

New York State Department of Environmental Conservation
Division of Materials Management
Albany, New York 12233-7253

2018
REGISTERED FACILITY ANNUAL REPORT
ANAEROBIC DIGESTER
6 NYCRR Part 361-3.3

NOTE: New form for 2018 reporting year!

This annual report is for the year of operation from January 01, 2018 to December 31, 2018

This form is for anaerobic digester facilities that are registered under section 361-3.3 (formerly 360-5) of the Part 360 series. Forms for all solid waste management facilities can be found at <http://www.dec.ny.gov/chemical/52706.html>. If you have any questions on this form, please e-mail organicrecycling@dec.ny.gov.

Submit the Annual Report no later than March 1, 2019.

Failure to provide the required information requested is a violation of Environmental Conservation Law. Timely submission of a properly completed form to the Department's Regional Office that has jurisdiction over your facility and to the Department's Central Office is required to meet the Annual Report requirements of 6 NYCRR Part 360.

Attach additional sheets if space on the pages is insufficient or supplementary information is required or appropriate.

FACILITY NAME: _____

SW FACILITY ACTIVITY NUMBER (Ex. 12P50087 or 29Z04): _____

COUNTY WHERE FACILITY IS LOCATED: _____

DEC USE ONLY

Region: SWIMS:

MATRIX:

Date Reviewed:

Reviewed By:

SECTION 2 – FEEDSTOCK INPUT

Input	Quantity	Unit*	% Solids	Source(s)
Animal Manure		WT DT GAL CY		
Food processing wastes - (whey, etc.) Specify: _____		WT DT GAL CY		
Source separated organics (food scraps, etc.)		WT DT GAL CY		
FOGs (fats, oils, and grease)		WT DT GAL CY		
Other: _____		WT DT GAL CY		

* Wet Tons = Tons

Dry Tons = wet tons * % solids

SECTION 3 – DIGESTER OPERATION

Average detention time in digester: _____ days

Average temperature in digester: _____ °F

Age of oldest digestate on site: _____ months

SECTION 4 – DIGESTATE USE

Are solids separated from liquid? YES NO

If yes:

What is the total solids content: _____ % solids

Quantity of solids produced: _____ wet tons

How are solids used:

Animal Bedding

Topsoil

Composting

Did composting occur on a farm or CAFO with CNMP?

YES

NO – The composting of digestate requires a registration under 361-3.3(b)(1)(iv). Please list the associated activity number.

Composting Activity Number: _____

Land Application

Did land application occur on a CAFO with a CNMP?

YES

NO – Land application of digestate that does not occur on a CAFO with an approved CNMP, requires a registration under subpart 361-3.3(b)(1)(i). Please list the associated land application activity number(s).

Land Application Activity Number(s): _____

If no:

How much was produced: _____ gallons

Did land application occur on a CAFO with a CNMP?

YES

NO – Land application of digestate that does not occur on a CAFO with an approved CNMP, requires a registration under subpart 361-3.3(b)(1)(i). Please list the associated land application activity number(s).

Land Application Activity Number(s): _____

SECTION 5 – UNAUTHORIZED WASTE

Has unauthorized solid waste been received at the Processing Facility during the reporting period? Yes No

If yes, give information below for each incident (attach additional sheets if necessary):

Date Received	Type Received	Date Disposed	Disposal Method & Location

SECTION 6 – PROBLEMS/COMPLAINTS

Describe any operational problems or complaints arising from the digester operation and include any methods used to remedy the situations. This should include odor complaints, marketing difficulties, major equipment failure, etc.

SECTION 7 – QUESTIONS

Please identify any questions or concerns that you would like the Department to answer or consider:

SECTION 8 - CERTIFICATION

The Owner or Operator must sign, date and submit one completed form with an original signature to the appropriate Regional Office (See attachment for Regional Office addresses and Contacts.)

The Owner or Operator must also submit one copy by email, fax or mail to:

**NYS Department of Environmental Conservation
Bureau of Waste Reduction and Recycling – Annual Report
625 Broadway – 9th Floor
Albany, New York 12233-7253**

Phone: 518-402-8706

Fax 518-402-9024

Email address: organicrecycling@dec.ny.gov

Registration under Part 360 Regulations Pre November 2017

I hereby affirm under penalty of perjury that information provided on this form and attached statements and exhibits was prepared by me or under my supervision and direction and is true to the best of my knowledge and belief, and that I have the authority to sign this report form pursuant to 6 NYCRR Part 360. I am aware that any false statement made herein is punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

Registration under Part 360 Regulations Post November 2017

I certify, under penalty of law, that the information that will be used to determine compliance with the requirements in Subpart 361-3 of 6 NYCRR Part 361 has been prepared under my direction and supervision in accordance with the system designed to ensure that qualified personnel properly gather and evaluate this information. I am aware that false statement made herein are punishable pursuant to section 210.45 of the penal law.

_____ Signature	_____ Date
_____ Name (Print)	_____ Title (Print)
_____ Email (Print)	
_____ Address	_____ City
_____ State and Zip	(_____)_____-_____ Phone Number

ATTACHMENTS: NO YES (IF YES, LIST ATTACHMENTS)

- _____
- _____
- _____

MATERIAL MANAGEMENT PROGRAM CONTACTS

CENTRAL OFFICE

Bureau of Waste Reduction and Recycling
625 Broadway
Albany, NY 12233-7253
Phone: (518) 402-8706

For Submission of Organics Recycling Annual Reports only:

Fax: (518) 402-9024

Email: organicrecycling@dec.ny.gov

REGIONAL OFFICE ADDRESS & LEAD CONTACT PERSON

REGION 1 (Nassau, Suffolk)

Syed Rahman/David Gibb
SUNY @ Stony Brook 50
Circle Road
Stony Brook, NY 11790
Phone: (631) 444-0375
SWMFAnnualReportR1@dec.ny.gov

REGION 2 (Bronx, Kings, New York, Queens, Richmond)

Joseph O'Connell
47-40 21st Street
Long Island City, NY 11101-5407
Phone: (718) 482-4896
SWMFAnnualReportR2@dec.ny.gov

REGION 3 (Dutchess, Orange, Putnam, Rockland, Sullivan, Ulster, Westchester)

James Lansing
21 South Putt Corners Road
New Paltz, NY 12561
Phone: (845) 256-3123
SWMFAnnualReportR3@dec.ny.gov

REGION 4 (Albany, Columbia, Delaware, Greene, Montgomery, Otsego, Rensselaer, Schenectady, Schoharie)

Victoria Schmitt
1130 North Westcott Road
Schenectady, NY 12306
Phone: (518) 357-2243
SWMFAnnualReportR4@dec.ny.gov

REGION 5 (Clinton, Essex, Franklin, Fulton, Hamilton, Saratoga, Warren, Washington)

Kevin Wood
232 Golf Course Road
Warrensburg, NY 12885
Phone: (518) 623-1230
SWMFAnnualReportR5@dec.ny.gov

REGION 6 (Herkimer, Jefferson, Lewis, Oneida, St. Lawrence)

Gary McCullouch
317 Washington Street
Watertown, NY 13601
Phone: (315) 785-2513
SWMFAnnualReportR6@dec.ny.gov

REGION 7 (Broome, Cayuga, Chenango, Cortland, Madison, Onondaga, Oswego, Tioga, Tompkins)

Thomas Annal
615 Erie Boulevard West
Syracuse, NY 13204
Phone: (315) 426-7419
SWMFAnnualReportR7@dec.ny.gov

REGION 8 (Chemung, Genesee, Livingston, Monroe, Ontario, Orleans, Schuyler, Seneca, Steuben, Wayne, Yates)

Greg MacLean
6274 East Avon-Lima Road
Avon, NY 14414
Phone: (585) 226-5408
SWMFAnnualReportR8@dec.ny.gov

REGION 9 (Allegany, Cattaraugus, Chautauqua, Erie, Niagara, Wyoming)

Peter Grasso
270 Michigan Avenue
Buffalo, NY 14203
Phone: (716) 851-7220
SWMFAnnualReportR9@dec.ny.gov