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

## 64-ADP-01-11

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, lowa 50319-0034
Or Email: Becky.jolly@dnr.jowa.gov

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

DOUGLAS GERVICH M. GERVICH & SONS INC. PO BOX 67 MARSHALLTOWN IA 50158

Attach additional pages if necessary.

Are appliances containing refrigerants accepted at this facility?

•Yes 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	543	Furnaces	70
Commercial coolers	15	Clothes washers and dryers	360
Air-conditioning units	148	Dishwashers	104
Dehumidifiers	79	Microwave Ovens	165
Gas Water Heaters	245	Stoves/ Ovens or Other items containing Mercury, refrigerant or PCB-containing articles.	173

	Stora	ge 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.	NA

Component Removal			
TYPE OF COMPONENT	NUMBER	TYPE OF COMPONENT	NUMBER
Number of mercury switches removed. (Not in lbs)	15	Amount of Refrigerant Removed	195
Number of mercury thermocouples removed.(Not in lbs)	ф	Number of PCB capacitors removed. (Not in lbs)	100
Number of fluorescent tubes removed.(Not in lbs)	Ø	Number of PCB ballasts removed. (Not in lbs)	Ø

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

61 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:	Name & Agency of Person Certifying (please type or print)	Date:	Telephone Number: 641-753-3359	
Email:	M. Gervich & Sons	1/23/24	Fax Number:	
Michael @ Geruich. com	Michael Fosdick		641-753-3140	

Additional Cor	iments:
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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