

PERMITTED C&D DEBRIS HANDLING AND RECOVERY FACILITY ANNUAL REPORT

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

Complete and submit this form by March 1, 2022.

This annual report is for the year of operation from January 01, 2021 to December 31, 2021

SECTION 1 – GENERAL INFORMATION

FACILITY INFORMATION			
FACILITY NAME: Winters Yaphank Transfer Station			
FACILITY LOCATION ADDRESS: 82A Old Dock Road	FACILITY CITY: Yaphank	STATE: NY	ZIP CODE: 11980
FACILITY TOWN: Brookhaven	FACILITY COUNTY: Suffolk	FACILITY PHONE NUMBER: 631-205-1417	
FACILITY NYS PLANNING UNIT: <i>(A list of NYS Planning Units can be found at the end of this report).</i> Brookhaven (Town)			NYSDEC REGION #: 1
360 PERMIT #: <i>(Refer to DEC Permit)</i> 1-1722-00765/00004	DATE ISSUED: 1-12-22	DATE EXPIRES: 1-11-27	NYS DEC ACTIVITY CODE OR REGISTRATION NUMBER: <i>(Refer to DEC Registration)</i> 52CP0371
FACILITY CONTACT: John Soldinger	<input type="checkbox"/> public <input checked="" type="checkbox"/> private	CONTACT PHONE NUMBER: 631-404-8013	CONTACT FAX NUMBER: 631-368-5533
CONTACT EMAIL ADDRESS: jsoldinger@wintersbbros.com			
OWNER INFORMATION			
OWNER NAME: Winters Bros	OWNER PHONE NUMBER: 631-491-4923	OWNER FAX NUMBER: 631-334-3271	
OWNER ADDRESS: 120 Nancy Street	OWNER CITY: West Babylon	STATE: NY	ZIP CODE: 11704
OWNER CONTACT: Peter M. Casserly	OWNER CONTACT EMAIL ADDRESS: pmcass25@gmail.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 checked="" type="checkbox"/> Owner Contact <input type="checkbox"/> Other (provide):			

Did you operate in 2021? 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>.

52M13/0371

SECTION 2 - SOLID WASTE RECEIVED

Please provide the tonnages of waste received. This includes all wastes received at your facility regardless of their destination after processing.
DO NOT REPORT IN CUBIC YARDS!

Specify the methods used to measure the quantities received and the percentages measured by each method:

100 % Scale Weight

 % Estimated

 % Truck Count

 % Other (Specify: _____)

Type of Waste	January (tons)	February (tons)	March (tons)	April (tons)	May (tons)	June (tons)	July (tons)
Asphalt Millings							
Asphalt Pavement		SEE	ATTACHED	SHEET			
Asphalt Roofing Shingles							
Brick							
Concrete							
Construction & Demolition (C&D) Debris							
Gravel							
Gypsum Wallboard							
Limited-Use Fill							
Other Masonry Materials							
Restricted-Use Fill							
Rock							
Roofing Paper							
Sand							
Soil							
Unadulterated Wood							
Other (specify)							
Total Tons Received							

If the solid waste type is not listed, use one of the "Other" lines and fill in the name of the waste. If more "Other" lines are needed, cross out an unused type and fill in the other solid waste name. If still more "Other" lines are needed, attach another copy of this page, cross out an unused type, and fill in the other solid waste name.

SECTION 2 – SOLID WASTE RECEIVED (continued)

Type of Waste	Tip Fee (\$/Ton)	August (tons)	September (tons)	October (tons)	November (tons)	December (tons)	Total Year (tons)	Daily Avg. (tons)
Asphalt Millings								
Asphalt Pavement			SEE	ATTACHED SHEET				
Asphalt Roofing Shingles								
Brick								
Concrete								
Construction & Demolition (C&D) Debris								
Gravel								
Gypsum Wallboard								
Limited-Use Fill								
Other Masonry Materials								
Restricted-Use Fill								
Rock								
Roofing Paper								
Sand								
Soil								
Unadulterated Wood								
Other (specify)								
Total Tons Received								

If the solid waste type is not listed, use one of the "Other" lines and fill in the name of the waste. If more "Other" lines are needed, cross out an unused type and fill in the other solid waste name. If still more "Other" lines are needed, attach another copy of this page, cross out an unused type, and fill in the other solid waste name.

SECTION 3 – SERVICE AREA OF SOLID WASTE RECEIVED

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

- 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 material transported by each:

100 % Road; Waste Type(s): _____ % Rail; Waste Type(s): _____
 _____ % Water; Waste Type(s): _____ % Other (specify: _____): Waste Type(s): _____

SERVICE AREA OF SOLID WASTE RECEIVED <small>(where the waste is coming from)</small>					
TYPE OF WASTE	SOLID WASTE MANAGEMENT FACILITY FROM WHICH IT WAS RECEIVED <small>(Name & Address)</small> OR " Direct Haul "	SERVICE AREA STATE OR COUNTRY	SERVICE AREA COUNTY OR PROVINCE	NYS PLANNING UNIT <small>(See Attached List of NYS Planning Units)</small>	TONS RECEIVED
Asphalt Millings	SEE ATTACHED SHEET				
Asphalt Pavement					
Asphalt Roofing Shingles					
Brick					

SERVICE AREA OF SOLID WASTE RECEIVED (where the waste is coming from)					
TYPE OF WASTE	SOLID WASTE MANAGEMENT FACILITY FROM WHICH IT WAS RECEIVED (Name & Address) OR "Direct Haul"	SERVICE AREA STATE OR COUNTRY	SERVICE AREA COUNTY OR PROVINCE	NYS PLANNING UNIT (See Attached List of NYS Planning Units)	TONS RECEIVED
Concrete	SEE ATTACHED SHEET				
Construction & Demolition (C&D) Debris					
Gravel					
Gypsum Wallboard					
Limited-Use Fill					
Other Masonry Materials					
Restricted-Use Fill					
Rock					

Reprinted (12/21)

SERVICE AREA OF SOLID WASTE RECEIVED (where the waste is coming from)

TYPE OF WASTE	SOLID WASTE MANAGEMENT FACILITY FROM WHICH IT WAS RECEIVED (Name & Address) OR " <i>Direct Haul</i> "	SERVICE AREA STATE OR COUNTRY	SERVICE AREA COUNTY OR PROVINCE	NYS PLANNING UNIT (See Attached List of NYS Planning Units)	TONS RECEIVED
Roofing Paper	SEE ATTACHED SHEET				
Sand					
Soil					
Unadulterated Wood					
Other (specify)					
TOTAL RECEIVED (tons): _____					

If the solid waste type is not listed, use one of the "Other" lines and fill in the name of the waste. If more "Other" lines are needed, cross out an unused type and fill in the other solid waste name. If still more "Other" lines are needed, attach another copy of this page, cross out an unused type, and fill in the other solid waste name.

SECTION 4 - TRANSFER OR DISPOSAL DESTINATION

Please identify destination of waste. Please only include waste sent off-site for disposal or further transfer prior to disposal. Exclude Recyclable Material amounts reported in Section 5. **DO NOT REPORT IN CUBIC YARDS!**

- If the waste is being sent to another facility for transfer or processing prior to disposal (e.g. Transfer station or C&D debris processing facility), please identify name, address, corresponding State/Country, County/Province, and Destination Planning Unit of the transfer destination and the amount of waste transferred in the "Amount to Transfer Destination" column.
- If the waste is being sent to a landfill or combustor, please identify the name, address, corresponding State/Country, County/Province, and Destination Planning Unit of the disposal destination and the amount of waste being sent for disposal in the "Amount to Disposal Destination" column.
- If the waste is being sent to a landfill to be utilized as Alternative Operating Cover (AOC), please identify the name, address, corresponding State/Country, County/Province, and Destination Planning Unit of the landfill and the amount of waste being sent for use as AOC in the "Amount Used as AOC" column.

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

100 % Road: Waste Type(s): Direct Haul _____ % Rail: Waste Type(s): _____
 % Water: Waste Type(s): _____ % Other (specify: _____): Waste Type (s): _____

TRANSFER OR DISPOSAL DESTINATION								
TYPE OF WASTE	SOLID WASTE MANAGEMENT FACILITY TO WHICH IT WAS SENT (Name & Address)	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	NYS PLANNING UNIT (See Attached List of NYS Planning Units)	AMOUNT TO TRANSFER DESTINATION (TONS)	AMOUNT TO DISPOSAL DESTINATION (TONS)	AMOUNT USED AS AOC (TONS)	TOTAL YEAR (TONS)
Construction & Demolition (C&D) Debris	SEE ATTACHED SHEET							
Residue								
Other (specify)								
TOTAL SENT (tons): _____								

If the waste type is not listed, use one of the "Other" lines and fill in the name of the material. If more "Other" lines are needed, cross out an unused type and fill in the other waste name. If still more "Other" lines are needed, attached another copy of this page, cross out an unused type, and fill in the other waste name.

SECTION 5 - MATERIAL RECOVERED FOR REUSE/RECYCLING

Please identify destination of recovered materials. Indicate the location of use/name of the destination, address, corresponding State/Country, County/Province, Destination Planning Unit/Municipality and the amount of material recovered. **DO NOT REPORT IN CUBIC YARDS!**

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

100 % Road; Material(s): Direct Haul
 _____ % Rail; Material(s): _____
 _____ % Water; Material(s): _____
 _____ % Other (specify: _____); Material(s): _____

Loads of material that are to be used under a pre-determined or case-specific BUD do not need to be reported. The only exception is for specific material types (RCA, asphalt millings, etc.) distributed in excess of 10,000 tons (360.12(c)(5)). In this case, the total tonnage should be reported, but not the individual destinations.

MATERIAL RECOVERED FOR REUSE/RECYCLING					
MATERIAL RECOVERED	LOCATION OF USE/DESTINATION <small>(Name & Address) Please note that "direct haul", "various", and "various locations" are not acceptable responses for the address of the location of use.</small>	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	NYS PLANNING UNIT <small>(See Attached List of NYS Planning Units)</small>	TONS RECOVERED <small>(out of facility)</small>
Asphalt Millings	SEE ATTACHED SHEET				
Asphalt Pavement					
Asphalt Roofing Shingles					
Brick					
Bulk Metal (from C&D Debris)					

MATERIAL RECOVERED FOR REUSE/RECYCLING

MATERIAL RECOVERED	LOCATION OF USE/DESTINATION <i>(Name & Address)</i> Please note that "direct haul", "various", and "various locations" are not acceptable responses for the address of the location of use.	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	NYS PLANNING UNIT <i>(See Attached List of NYS Planning Units)</i>	TONS RECOVERED <i>(out of facility)</i>
Concrete	SEE ATTACHED SHEET				
Gravel					
Gypsum Wallboard					
Limited-Use Fill					
Other Masonry Materials					
Restricted-Use Fill					
Rock					
Roofing Paper					

MATERIAL RECOVERED FOR REUSE/RECYCLING					
MATERIAL RECOVERED	LOCATION OF USE/DESTINATION (Name & Address) Please note that "direct haul", "various", and "various locations" are not acceptable responses for the address of the location of use.	DESTINATION STATE OR COUNTRY	DESTINATION COUNTY OR PROVINCE	NYS PLANNING UNIT (See Attached List of NYS Planning Units)	TONS RECOVERED (out of facility)
Sand	SEE ATTACHED SHEET				
Soil					
Unadulterated Wood					
Other (specify)					
TOTAL RECOVERED (tons):					

If the material type is not listed, use one of the "Other" lines and fill in the name of the material. If more "Other" lines are needed, cross out an unused type and fill in the other materials name. If still more "Other" lines are needed, attached another copy of this page, cross out an unused type, and fill in the other materials name.

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

Are there required cost estimates and financial assurance documents for closure?

Yes No If yes, attach additional sheets reflecting annual adjustments for inflation and any changes to the Closure Plan?

SECTION 8 – 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 9 – 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 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, attach additional sheets identifying the reporting requirements with their respective responses.

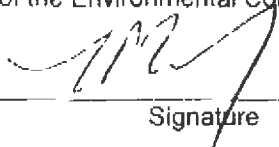
SECTION 11 - SIGNATURE AND DATE BY OWNER OR OPERATOR

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	<u>2-1-22</u> _____ Date
<u>Jimmy Winters</u> _____ Name (Print or Type)	<u>Sr VP Oper</u> _____ Title (Print or Type)
<u>jimmywinters@wintersbros.com</u> _____ Email (Print or Type)	
<u>120 Nancy Street</u> _____ Address	<u>West Babylon</u> _____ City
<u>NY 11704</u> _____ State and Zip	<u>63-49-4923</u> _____ Phone Number

ATTACHMENTS: YES NO
(Please check appropriate line)

WINTERS YAPHANK TRANSFER STATION
YEARLY DEC REPORT 2021

Section 2 - Solid Waste Received

INBOUND	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Total	PPT
CD	5,358.83	3,811.83	6,947.51	8,485.46	7,894.60	8,879.27	7,801.84	7,986.99	8,461.68	9,019.04	7,817.68	6,881.85	89,346.58	\$ 92.70
CONCRETE									30.93				30.93	\$ 50.00
LANDSCAPE						-	3.44	7.73					11.17	\$ 69.98
METAL	13.93	9.76	17.08	20.34	14.88	18.06	47.43	12.96	20.37	50.82	214.30	147.83	587.76	\$ (49.83)
TIRES												26.07	26.07	\$ 200.00
Grand Total	5,372.76	3,821.59	6,964.59	8,505.80	7,909.48	8,897.33	7,852.71	8,007.68	8,512.98	9,069.86	8,031.98	7,055.75	90,002.51	\$ 91.79

WINTERS YAPHANK TRANSFER STATION

Section 3 - Service Area of Solid Waste Received

SOLID WASTE					
TYPE OF WASTE	MANAGEMENT FACILITY	SERVICE AREA STATE	SERVICE AREA COUNTY	NYS PLANNING UNIT	TONS RECEIVED
CD	DIRECT HAUL	NY	NASSAU	GLEN COVE	222.05
CD	DIRECT HAUL	NY	NASSAU	HEMPSTEAD	173.71
CD	DIRECT HAUL	NY	NASSAU	NEW HYDE PARK	2.05
CD	DIRECT HAUL	NY	NASSAU	NORTH HEMPSTEAD	371.99
CD	DIRECT HAUL	NY	NASSAU	OYSTER BAY	1,330.31
CD	DIRECT HAUL	NY	SUFFOLK	BABYLON	27,020.49
CD	DIRECT HAUL	NY	SUFFOLK	BROOKHAVEN	33,363.23
CD	DIRECT HAUL	NY	SUFFOLK	EAST HAMPTON	15.49
CD	DIRECT HAUL	NY	SUFFOLK	HUNTINGTON	1,048.54
CD	DIRECT HAUL	NY	SUFFOLK	ISLIP	16,966.29
CD	DIRECT HAUL	NY	SUFFOLK	RIVERHEAD	292.98
CD	DIRECT HAUL	NY	SUFFOLK	SMITHTOWN	2,633.50
CD	DIRECT HAUL	NY	SUFFOLK	SOUTHAMPTON	5,897.25
CD	DIRECT HAUL	NY	SUFFOLK	SOUTHOLD	8.70
CONCRETE	DIRECT HAUL	NY	NASSAU	OYSTER BAY	30.93
LANDSCAPE	DIRECT HAUL	NY	SUFFOLK	BABYLON	3.44
LANDSCAPE	DIRECT HAUL	NY	SUFFOLK	BROOKHAVEN	7.73
METAL	DIRECT HAUL	NY	SUFFOLK	BABYLON	587.76
TIRES	DIRECT HAUL	NY	SUFFOLK	BROOKHAVEN	26.07
Grand Total					90,002.51

**WINTERS YAPHANK TRANSFER STATION
YEARLY DEC REPORT 2021**

Section 4 & 5- Disposal Destination & Material Recovered

OUTBOUND	DESTINATION	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Total
C&D	BROOKHAVEN LANDFILL - 350 HORSEBLOCK RD, BROOKHAVEN, NY	1,916.79	891.32	2,187.49	2,257.71	4,446.52	4,732.14	5,476.00	4,299.61	3,728.14	1,916.79	2,291.73	745.36	34,889.60
C&D	SENECA MEADOWS LANDFILL - 1786 SALCMAN RD, WATERLOO, NY			347.13	513.82									860.95
C&D	TUNNELL HILL PARTNERS, COASTAL DISTRIBUTION - 1633 NEW HWY, FARMINGDALE, NY			40.96										40.96
C&D	WINTERS BROS HOLTSVILLE TS - 971 WAVERLY AVE, HOLTSVILLE, NY	173.86	263.72	162.47		3.29	2.66						4.72	610.72
CONCRETE	RJ MURRAY ENTERPRISES INC - 131 OLD NORTHPORT RD, KINGS PARK, NY	90.96	67.62	243.06	147.24	175.21	146.03	18.73	18.24	167.00	78.79	49.40	317.02	1,519.30
SCREENINGS	BROOKHAVEN LANDFILL - 350 HORSEBLOCK RD, BROOKHAVEN, NY	2,487.35	2,676.40	3,566.66	4,870.72	3,274.24	4,148.63	2,467.13	3,836.71	4,207.40	6,840.59	5,226.88	6,447.79	50,050.50
TREES	LI COMPOST - 100 URBAN AVE, WESTBURY, NY				37.12									37.12
DISPOSAL Total		4,668.96	3,899.06	6,547.77	7,826.61	7,899.26	9,029.46	7,961.86	8,154.56	8,102.54	8,836.17	7,568.01	7,514.89	88,009.15
ALUMINUM	ARROW SCRAP CORP - 1120 LINCOLN AVE, HOLBROOK, NY										2.84	6.27	6.28	15.39
ALUMINUM	CRESTWOOD METAL CORP - 1100 LINCOLN AVE, HOLBROOK, NY	5.19	6.83	8.54	9.42	7.32	6.12	7.53	5.98					56.93
ALUMINUM	CROWN SANITATION - 82A OLD DOCK RD, YAPHANK, NY									3.40	6.07			9.47
COPPER/BRASS	PK METALS - 3542 RTE 112, CORAM, NY	0.73	0.91	0.49	1.32	0.58	0.74	0.64	0.69	0.68	0.84	0.47	0.97	9.06
LIGHT IRON	BROOKLYN RESOURCE - 5811 PRESTON CT, BROOKLYN, NY	171.13	141.23	241.19	271.63	215.61	231.78	280.51	270.76	210.28	308.27	250.59	239.72	2,832.70
LIGHT IRON	SIMS METAL MANAGEMENT - 3027 GREENPOINT AVE, LONG ISLAND CITY, NY											17.74		17.74
METAL	BROOKLYN RESOURCE - 5811 PRESTON CT, BROOKLYN, NY	20.44										39.69		60.13
METAL	PASCAP CO INC - 4250 BOSTON RD, BRONX, NY											9.92		9.92
METAL	SIMS METAL MANAGEMENT - 3027 GREENPOINT AVE, LONG ISLAND CITY, NY											142.99		142.99
MOTORS	PK METALS - 3542 RTE 112, CORAM, NY								1.54					1.54
WIRE	PK METALS - 3542 RTE 112, CORAM, NY		1.88		1.32			1.27			1.51		1.04	7.02
RECOVERED Total		197.49	150.85	250.22	283.69	223.51	238.64	289.95	278.97	214.36	319.53	467.67	248.01	3,162.89
Grand Total		4,866.45	4,049.91	6,797.99	8,110.30	8,122.77	9,268.10	8,251.81	8,433.53	8,316.90	9,155.70	8,035.67	7,762.90	91,172.03