



# 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

## SECTION 1 – FACILITY INFORMATION

FACILITY INFORMATION			
FACILITY NAME: Mini-Van's & SUV's Of WNY			
FACILITY LOCATION ADDRESS: 2070 William St	FACILITY CITY: Buffalo	STATE: NY	ZIP CODE: 14206
FACILITY TOWN: Sloan	FACILITY COUNTY: Erie	FACILITY PHONE NUMBER: 716-896-1775	
FACILITY NYS PLANNING UNIT: (A list of NYS Planning Units can be found at the end of this report). Northeast Southtowns Solid Waste Management Board (NEST)			NYSDEC REGION #: 9
FACILITY TYPE: <input checked="" type="checkbox"/> Vehicle Dismantler DMV I.D. # 7091750	<input type="checkbox"/> Motor Vehicle Repair Shop <input type="checkbox"/> Mobile Vehicle Crusher	NYS DEC ACTIVITY CODE:	
FACILITY CONTACT:	<input type="checkbox"/> public <input type="checkbox"/> private	CONTACT PHONE NUMBER:	CONTACT FAX NUMBER:
CONTACT EMAIL ADDRESS: martin@marksautoparts.com			
OWNER INFORMATION			
OWNER NAME: Martin Marks	OWNER PHONE NUMBER: 716-896-1775	OWNER FAX NUMBER: NONE	
OWNER ADDRESS: PO Box 147	OWNER CITY: Buffalo	STATE: NY	ZIP CODE: 14240
OWNER CONTACT: Martin Marks	OWNER CONTACT EMAIL ADDRESS: martin@marksautoparts.com		
OPERATOR INFORMATION			
OPERATOR NAME:	<input checked="" type="checkbox"/> same as owner	<input type="checkbox"/> public <input checked="" type="checkbox"/> private	
PREFERENCES			
Preferred address to receive correspondence: <input type="checkbox"/> Facility location address <input checked="" 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 type="checkbox"/> Owner Contact <input checked="" type="checkbox"/> Other (provide): dan@marksautoparts.com			
Did you operate in 2022? <input type="checkbox"/> Yes; Complete this form. <input checked="" type="checkbox"/> No; Complete and submit Sections 1 and 13			

**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

2/27/2023  
Date

Martin Marks  
Name (Print or Type)

President  
Title (Print or Type)

martin@marksautoparts.com  
Email (Print or Type)

2070 William St  
Address

Buffalo  
City

NY 14206  
State and Zip

(716) 896 1775  
Phone Number

ATTACHMENTS:  YES  NO