APPLIANCE DEMANUFACTURING ANNUAL REPORT January 1, 2024 – December 31, 2024

91-ADP-01-13

this facility?

Please make address corrections as necessary

RECEIVED

CHARLES KAPPELMAN K3 RECYCLING 14801 180TH AVE MILO IA 50166 JAN 1 0 2025

REPORT IS DUE ON OR BEFORE January 31, 2025

Send completed form to:
Iowa Department of Natural Resources
Land Quality Bureau
6200 Park Avenue, Ste 200
Des Moines, Iowa 50321

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

Attach	additional	pages	if necessary.
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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	Yes	ONo

Number of Appliances Demanufactured in each category				
TYPE OF APPLIANCE	NUMBER	TYPE OF APPLIANCE	NUMBER	
Refrigerators and freezers	126	Furnaces	1	
Commercial coolers		Clothes washers and dryers	81	
Air-conditioning units	16	Dishwashers	56	
Dehumidifiers	101	Microwave Ovens	123	
Gas Water Heaters	13	Stoves/ Ovens or Other items containing Mercury, refrigerant or PCB-containing articles.	22	

Storage Dates			
Date the first item was placed in the mercury storage drum that is in use on December 31.	9-18-24	Date the first PCB-containing item was placed in the storage drum that is in use on December 31.	/UA

Component Removal			
TYPE OF COMPONENT	NUMBER	TYPE OF COMPONENT	NUMBER
Number of mercury switches removed. (Not in lbs)	1	Amount of Refrigerant Removed	5 16s 134A
Number of mercury thermocouples removed.(Not in lbs)	0	Number of PCB capacitors removed. (Not in lbs)	0
Number of fluorescent tubes removed.(Not in lbs)	0	Number of PCB ballasts removed. (Not in lbs)	0

Sodium Chro	mate Appliances	
Number of sodium chromate containing appliances shipped to another demanufacturer	None	

83Certification					
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	Date:	Telephone Number:		
May 1 you	(please type or print)		515-975-7317		
Email:	K3 Recycling	1-6-25	Fax Number:		
Chappelmen 1@Gmoil	Charles Koppelma				

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