

IOWA DEPARTMENT OF NATURAL RESOURCES

CRT Recycling Facility





New Permit -CR	T-	_	-CRP -	To be filled in by agency
SECTION 1: FACILITY CONTACT INFORMATION				
Facility Information				
Name: A-TEC Recycling, Inc.			Dhono	- 515-244-7357
Address: 5745 NE 17th St.			Fax:	515-263-6970
City, State, Zip: Des Moines, IA 50313	E-mail:	lyoung@a-t	-	
Responsible Official for the Facility		17 4 11 18 2 4 2	ec recycli	ng.com
Name: Larry Young			Phone:	515-244-7357
Address: PO Box 57580			Fax:	515-263-6970
City, State, Zip: Pleasant Hill, IA 50317	E-mail:	rlyoung@a-		
Facility Operator			1 1	ing.com
Name: Biff Moore			Phone:	515-244-7357
Address: PO Box 57580			Fax:	515-263-6970
City, State, Zip: Pleasant Hill, IA 50317	E-mail:	bmoore@a-1		
Facility Owner/Operator			. ccycli	
Name: Larry Young			Phone:	515-244-7357
Address: PO Box 57580			Fax:	515-263-6970
City, State, Zip: Pleasant Hill, IA 50317	E-mail:	lyoung@a-te		
Physical location of any collection sites, if separate, from	—— m the main fa	cility		8.00111
Location: same		,		
SECTION 2. SITE INFORMATION			131	
Days and hours of operation of the facility: 8-5				
Open to the public? Yes No				
Service area of the facility estimated population to be ser	was d			
Service Area: Midwest (Iowa, Nebraska, Illinois, Missouri	Ved:	Dalest Att		
Type, source and expected weight for number of CDT-	, Nalisas, South	vakota, Minr	nesota)	
Type, source <u>and</u> expected weight (or number) of CRTs to per day 1400	ne nandied b	er day, wee	k and yea	ar at the facility:
per week 7000		-100		
per year 365,000				

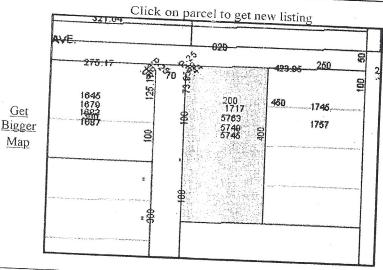
SECTION 3. REQUIRED DOCUMENTS	
IAC 567 122.7(1)c - Proof of Ownership or legal entitlement to use the property	
Is the property owned by the applicant? If yes, attach proof of ownership	
Is the property leased by the applicant? If yes, have the owner or designated representative of the owner, sign the	
statement below acknowledging that CRT recycling will take place at the facility.	е
o o white of the facility.	
□ Property Owner □ Designated D	
Designated Representative of the property owner	
(Provide verification of status as representative) By signing below, I state that I am the owner or the representative of the owner of the property described in this	
The same of the control of the owner I represent have been informed and are	_
or proposed for the property and consent to those most and activities. Find	
and the lower pepartification individual Resolutions of a parmit/Pogistration to a line in the same of	
and the terms and the terms and conditions of any such registration do not will be a	у
daty, daty, or esponsibility arising under lowa's Solid Waste Management regulations.	
Signature: Date: $2-01-2023$	
Printed Name:	
Lary resident	
IAC 567 122.7(1)d - Attach documentation that the facility meets local zoning requirements	
IAC 567 122.7(1)e - Attach a brief description of the facility and the CRT processing that will take place	
that the cki processing that will take place	
SECTION 4. APPLICANT CERTIFICATION	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision to assure that qualified personnel properly gathered and apply to the control of th	
and qualified personnel property galliered and evaluated the information submitted by	
persons directly responsible for gathering the information, the information submitted is to the	
knowledge and belief, true, accurate, and complete.	У
I further certify that the construction and operation of the above described facility will be in accordance with the plans,	
-p-o-matrions, reports and related communications accepted by the lower Donartment of Network D	
and in decordance with conditions imposed in the permit issued by the lower Department of Netural	
Resources.	
Signature of Permit Applicant: Jamy Toma Date: 2-01-2023	
Printed Name: Larry Young Title: Process	
1181dent	_
Application for a cathode ray tube recycling facility must be accompanied by the information required by the applicable	\neg
solid waste rules under lowa Administrative Code 567 Chapter 122.	
Sand complete to the state of t	
Send completed application with attached information to:	
lowa Department of Natural Resources	
Land Quality Bureau	
Solid Waste Section 502 E 9 th St	
Des Moines, IA 50319-0034	
For guestions concerning this application also are the second of the sec	
For questions concerning this application please contact the Department at (515) 217-0872.	

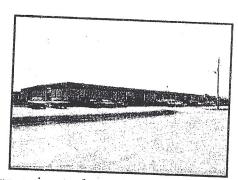
ATTACHMENT (2)

Polk County Assessor

[Home] [General Query] [Legal Query] [HomeOwner Query] [Book/Page Query] [Commercial Query] [Res Sales Query] [Comm Sales Query] [Help]

D:		co Query	1 [trefb]	4.0	The same state of the same of
District/Parcel	GeoParcel	Man	Nbhd	The same of the sa	
270/02467-001-		Tirah	TADIIO	Jurisdiction	Status
002	7924-12-327-001	0322		SAYLOR TWNSHP	ACTIVE
School District	Tax Increment Finance District	Bond		er/Cemetery	
8/Saydel		╁═			
Street Address					
			City Stat	e Zipcode	
5765 NE 17T]	H ST		DES MO	INES IA 50313	
Otto	1-				





Approximate date of photo 05/09/2001

Mailing Address

A-TEC RECYCLING INC

POB 7391

Get

Map

DES MOINES, IA 50309-7391

Legal Description - IAC 567 Chapter 122.7(8)

-EX E 250F-LTS 1,2,3 & 4 UPI INDUSTRIAL PARK PLAT 1 REPLAT

Ownership	Name-1AC 567 Chapter 122.7(2)	Transfer	Rook/Do-	[D G
Title Holder #1	D M WICHITA FALLS PRTNRSHP	12/22/1000	Book/Page	RevStamps
Contract Buyer #1	A TEC DECITOR NAME			
	THE RECYCLING INC	10/05/2004	10760/535	1

According	C.					
Assessment	Class	Kind	Land	Bldg	AgBd	Total

1.									
Current	Comme	rcial	Full	101	,000		600 000	11	
Assessme	nt Roll Notice	Est	imate Taxes			L	689,000	0 790,00	
Zoning	Dogovi-4	24				easu	rer Tax Inforn	nation Pay Taxe	
GB	Description	IAC	567 Chapte	N 122.7(3)	SF		Assessor 2	Zoning	
	General Busin	ness	District		8015	0			
504166. [0]	k County Publ	ishe	d: 06/12/2006	Contact:	Depar	rtmer	nt of Planning	Light & Development	
			313	286 3358				- veropinent	
Land		94							
SQUARE FE	ET 8	30,15	0 ACRES		1.84	TO	POGRAPHY	7/21	
Commercial S	Summary	17					OURAINI	B/Blank	
OCCUPANC	Y 46/Wareho	use	WEIGHTEI AGE)	1	977	STORY		
LAND AREA			GROSS				HEIGHT		
SATUS AREA	80,1	150	AREA	33,000 FINISH		FINISH AREA	9,712		
BSMT UNFIN			BSMT				NUMBER]	
			FINISH			0	UNITS	0	
<u>Csection # 101</u>		The second second						II.	
OCCUPANT	SERV. SUPP	EY.	OUARRY SI	DDI V AT	FC				
SECT						7			
MULTIPL		OC	CCUPANCY	46/Warel	ouse	FC	UNDATION	CN/Concrete	
EXT WALL	MT/Metal	RO	OF	0.10		ROOF			
MAN				G/C	Gable	11	TERL	M/Metal	
OVRHD SF	512	DO %	CK FLR	73		W/a	RING		
		TO	TEAX COD			V 7 C.	MING	A/Adequate	
PLUMBING	A/Adequate	HT	TAL ST		1	FR	AME TYPE	ST/Steel	
BLDG	5/Metal	TO	T SCT			<u> </u>		S 17 Steel	
CLASS		AR		33	,000	ARI	ND FL EA	33,000	
ERIMETER	790	GR	ADE		4		ADE		
		1			4		TUST	+10	
EAR							031		

A-TEC Recycling, Inc.

FACILITY DESCRIPTION

A. Type of Activity:

Separation of fluorescent lamp components

for recycling. Offer transportation for

customer recycling.

B. Type of Hazardous Materials:

EPA Type D009

Mercury Contaminated Items including

Calcium Phosphate Powder from Fluorescent

Lamp Recycling

Polychlorinated Biphenyls

Used Non-Leaking Fluorescent lamp PCB ballasts and small PCB capacitors less than 3

Lbs.

Other Materials:

Universal Waste Batteries

Computer Electronic Waste

C. Amount of Max. Drum Hazardous Material:

Maximum of Eight (8), Sealed

55 Gallon Drums (Mercury Contaminated

Items/Powder)

Maximum of Twenty One (21), Sealed

55 Gallon Drums (PCB Ballasts)

D. Type of Building:

Single Building Facility (adjacent

tenants)

6000 square feet Warehouse & Office.

Concrete and Steel Construction

E. Facility Layout:

See next page

F. Facility Location:

5745 NE 17th Street

Des Moines, IA 50313

G. Billing Address:

P.O. BOX 17099

Des Moines, IA 50317-9402

