



Department of Environmental Conservation

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 December 31, 2022

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SECTION 1 - FACILITY INFORMATION

DWM OF MATERIALS MANAGEMENT		FACILITY INFORMATION	
FACILITY NAME: HORNER'S AUTOMOTIVE			
FACILITY LOCATION ADDRESS: 1562 LAMSON ROAD		FACILITY CITY: PHOENIX	
STATE: NY		ZIP CODE: 13135	
FACILITY TOWN: LYSANDER		FACILITY COUNTY: ONONDAGA	
FACILITY PHONE NUMBER: 315-678-1415		FACILITY NYS PLANNING UNIT: (A list of NYS Planning Units can be found at the end of this report).	
NYSDEC REGION #: 7		FACILITY TYPE: <input checked="" type="checkbox"/> Vehicle Dismantler <input checked="" type="checkbox"/> Motor Vehicle Repair Shop <input type="checkbox"/> Mobile Vehicle Crusher	
DMV I.D. # 4134-0631		NYS DEC ACTIVITY CODE:	
FACILITY CONTACT: JAMES HORNER		<input type="checkbox"/> public <input type="checkbox"/> private	
CONTACT PHONE NUMBER: 3156781415		CONTACT FAX NUMBER: 3156781439	
CONTACT EMAIL ADDRESS: HORNERJAMES45@GMAIL.COM			
OWNER INFORMATION			
OWNER NAME: JAMES HORNER		OWNER PHONE NUMBER: 3156781415	
OWNER ADDRESS: 1564 LAMSON ROAD		OWNER FAX NUMBER: 3156781439	
OWNER CITY: PHOENIX		STATE: NY	
OWNER CONTACT:		ZIP CODE: 13135	
OWNER CONTACT EMAIL ADDRESS: HORNERJAMES45@GMAIL.COM			
OPERATOR INFORMATION			
OPERATOR NAME: <input checked="" type="checkbox"/> same as owner		<input type="checkbox"/> public <input type="checkbox"/> private	
PREFERENCES			
Preferred address to receive correspondence: <input checked="" type="checkbox"/> Facility location address <input type="checkbox"/> Owner address <input type="checkbox"/> Other (provide):			
Preferred email address: <input type="checkbox"/> Facility Contact <input checked="" type="checkbox"/> Owner Contact <input type="checkbox"/> Other (provide):			
Preferred individual to receive correspondence: <input type="checkbox"/> Facility Contact <input checked="" type="checkbox"/> Owner Contact <input type="checkbox"/> Other (provide):			

Did you operate in 2022? Yes; Complete this form.
 No; Complete and submit Sections 1 and 13

SECTION 2A VDF/REPAIR SHOPS- END-OF-LIFE VEHICLES (ELVs) PROCESSED

- Provide the number of ELVs received from January 1 to December 31: 0
- Provide the number of ELVs crushed and/or removed from the facility from January 1 to December 31: 35 EST
- Provide the number of ELVs stored at the facility as of December 31: EST 711
- Provide the highest number of ELVs stored at the facility at any one time from January 1 to December 31: EST SAME
- Provide the approximate area used for the storage of vehicles (acres): 10 acres
- Provide the names of scrap metal processors to which you sold or sent decommissioned ELVs:

- 1) U-PULL-M AUTO Parts Recycling Center AUBURN N.Y.
- 2) _____
- 3) _____

SECTION 2B MOBILE CRUSHERS - END-OF-LIFE VEHICLES (ELVs) PROCESSED

- Provide the number of ELVs crushed from January 1 to December 31: EST 43
- Provide the names of each facility where you crushed decommissioned ELVs: MOBILE

- 1) I HARBOR My ^{Car} ~~own~~ ~~Crusher~~ ON SITE
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____

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. √'s or X's) are not acceptable. Report only fluids generated from dismantling operations (not general car repair, etc.).

Waste Fluid Recovered	Fluid Volume				Destination Name & Address (Indicate permitted facility or permitted Part 364 transporter accepting waste fluids.)
	Used on-site (oil heater, etc.)	Stored on-site at year-end	Sold/ Recycled off-site	Disposed off-site*	
Refrigerant (pounds)	All AC Used	0	ALL NONE		
Used Oil** (gallons)	Waste oil Heater on SITE	9 TANKS 100 gal Used on SITE	11		
Diesel Fuel (gallons)	11	FOR MY Power loader 275 gal	4		
Gasoline (gallons)	11	100 gal TANK Used on SITE	11		
Engine Coolant/ Antifreeze (gallons)	11	1 in Shop Porsche 50 gal Power	11		
Window Washing Fluid (gallons)	11	New 2 Bottle Gal	11		
Other (specify)	11		11		

* Any fluids disposed must undergo a hazardous waste determination and proper handling, storage, and disposal, if hazardous.

I HAVE A Waste Oil Burner FOR MY SHOP

** Includes Engine Oil, Transmission Fluid, Axle Fluids, Hydraulic Fluid, Power Steering Fluid, Brake Fluid, etc.

NONE

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 (tons)	Stored On Site (tons)	Sent Off Site (tons)	Destination	
				NYS Planning Unit (or state if other than New York)	To Scrap Metal Processor <i>Sell</i>
Ferrous Scrap Metal			↑ 105000 <i>Crush ON SITE</i>		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Aluminum Scrap Metal			None 100 lb <i>AAA</i>	<i>SHIPPED when I Crush</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Lead Weights			None 700 lb <i>AAA</i>	<i>ON SITE from wheel weights</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Non – Ferrous Scrap Metal			? None <i>AAA</i>	<i>Crush up cars</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Other (specify):					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION 5 – MERCURY SWITCHES COLLECTED

Provide the number of mercury-containing devices recovered. Including but not limited to hood & trunk lighting switches (H&TS) and antilock brake assemblies (ABS).

H&TS 0
(Number)

ABS 0
(Number)

Indicate permitted facility or permitted transporter accepting mercury containing devices:

ELUS
P.O. BOX 3282
FARMINGTON, HILL Michigan 48333

SECTION 6 – AIR BAGS COLLECTED

Provide the number of air bags recovered.

Number of Air Bags Removed: 0

Number of Air Bags Deployed:

Indicate permitted facility or permitted transporter accepting air bags:

5711 IN Vehicles

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: 0

Indicate permitted facility or permitted transporter accepting lead-acid batteries:

INTER STATE Battery FROM East Syracuse NY

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: ON vehicle still 7th as of December 31

Number of used tires available for sale on-site: off vehicle EST 75 as of December 31

Number of used tires sold: EST ^{ALL} EST 100 during operating year

Number of waste tires shipped off-site for recycling, disposal, other: -0- during operating year

Indicate name of facility(ies) accepting waste tires:

ARMOUR ENVIRONMENTAL INC WATER LOU NY

SECTION 9 – SELF INSPECTIONS

Number of self-inspections conducted for the year: 8.5.30 M-F & SAT
Each working DAY IN Year

Are self-inspection records up-to-date with inspector name, what was inspected, time and date of inspection?
 Yes No OWNER

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:

Waste Management Compliance Checklist	NA	Yes	No	Date of Return to 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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Is a system in place to control vegetation and prevent it from encroaching onto fire access lanes or driveways? <i>0</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	None
3. Have you recorded the date of receipt for all end-of-life vehicles received?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are the end-of-life vehicle records available on-site?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Have all end-of-life vehicles been inspected, upon arrival, for leaking fluids and unauthorized wastes?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<i>0 vehicles Present THIS yr</i>
6. Have all observed leaks been remedied or contained?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NONE
7. Does your facility have a written Contingency Plan?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8. Are facility personnel trained to implement the Contingency Plan?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9. Does your Contingency Plan include actions to be taken in the event of the following?				
9a. Fire.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9b. Spill or release of vehicle waste fluids. <i>Q + E done following protocol</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	in my PHCP
9c. Unauthorized material received at facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NONE
10. Are spills of waste fluids, if any occur, reported to the NYSDEC Spills Hotline within two hours of detection? <i>0</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	//
11. Are all vehicle residues prevented from migrating from or running off your property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	//
12. Is dust controlled to prevent interference with facility operations or from leaving facility site?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	//
13. Are vectors (mosquitoes, rats, mice, etc.) controlled to prevent interference with facility operations?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	//
14. Are waste fluids kept from being discharged onto the ground or into surface waters?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	//
15. Is access to your facility controlled by: fences, gates, sign and/or natural barriers (not vehicles)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
15a. Are the access controls working (i.e. controlling access)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
16. Are fluids drained from end-of-life vehicles on a pad constructed of concrete or equivalent material?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	in my SHCP
17. Are you doing the following with your concrete (or equivalent surface) pad that is used for vehicle dismantling, fluid draining, crushing, etc.?				
17a. Cleaning daily.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	ALL in my
17b. Cleaning spills as they occur.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	SHCP?
17c. Collecting and properly disposing of absorbent materials.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	//

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Waste Management Compliance Checklist	Date of Return to			Compliance
	NA	Yes	No	
33. Is waste oil kept from being mixed with brake cleaner, carb cleaner, antifreeze, solvents, gasoline, or degreasers?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
34. Are sludges from sumps and oil/water separators stored in covered, closed and labeled containers?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NO HLE
35. Are sludges properly recycled or disposed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
36. Are used oil filters properly drained, crushed or dismantled?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
37. Are drained oil filters properly recycled or disposed?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
38c. Has the facility's Annual Certification Report for the SPDES MSGP been submitted within the previous year?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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?				<u>NA</u> pounds <u>NA</u> gallons

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

NA None

COMMENTS? (Attach additional sheets if necessary)

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 and rear axle fluid, brake fluid, power steering fluid, coolant, and fuel).	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
18b. Lead acid batteries.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
18c. Mercury switches or other mercury containing devices, if any.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18d. Refrigerants, if any.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18e. Air bags.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18f. PCB capacitors, if any.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. Are fluids stored separately & in containers that are compatible with their contents?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
20. Are fluids stored in closed containers?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
21. Are containers which contain waste fluids in good condition and not visibly leaking?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
22. Are containers clearly and legibly labeled to describe their contents?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
23. Are containers stored on a bermed pad constructed of concrete or equivalent material?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
24. Are lead-acid batteries stored upright and off the ground?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
25. Are lead-acid batteries covered to protect them from precipitation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
26. Are all lead-acid batteries sent for recycling within one-year of receipt?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
27. Are <u>leaking</u> lead-acid batteries, if any are encountered, stored in leak-proof containers separated from intact batteries?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NONE
27a. Are provisions in place to absorb any acid leakage?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NONE
28. Are mercury switches and other mercury containing devices stored in appropriate, labeled containers and then sent for recycling?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29. Are PCB capacitors, if any are encountered, removed and stored in appropriate, labeled containers for recycling or disposal?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
30. Is used oil stored in accordance with local building codes, local fire codes, and the NYS Uniform Fire Prevention & Building Code?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
31. If sent off-site, is used oil transported via a permitted hauler?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. <u>If you do not burn</u> 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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
32b. Do on-site space heaters burn only used oil that is generated on-site or received from household do-it-yourself generators?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
32c. Are combustion gases from used oil space heaters vented to the outside ambient air?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	