02-10-23;08:33AM;D&L Metal Recycling LLC

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## APPLIANCE DEMANUFACTURING ANNUAL REPORT January 1, 2022 – December 31, 2022

94-ADP-01-02

Please make address corrections as necessary

DAWN VELAZQUEZ D & L METAL RECYCLING 2120 S. 11TH STREET FORT DODGE IA 50501 REPORT IS DUE ON OR BEFORE January 31, 2023

Send completed form to:
lowa Department of Natural Resources
Land Quality Bureau
502 East Ninth Street
Des Moines, lowa 50319-0034
Or Email: Becky.jolly@dnr.jowa.gov
Or Fax: 515-725-8202, Attn: Sue Johnson

Are appliances containing refrigerants accepted at this facility?

Are appliances containing mercury accepted at this facility?

Are appliances containing sodium chromate accepted at this facility?

Are appliances containing sodium chromate accepted at this facility?

Are appliances containing PCB capacitors and ballasts accepted at this facility?

OYES ONO this facility?

Number of Appliances Demanufactured in each category				
TYPE OF APPLIANCE	NUMBER	TYPE OF APPLIANCE	NUMBER	
Refrigerators and freezers	34	Furnaces	Ø	
Commercial coolers	1	Clothes washers and dryers	28	
Air-conditioning units	3	Dishwashers	8	
Dehumidifiers	8	Microwave Ovens	9	
Gas Water Heaters	(3	Stoves/ Ovens or Other items containing Mercury, refrigerant or PCB-containing articles.	7	

Storage Dates			
Date the first item was placed in the mercury storage drum that is in use on December 31.	Na	Date the first PCB-containing item was placed in the storage drum that is in use on December 31.	W a

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	"Сотров	ent-Removal		
TYPE OF COMPONENT	NUMBER	TYPE OF COMPONENT	NUMBER	
Number of mercury switches removed. (Not in lbs)	Ø	Amount of Refrigerant Removed	8	
Number of mercury thermocouples removed.(Not in lbs)	Ø	Number of PCB capacitors removed. (Not in lbs)	Ø	
Number of fluorescent tubes removed.(Not in lbs)	Ø	Number of PCB ballasts removed. (Not in lbs)	6	

Sodium Chron	matevAppliances
Number of sodium chromate containing appliances shipped to another demanufacturer	~(a

The tipe of the control of the contr	Certification  Il.am the owner reperator or authorized representative one information reported above, and that it believe the into	of the owner o	rcperatoriano (natilinave. Raccurate and complete
Signature:	Name & Agency of Person Certifying (please type or print)  トレルルルトトルルルルにして	Date:	Telephone Number:
Email: & Cly won 2000 @	FOCH POOL 1A SOCOL	2/10/202	Fax Number:
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Additional Comments:		
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In accordance with Iowa Administrative Code 567 Chapter 118.13(1) – Annual reports with the information required in subrule 118.13(2) are due January 31 each year for the activities of the previous calendar year shall be retained at the facility for at least three years.

DNR form rev 3/13

542-8005