

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

42-ADP-01-10

Please make address corrections as necessary

REPORT IS DUE ON OR BEFORE
January 31, 2025

RECEIVED

JAN 15 2025

DIANE VANDERPOOL
 D&T RECYCLING
 11733 CO HWY S45
 IOWA FALLS IA 50126

Send completed form to:
 Iowa Department of Natural Resources
 Land Quality Bureau
 6200 Park Avenue, Ste 200
 Des Moines, Iowa 50321
 Or Email: Becky.jolly@dnr.iowa.gov
 Or Fax: 515-725-8202, Attn: Sue Johnson

Attach additional pages if necessary.

- Are appliances containing refrigerants accepted at this facility? Yes No
- Are appliances containing mercury accepted at this facility? Yes No
- Are appliances containing sodium chromate accepted at this facility? Yes No
- Are appliances containing PCB capacitors and ballasts accepted at this facility? Yes No

Number of Appliances Demanufactured in each category

<i>TYPE OF APPLIANCE</i>	<i>NUMBER</i>	<i>TYPE OF APPLIANCE</i>	<i>NUMBER</i>
Refrigerators and freezers	60	Furnaces	1
Commercial coolers	2	Clothes washers and dryers	69
Air-conditioning units	22	Dishwashers	6
Dehumidifiers	17	Microwave Ovens	18
Gas Water Heaters	4	Stoves/ Ovens or Other items containing Mercury, refrigerant or PCB-containing articles.	14

Storage Dates

Date the first item was placed in the mercury storage drum that is in use on December 31.	9-4-24	Date the first PCB-containing item was placed in the storage drum that is in use on December 31.	9-4-24
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Component Removal			
TYPE OF COMPONENT	NUMBER	TYPE OF COMPONENT	NUMBER
Number of mercury switches removed. (Not in lbs)	3	Amount of Refrigerant Removed	240g 11680g
Number of mercury thermocouples removed. (Not in lbs)	0	Number of PCB capacitors removed. (Not in lbs)	9
Number of fluorescent tubes removed. (Not in lbs)	0	Number of PCB ballasts removed. (Not in lbs)	0

Sodium Chromate Appliances	
Number of sodium chromate containing appliances shipped to another demanufacturer	(NA)

42 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: <i>Diane Vanderpool</i>	Name & Agency of Person Certifying <i>Tom</i> (please type or print) <i>Diane Vanderpool</i>	Date: <i>1/9/24</i>	Telephone Number: <i>641-648-3088</i>
Email: <i>dandtreycling@hotmail.com</i>	<i>\$ Owner</i>		Fax Number: <i>NA</i>

Additional Comments:
Sodium Chromate Appliances not accepted

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.