APPLIANCE DEMANUFACTURING ANNUAL REPORT January 1, 2023 – December 31, 2023

57-ADP-08-18

Please make address corrections as necessary

REPORT IS DUE ON OR BEFORE January 31, 2024

Send completed form to:
Iowa Department of Natural Resources
Land Quality Bureau
502 East Ninth Street
Des Moines, Iowa 50319-0034
Or Email: Becky.jolly@dnr.jowa.gov

Or Fax: 515-725-8202, Attn: Sue Johnson

MARVIN BROWN MARION IRON & METAL CO. 4000 3RD AVE MARION IA 52302

Attach additional pages if necessary.

Are appliances containing refrigerants accepted at this facility?

- Yes ONc

Are appliances containing mercury accepted at this facility?

Yes ONo

Are appliances containing sodium chromate accepted at this facility?

OYes ONo

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	0	Furnaces	-0-
Commercial coolers	0	Clothes washers and dryers	646
Air-conditioning units	109	Dishwashers	54
Dehumidifiers	22	Microwave Ovens	65
Gas Water Heaters	1848	Stoves/ Ovens or Other items containing Mercury, refrigerant or PCB-containing articles.	201

	Stora	ge Dates	
Date the first item was placed in the mercury storage drum that is in use on December 31.	NO DATE	Date the first PCB-containing item was placed in the storage drum that is in use on December 31.	NO DAIR NO DAIR

Component Removal				
TYPE OF COMPONENT	NUMBER	TYPE OF COMPONENT	NUMBER	
Number of mercury switches removed. (Not in lbs)	2	Amount of Refrigerant Removed	33.1 lbs	
Number of mercury thermocouples removed.(Not in lbs)	0	Number of PCB capacitors removed. (Not in lbs)	2.5	
Number of fluorescent tubes removed.(Not in lbs)	0	Number of PCB ballasts removed. (Not in lbs)	-0-	

Number of sodium chromate containing appliances shipped to another demanufacturer	0
59 Certif I certify under penalty of law that I am the owner, operator, or at examined and am familiar with the information reported above, a	thorized representative of the owner or operator and that I have

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:

Name & Agency of Person Certifying (please type or print)

RIC POWERS

Fax Number:

319-383-3913

Fax Number:

319-371-4610

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