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

81-ADP-01-15

Please make address corrections as necessary

CON 12-1-1

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Doc # 105814

JAN 3 0 2023

JIM WISSLER
SAC COUNTY SOLID WASTE AGENCY
100 NW STATE STREET
BOX 4
SAC CITY IA 50583

REPORT IS DUE ON OR BEFORE January 31, 2023

Send completed form to:
Iowa Department of Natural Resources
Land Quality Bureau
502 East Ninth Street
Des Moines, Iowa 50319-0034

Or Email: <u>Becky.jolly@dnr.iowa.gov</u> Or Fax: 515-725-8202, Attn: Sue Johnson

Attach additional pages if necessa	ary	1
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Are appliances containing refrigerants accepted at this facility?

es ONo

Are appliances containing mercury accepted at this facility?

Yes ONo

Are appliances containing sodium chromate accepted at this facility?

OYes No

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

Yes ONo

Number of Appliances Demanufactured in each category				
TYPE OF APPLIANCE	NUMBER	TYPE OF APPLIANCE	NUMBER	
Refrigerators and freezers	30	Furnaces	C	
Commercial coolers	B	Clothes washers and dryers	17	
Air-conditioning units	19	Dishwashers	7	
Dehumidifiers	18	Microwave Ovens	4)/	
Gas Water Heaters	1	Stoves/ Ovens or Other items containing Mercury, refrigerant or PCB-containing articles.	8	

Storage Dates				
Date the first item was placed in the mercury storage drum that is in use on December 31.	Date the first PCB-containing item was placed in the storage drum that is in use on December 31.	Feb28,32		

Component Removal					
TYPE OF COMPONENT	NUMBER	TYPE OF COMPONENT	NUMBER		
Number of mercury switches removed. (Not in lbs)	00	Amount of Refrigerant Removed	0		
Number of mercury thermocouples removed.(Not in lbs)	0	Number of PCB capacitors removed. (Not in lbs)	38		
Number of fluorescent tubes removed.(Not in lbs)	360	Number of PCB ballasts removed. (Not in lbs)	20		

Sodium Chromate Appliances				
Number of sodium chromate containing appliances shipped to another demanufacturer	0			

80 Certification I certify under penalty of law that I am the owner, operator, or authorized representative of the owner or operator and that I have examined and am familiar with the information reported above, and that I believe the information is true, accurate and complete.						
Signature: Cliff I what I seems I con	Name & Agency of Person Certifying (please type or print) Sar County Joli Waste Age	Date:	Telephone Number: 112-469-4695 Fax Number:			

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