

USED COOKING OIL AND/OR YELLOW GREASE PROCESSING FACILITY ANNUAL REPORT

(If you need assistance filling out this form please email swmfannualreport@dec.ny.gov or call 518-402-8678.)

Submit the Annual Report no later than March 1, 2021.

This annual report is for the year of operation from January 01, 2020 to December 31, 2020

SECTION 1 – FACILITY INFORMATION

FACILITY INFORMATION			
FACILITY NAME:			
FACILITY LOCATION ADDRESS:	FACILITY CITY:	STATE:	ZIP CODE:
FACILITY TOWN:	FACILITY COUNTY:	FACILITY PHONE NUMBER:	
FACILITY NYS PLANNING UNIT: (A list of NYS Planning Units can be found at the end of this report).			NYSDEC REGION #:
360 PERMIT #:	DATE ISSUED:	DATE EXPIRES:	NYS DEC ACTIVITY CODE OR REGISTRATION NUMBER:
FACILITY CONTACT:	<input type="checkbox"/> public <input type="checkbox"/> private	CONTACT PHONE NUMBER:	CONTACT FAX NUMBER:
CONTACT EMAIL ADDRESS:			
OWNER INFORMATION			
OWNER NAME:	OWNER PHONE NUMBER:	OWNER FAX NUMBER:	
OWNER ADDRESS:	OWNER CITY:	STATE:	ZIP CODE:
OWNER CONTACT:	OWNER CONTACT EMAIL ADDRESS:		
OPERATOR INFORMATION			
OPERATOR NAME:	<input type="checkbox"/> same as owner	<input type="checkbox"/> public <input type="checkbox"/> private	
PREFERENCES			
Preferred address to receive correspondence: <input type="checkbox"/> Facility location address <input type="checkbox"/> Owner address <input type="checkbox"/> Other (provide):			
Preferred email address: <input type="checkbox"/> Facility Contact <input 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 type="checkbox"/> Other (provide):			

Did you operate in 2020 Yes; Complete this form.

No; Complete and submit Sections 1 and 11. If you no longer plan to operate and wish to relinquish your permit/registration associated with this solid waste management activity, also complete the "Inactive Solid Waste Management Facility or Activity Notification Form" located at: <http://www.dec.ny.gov/chemical/52706.html> .

SECTION 3 - SERVICE AREA OF WASTE RECEIVED

Please identify where the waste is coming from. The total tons received reported below should equal the total tons received in Section 2 (Waste Received). **DO NOT REPORT IN GALLONS!**

- If the waste **WAS** received from another solid waste management facility, please write in the name *and* address of the facility along with the appropriate state, county and planning unit/municipality.
- If the waste **WAS NOT** received from another solid waste management facility, please write in "**Direct Haul**" along with the appropriate state, county and planning unit/municipality where the waste was generated.

Specify transport method, list type of material(s) and percentages of total waste transported by each:

_____ % Road: Waste Type(s): _____ _____ % Rail: Waste Type(s): _____
 _____ % Water: Waste Type(s): _____ _____ % Other (specify: _____): Waste Type(s): _____

SERVICE AREA OF WASTE RECEIVED (where the waste is coming from)					
TYPE OF WASTE	SOLID WASTE MANAGEMENT FACILITY FROM WHICH IT WAS RECEIVED (Name & Address)	SERVICE AREA STATE OR COUNTRY	SERVICE AREA COUNTY OR PROVINCE	SERVICE AREA NYS PLANNING UNIT	TONS RECEIVED
Used Cooking Oil					
Yellow Grease					
TOTAL RECIEVED (tons): _____					

SECTION 4 - DISPOSAL DESTINATION OR TRANSFER FOR PROCESS RESIDUES

Identify the transfer or disposal destination of waste removed by indicating the name of the transfer or disposal facility to which waste was sent from your facility, the type of waste transferred from your facility, the corresponding State/Country, the County/Province, the NYS Planning Unit of the transfer or disposal destination facility, and the amount transferred or disposed. Include only waste sent off-site for disposal or further transfer prior to disposal, not recovered for reuse or recycling. Exclude Materials Recovered amounts reported in Section 5. **Refer to the list of NYS Planning Units that can be found at the end of this report. DO NOT REPORT IN GALLONS!**

Transport (specify percentages):

_____ % Road _____ % Rail
 _____ % Water _____ % Other (specify: _____)

Explain which waste types and service areas below are included in these transport methods _____

DISPOSAL DESTINATION OR TRANSFER FOR PROCESS							
TYPE OF WASTE	SOLID WASTE MANAGEMENT FACILITY TO WHICH IT WAS SENT <i>(Name & Address)</i>	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	DESTINATION NYS PLANNING UNIT <i>(See Attached List of NYS Planning Units)</i>	AMOUNT TO TRANSFER DESTINATION (TONS)	AMOUNT TO DISPOSAL DESTINATION (TONS)	TOTAL YEAR (TONS)
Waste Water							
Food Particles							
Other <i>(specify)</i>							
TOTAL SENT (tons): _____							

SECTION 5 – USED COOKING OIL AND/OR YELLOW GREASE RECOVERED

Identify the name of the destination facility to which the material was sent from your facility, the corresponding State/Country, the County/Province, the NYS Planning Unit, and the amount of material transported. **Refer to the list of NYS Planning Units that can be found at the end of this report.**
DO NOT REPORT IN GALLONS!

Specify transport method and percentages of total material transported by each:

_____% Road ____% Rail ____% Water ____% Other (specify: _____)

Explain which materials and destinations below are included in these transport methods _____

USED COOKING OIL AND/OR YELLOW GREASE RECOVERED					
RECOVERED MATERIAL	DESTINATION FACILITY <i>(Name & Address)</i>	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	DESTINATION NYS PLANNING UNIT <i>(See Attached List of NYS Planning Units)</i>	TONS RECOVERED <i>(out of facility)</i>
Used Cooking Oil for Animal Feed					
Used Cooking Oil for Biofuel Blends					
Yellow Grease for Animal Feed					
Yellow Grease for Biofuel Blends					

USED COOKING OIL AND/OR YELLOW GREASE RECOVERED					
RECOVERED MATERIAL	DESTINATION FACILITY (Name & Address)	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	DESTINATION NYS PLANNING UNIT (See Attached List of NYS Planning Units)	TONS RECOVERED (out of facility)
Used Cooking Oil for Other Uses (specify)					
Yellow Grease for Other Uses (specify)					
TOTAL RECOVERED (tons):					_____

SECTION 6 - UNAUTHORIZED SOLID WASTE

Has unauthorized solid waste been received at the 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 7 - COST ESTIMATES AND FINANCIAL ASSURANCE DOCUMENTS

Submit (attached to this form) any required cost estimates and financial assurance documents for closure reflecting adjustments for inflation and any changes to the Closure Plan, to indicate updated dollars for the year of operation for which the Annual Report is made. List submissions (required by this section) that have been attached to this form or the reasons for not attaching a required piece of information:

SECTION 8 - PROBLEMS

Identify any problems encountered during the reporting period (e.g., specific occurrences which have led to changes in facility procedures) and methods for resolution of the problems. List submissions (required by this section) that have been attached to this form or the reasons for not attaching a required piece of information:

SECTION 9 - CHANGES

Identify any changes from approved reports, plans, specifications, and permit conditions with a justification for each change. List submissions (required by this section) that have been attached to this form or the reasons for not attaching a required piece of information:

SECTION 10 - PERMIT/CONSENT ORDER REPORTING REQUIREMENTS

Are there any additional permit/consent order reporting requirements not covered by the previous sections of this form?
 Yes No

If yes, identify the reporting requirements with their respective responses below, attaching additional sheets as necessary. List submissions (required by this section) that have been attached to this form or the reasons for not attaching a required piece of information:

SECTION 11 - 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	_____ Date
_____ Name (Print or Type)	_____ Title (Print or Type)
_____ Email (Print or Type)	
_____ Address	_____ City
_____ State and Zip	(_____)_____-_____ Phone Number

ATTACHMENTS: ___ YES ___ NO
(Please check appropriate line)

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**Division of Materials Management
New York State Department of Environmental Conservation
Albany, New York 12233-7260**

USED COOKING OIL AND/OR YELLOW GREASE PROCESSING FACILITY

Forms for all solid waste management facilities can be found at <http://www.dec.ny.gov/chemical/52706.html> and a brief description of each type of facility can be found at <http://www.dec.ny.gov/chemical/8495.html>.

Annual Report

Submit the Annual Report no later than March 1, 2021.

Reporting of the information indicated on this Used Cooking Oil and/or Yellow Grease Processing Facility Annual Report form is required pursuant to 6 NYCRR Part 360. 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.

Where the Annual Report requirements have been modified, appropriate Sections (as necessary to reflect the modification) must be completed and submitted with a copy of the Department's written notification which allows the modification.

Entries on the report forms should be either typewritten or neatly printed in black ink. Attach additional sheets if space on the pages is insufficient or supplementary information is required or appropriate.

SECTION 3 - SERVICE AREA OF WASTE RECEIVED

Identify the service area of the waste received. The Total Tons Received reported below should equal the Total Tons Received in Section 2 (Waste Received). DO NOT REPORT IN GALLONS!

Additional Service Area Guidance:

1) *Direct hauled from the generator of the used cooking oil/yellow grease.* In the case where the used cooking oil/yellow grease is hauled to your facility from the generator (i.e. hauled from residences, commercial establishments, etc.), "**Direct Haul**" is the appropriate response in Column 2 under "Service Area." Please report the tonnage by waste type and identify the state, county and planning unit where it was generated; or

2) *Sent to your facility from another solid waste management facility.* Used cooking oil/yellow grease may be sent to your facility from another solid waste management facility. In this case, please report the tonnage by waste type from each sending solid waste management facility, as well as the sending facility's name, address, county, and the planning unit where the sending facility is located.

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New York State Planning Units & Regions

When completing the annual report, please use the Planning Unit listed below that corresponds with the municipality and county. **Note: The Planning Unit is not the DEC Region.**

DEC Region	Planning Unit	County	Municipality
1	Glen Cove	Nassau	Glen Cove (City)
	Hempstead		Hempstead (Town)
	Long Beach		Long Beach (City)
	North Hempstead Solid Waste Management Authority		North Hempstead (Town), <i>except 10 villages (see below)</i>
	Oyster Bay Solid Waste Disposal District		Oyster Bay (Town), <i>except 17 villages (see below)</i>
	Babylon	Suffolk	Babylon (Town)
	Brookhaven		Brookhaven (Town)
	East Hampton		East Hampton (Town)
	Fishers Island Waste Management District		Fishers Island
	Huntington		Huntington (Town)
	Islip Resource Recovery Agency		Islip (Town)
	Riverhead		Riverhead (Town)
	Shelter Island		Shelter Island (Town)
	Smithtown		Smithtown (Town)
	Southampton		Southampton (Town)
Southold	Southold (Town), <i>except Fishers Island</i>		
2	New York City	Bronx	Bronx
		Kings	Kings (Brooklyn)
		New York	New York (Manhattan)
		Queens	Queens
		Richmond	Richmond (Staten Island)
3	Dutchess County	Dutchess	
	Orange County	Orange	
	Putnam County	Putnam	
	Rockland County Solid Waste Management Authority (RCSWMA)	Rockland	
	Sullivan County	Sullivan	
	Ulster County Resource Recovery Agency (UCRRA)	Ulster	
	Westchester County	Westchester	
4	Colonie	Albany	Cohoes (City)
			Colonie (Town)
			Colonie (Village)
			Menands (Village)
			Watervliet (City)
	Capital Region Solid Waste Management Partnership	Albany	Albany (City)
			Altamont (Village)
			Berne (Town)
			Bethlehem (Town)
			Green Island (Town/Village)
			Guilderland (Town)
			Knox (Town)
			New Scotland (Town)
			Rensselaerville (Town)
Voorheesville (Village)			
Westerlo (Town)			

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		Rensselaer	East Greenbush (Town) Rensselaer (City)	
4	Eastern Rensselaer County Solid Waste Management Authority	Rensselaer	Castleton-on-Hudson (Village)	
			Hoosick Falls (Village)	
			Nassau (Village)	
			Pittstown (Town)	
			Schaghticoke (Town/Village)	
			Stephentown (Town)	
			Valley Falls (Village)	
			Berlin (Town)	Inactive Members
			Grafton (Town)	
			Hoosick (Town)	
			Nassau (Town)	
			Petersburg (Town)	
			Poestenkill (Town)	
			Columbia County	Columbia
Delaware County	Delaware			
Greene County	Greene			
Montgomery County	Montgomery			
Otsego County	Otsego			
Schoharie County	Schoharie			
Schenectady County	Schenectady			
5	Clinton County	Clinton		
	Essex County	Essex		
	County of Franklin Solid Waste Management Authority (CFSWMA)	Franklin		
	Fulton County	Fulton		
	Hamilton County	Hamilton		
	Saratoga County	Saratoga		
	Warren County	Warren		
	Washington County	Washington		
6	Development Authority of the North Country (DANC)	Jefferson		
		Lewis		
		St. Lawrence		
	Oneida-Herkimer Solid Waste Authority	Oneida Herkimer		
7	Broome County	Broome		
	Cayuga County	Cayuga		
	Chenango County	Chenango		
	Cortland County	Cortland		
	Madison County	Madison		
	Onondaga County	Onondaga	All municipalities, except Town and Village of Skaneateles (See below)	
	Oswego County	Oswego		
	Tioga County	Tioga		
	Tompkins County	Tompkins		
8	Chemung County	Chemung		
	GLOW Region Solid Waste Management Committee	Genesee		
		Livingston		
	Monroe County	Monroe		
	Ontario County	Ontario		
	Orleans County	Orleans		
	Schuyler County	Schuyler		
Seneca County	Seneca			

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	Steuben County	Steuben		
	Wayne County	Wayne		
	Yates County	Yates		
9	Allegany County	Allegany		
	Cattaraugus County	Cattaraugus		
	Chautauqua County	Chautauqua		
	GLOW Region Solid Waste Management Committee	Wyoming		
	Niagara	Niagara		
	Northeast-Southtowns Solid Waste Management Board (NEST)		Erie	Akron (Village)
				Alden (Town/Village)
				Angola (Village)
				Aurora (Town)
				Blasdell (Village)
				Boston (Town)
				Brant (Town)
				Cheektowaga (Town)
				Clarence (Town)
				Colden (Town)
				Collins (Town)
				Concord (Town)
				Depew (Village)
				East Aurora (Village)
				Eden (Town)
				Elma (Town)
				Evans (Town)
				Farnham (Village)
				Gowanda (Village)
				Hamburg (Town/Village)
				Holland (Town)
				Lackawanna (City)
				Lancaster (Town/Village)
Marilla (Town)				
Newstead (Town)				
North Collins (Town/Village)				
Orchard Park (Town/Village)				
Sardinia (Town)				
Sloan (Village)				
Springville (Village)				
Wales (Town)				
West Seneca (Town)				
Northwest Communities Solid Waste Management Board (NWCB)		Erie	Amherst (Town)	
			Grand Island (Town)	
			Kenmore (Village)	
			Tonawanda (Town/Village)	
			Williamsville (Village)	

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Municipalities Not Currently Affiliated With a Recognized Planning Unit

DEC Region	County	Non-Member Municipality	
1	Nassau	North Hempstead	Great Neck Estates (Village)
			Great Neck Plaza (Village)
			Mineola (Village)
			New Hyde Park (Village)
			Old Westbury (Village) (portion)
			Plandome (Village)
			Plandome Manor (Village)
			Roslyn Harbor (Village) (portion)
			Westbury (Village)
			Williston Park (Village)
		Oyster Bay	Bayville (Village)
			Brookville (Village)
			Centre Island (Village)
			Cove Neck (Village)
			East Hills (Village) (portion)
			Glenwood – Glen Head Garbage District
			Lattington (Village)
			Laurel Hollow (Village)
			Matinecock (Village)
			Mill Neck (Village)
			Muttontown (Village)
			Old Brookville (Village)
			Old Westbury (Village) (portion)
			Oyster Bay Cove (Village)
			Roslyn Harbor (Village) (portion)
			Sea Cliff (Village)
Upper Brookville (Village)			
4	Albany	Coeymans (Town)	
		Ravena (Village)	
	Rensselaer	Brunswick (Town)	
		North Greenbush (Town)	
		Sand Lake (Town)	
		Schodack (Town)	
	Troy (City)		
Columbia	Canaan (Town)		
7	Onondaga	Skaneateles (Town/Village)	
9	Erie	Buffalo (City)	

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New York State Department of Environmental Conservation
Division of Materials Management
Bureau of Solid Waste Management

MATERIAL MANAGEMENT PROGRAM CONTACTS

CENTRAL OFFICE

Bureau of Solid Waste Management
625 Broadway
Albany, NY 12233-7260
Phone: (518) 402-8678

For Submission of Solid Waste Management Facility Annual Reports only:

Fax: (518) 402-9041

Email: swmfannualreport@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)

Lee Reiff
21 South Putt Corners Road
New Paltz, NY 12561
Phone: (845) 256-3134
SWMFannualreportR3@dec.ny.gov

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

Brian Maglienti
1130 North Westcott Road
Schenectady, NY 12306
Phone: (518) 357-2085
SWMFannualreportR4@dec.ny.gov

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

Jessie Sangster
1115 State Route 86, PO Box 296
Ray Brook, NY 12977
Phone: (518) 897-1266
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) 226-5411
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

September 2020