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

97-ADP-01-02

Please make address corrections as necessary

REPORT IS DUE ON OR BEFORE January 31, 2025

Send completed form to: lowa 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

TIM B
SIOUX CITY DEMANUFACTURING CO., L.C.
PO BOX 3262
SIOUX CITY IA 51102

Attach additional pages if necessary.

Are appliances containing refrigerants accepted at this facility?

ØYes ONo

Are appliances containing mercury accepted at this facility?

ØYes 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	6	Furnaces	15
Commercial coolers		Clothes washers and dryers	ID
Air-conditioning units	9	Dishwashers	
Dehumidifiers	6	Microwave Ovens	4
Gas Water Heaters	3	Stoves/ Ovens or Other items containing Mercury, refrigerant or PCB-containing articles.	1)

Storage Dates			
Date the first item was placed in the mercury storage drum that is in use on December 31.	1/7/24	Date the first PCB-containing item was placed in the storage drum that is in use on December 31.	3/24

Component Removal			
TYPE OF COMPONENT	NUMBER	TYPE OF COMPONENT	NUMBER
Number of mercury switches removed. (Not in lbs)	101	Amount of Refrigerant Removed	28
Number of mercury thermocouples removed.(Not in lbs)		Number of PCB capacitors removed. (Not in lbs)	
Number of fluorescent tubes removed.(Not in lbs)		Number of PCB ballasts removed. (Not in lbs)	

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

⁸⁷ 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: Email: TimB@compressedsteel.com	Name & Agency of Person Certifying (please type or print)	Date:	Telephone 712 Number: 277 400 Fax Number: 7/2 277 - / 2/0

Additional Comments:	
	Volumes still Low.

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