

## APPLIANCE DEMANUFACTURING ANNUAL REPORT

JANUARY 1,

- DECEMBER 31,

**CON 12-1-1** 

Doc # 112400

Permit Number: 99-ADP - 03-14	BEFORE IANII A DV 24 ST			
Responsible Official: Mark Than 2		JANUARY 31 <sup>ST</sup>		
Facility Name: MTShering LLC	me: MTShanna LLC Send completed form to:			
Land		Quality Bureau ast Ninth Street		
City, State Zip: Rowarth Soul	Des Moines, Iowa 50319-0034			
ATTACH ADDITIONAL PAGES IF NECESSARY.	OR FAX: 515-725-	B202, ATTN: SUE JOHNSON		
Are appliances containing refrigerants accepted at this facility? Yes No				
Are appliances containing mercury accepted at this fac	☐ Yes 🇖 No			
Are appliances containing sodium chromate accepted at this facility? 🔲 Yes ⁄ No				
Are appliances containing PCB capacitors and ballasts this facility?	☑ Yes □ No			
Number of Appliances Demanufactured in each category				

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TYPE OF APPLIANCE	NUMBER	TYPE OF APPLIANCE	NUMBER
Refrigerators and freezers	42	Furnaces	110
Commercial coolers	D 200	Clothes washers and dryers	
Air-conditioning units	12	Dishwashers	28
Dehumidifiers	3	Microwave Ovens	18
Gas Water Heaters	15	Stoves/ Ovens or	20
	•	Other items containing Mercury, refrigerant or PCB-containing articles.	20

Storage Dates			
Date the first item was placed in the mercury storage drum that is in use on December 31.	10 NIA	Date the first PCB-containing item was placed in the storage drum that is in use on December 31.	NIA

Component Removal			
TYPE OF COMPONENT	NUMBER	TYPE OF COMPONENT	NUMBER
Number of mercury switches removed. (Not in lbs)	Ø	Amount of Refrigerant Removed	D
Number of mercury thermocouples removed. (Not in lbs)	9	Number of PCB capacitors removed. (Not in lbs)	Ø
Number of fluorescent tubes removed. (Not in lbs)	0	Number of PCB ballasts removed. (Not in lbs)	.44

RECEIVED

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

Certification I certify under penalty of law that I am the owner, operator, or authorized rexamined and am familiar with the information reported above, and that I I	epresentative of the owner or operator and that I have
Name & Agency of Person Certifying Mark Thay & (please type or print)	
Telephone Number: 515-298 2139	Fax Number:
Email: Mts 150 Frontier net not	
Signature:	Date: 1-28-25

## Additional Comments: Haid to find Balksts that have PCB's,

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.