
3. Have you recorded the date of receipt for all end-of-life vehicles received?	\Box			
4. Are the end-of-life vehicle records available on-site?		M		
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?		D		
7. Does your facility have a written Contingency Plan?		B		
8. Are facility personnel trained to implement the Contingency Plan?		D		
9. Does your Contingency Plan include actions to be taken in the event of the following	ng?			
9a. Fire.		Ŋ		
9b. Spill or release of vehicle waste fluids.		Д		
9c. Unauthorized material received at facility.			凶	
10. Are spills of waste fluids, if any occur, reported to the NYSDEC Spills Hotline within two hours of detection?	D	Д		
11. Are all vehicle residues prevented from migrating from or running off your property?		D		
12. Is dust controlled to prevent interference with facility operations or from leaving facility site?		Д		
13. Are vectors (mosquitoes, rats, mice, etc.) controlled to prevent interference with facility operations?		Д		
14. Are waste fluids kept from being discharged onto the ground or into surface waters?		Д		
15. Is access to your facility controlled by: fences, gates, sign and/or natural barriers (not vehicles)?		Д		
15a. Are the access controls working (i.e. controlling access)?		D		
16. Are fluids drained from end-of-life vehicles on a pad constructed of concrete or equivalent material?		Д		
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.		M		
17b. Cleaning spills as they occur.				
17c. Collecting and properly disposing of absorbent materials.		D		
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Reprinted (12/22)

Date of Return to

Waste Management Compliance Checklist	NA	Yes	No	Compliance
18. Have the following wastes been drained, removed, deployed, collected and/or stor practices, prior to vehicle crushing or shredding?	ed follow	ving bes	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).		D.		
18b. Lead acid batteries.				
18c. Mercury switches or other mercury containing devices, if any.				
18d. Refrigerants, if any.		\square		
18e. Air bags.				
18f. PCB capacitors, if any.		$\mathbf{\Sigma}$		
19. Are fluids stored separately & in containers that are compatible with their contents?		\square		s.
20. Are fluids stored in closed containers?		\square		
21. Are containers which contain waste fluids in good condition and not visibly leaking?		\square		
22. Are containers clearly and legibly labeled to describe their contents?		\square		
23. Are containers stored on a bermed pad constructed of concrete or equivalent material?		\square		
24. Are lead-acid batteries stored upright and off the ground?				
25. Are lead-acid batteries covered to protect them from precipitation?		\square		
26. Are all lead-acid batteries sent for recycling within one-year of receipt?		ď		
27. Are <u>leaking</u> lead-acid batterles, if any are encountered, stored in leak-proof containers separated from intact batterles?		\Box		
27a. Are provisions in place to absorb any acid leakage?		ľЫ		
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?		D		
30. Is used oil stored in accordance with local building codes, local fire codes, and the NYS Uniform Fire Prevention & Building Code?		\Box		
31. If sent off-site, is used oil transported via a permitted hauler?	N			
32. If you do not burn used oil onsite check NA for 32a., 32b., 32c. If you do, then ans	wer 32a	., 32b., 3	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?			\Box	
32b. Do on-site space heaters burn only used oil that is generated on-site or received from household do-it-yourself generators?	Ø		D	
32c. Are combustion gases from used oil space heaters vented to the outside ambient air?	\square		\square	

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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?		Ŋ.		
34. Are sludges from sumps and oil/water separators stored in covered, closed and labeled containers?	Ā			
35. Are sludges properly recycled or disposed?				
36. Are used oil filters properly drained, crushed or dismantled?		Ы		
37. Are drained oil filters properly recycled or disposed?		\Box		
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?	Ø,			
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?	Ď,			
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?			NJ.	/ pounds gallons

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

No

COMMENTS? (Attach additional sheets if necessary)

______ The process of Cleaning and Elliminating business (Hobby) to Retire.

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

t 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 Erivironmental Conservation Law and section 210.45 of the Penal Law.

112/23

<u>Juner</u> Title (Print or Type

(Print or Type)

Address

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ATTACHMENTS: YES [NO