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

77-ADP-01-02

Please make address corrections as necessary

REPORT IS DUE ON OR BEFORE January 31, 2024

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

JASON WEILAND
APPLIANCE RECYCLING OF IOWA AKA ALTER ME
1801 E EUCLID AVE
DES MOINES IA 50313

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

Attach additional pages if necessary.

Are appliances containing refrigerants accepted at this facility?

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 App	oliances Den	nanufactured in each category	
TYPE OF APPLIANCE	NUMBER	TYPE OF APPLIANCE	NUMBER
Refrigerators and freezers	1546	Furnaces	900
Commercial coolers	557	Clothes washers and dryers	3293
Air-conditioning units	1459	Dishwashers	1697
Dehumidifiers	410	Microwave Ovens	1536
Gas Water Heaters	1594	Stoves/ Ovens or Other items containing Mercury, refrigerant or PCB-containing articles.	1844

	Stora	ge Dates	Approximately and the second s
Date the first item was placed in the mercury storage drum that is in use on December 31.	6/14/23	Date the first PCB-containing item was placed in the storage drum that is in use on December 31.	6/19/23

Questions? Call or email: Susan Johnson, <u>susan.johnson@dnr.iowa.gov</u>, 515-217-0872 Please mail completed form to: Land Quality Bureau, 502 East 9th Street, Des Moines, IA 50319

	Component Removal		
TYPE OF COMPONENT	NUMBER	TYPE OF COMPONENT	NUMBER
Number of mercury switches removed. (Not in lbs)	16	Amount of Refrigerant Removed	1675
Number of mercury thermocouples removed.(Not in lbs)	2	Number of PCB capacitors removed. (Not in lbs)	5
Number of fluorescent tubes removed.(Not in lbs)	783	Number of PCB ballasts removed. (Not in lbs)	1

Sodium Chro	mate Appliances
Number of sodium chromate containing appliances shipped to another demanufacturer	

I certify under penalty of la examined and am familiar	7º Certification aw that I am the owner, operator, or authorized representative with the information reported above, and that I believe the info	of the owner o	r operator and that I have
Signature: Email:	Name & Agency of Person Certifying (please type or print) Jasen Weiland Facility Managen	Date:	Telephone Number: 5/5-557-390 Fax Number:

jason. Weiland @alter trading. com

Additional Comments:		

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

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