REGION 2

ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

11/22/99

This is to acknowledge that you have filed a **Notification of Hazardous Waste Activity** for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER	→	**NYD000824565**
INSTALLATION NAME	→	**AMERICAN AMBULETTE**
INSTALLATION ADDRESS	→	**722 NEPPERHAN AVE YONKERS, NY 10703**
MAILING ADDRESS	→	**722 NEPPERHAN AVE YONKERS, NY 10703**

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 2
290 BROADWAY, 22nd Floor
NEW YORK, NEW YORK 10007-1866

ATTN: DIV OF ENVIRON PLANNING & PROTECTION
RCRA PROGRAMS BRANCH

TO: WOOD, JOHN
DIRECTOR
722 NEPPERHAN AVE
YONKERS, NY 10703

Lenore A. Minerva
722 Nepperhan Avenue
Yonkers, New York 10703

NYD 000824565

U.S. EPA
AGENCY RO II
99 MAR 15 AM 12: 5
HAZARDOUS & SOLID WASTE
PROGRAMS BRANCH

Mr. Jack Hoyt
Environmental Protection Agency
290 Broadway, 22nd Floor
New York, New York 10007

Re: Delisting of RCRIS-TSD & SQG EPA ~~ID# 1000400661~~
Reiter Drum & Barrel Co. Inc. (Out of business)
722 Nepperhan Avenue
Yonkers, New York 10701

Dear Mr. Hoyt,

American Ambulette Corporation/Empress Ambulance Service, Inc. is the current operator of the facility located at 722 Nepperhan Avenue, Yonkers, NY.

The American Ambulette Corporation Facility is listed under facility name Reiter Drum & Barrel Co. Inc. as a RCRIS Transportation-Storage-Disposal and Small Quantity Generator EPA ID# 1000400661. American Ambulette Corporation Facility acquired the property in approximately 1986. The building is currently used as office space and vehicle fleet service garage. Vehicle waste oil and antifreeze are generated on-site during vehicle maintenance and are removed meeting all current regulations.

American Ambulette Corporation is updating the environmental status of the facility and wishes to delist the facility. Please do not hesitate to call if you have any questions or require additional information.

Sincerely,

Lenore A. Minerva
CEO / President

cc: Deborah Y. McCarthy, Esq., McCarthy, Fingar, Donovan, Drazen & Smith, L.L.P.
Allen G. Kadish, Esq., Gainsburg & Hirsch, L.L.P.

12/31/79

UC 3/23/99 NR NN7

Please print or type with ELITE

★★ To avoid delays in processing, please complete all sections. ★★ Only original signature of the Generator is acceptable.

Please refer to the *Instructions for Filing Notification* before completing this form. The information requested here is required by law (Section 3010 of the *Resource Conservation and Recovery Act*).

EPA Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received (For Official Use Only)

89 NOV 8 PM 4:35

Change Owner

I. Installation's EPA ID Number *(Mark "X" in the appropriate box)*

[ ] A. First Notification [ ] B. Subsequent Notification *(Complete item C)*

C. Installation's EPA ID Number: NYD000824565

II. Name of Installation *(Include company and specific site name)*

AMERICAN AMBULETTE

III. Location of Installation Requires Building Number or Latitude and Longitude for processing.

Street: 722 NEPPERHAM AVE

Street *(Continued)*:

City of Town: YONKERS | State: NY | Zip Code: 10703

COUNTY CODE | County Name: WESTCHESTER

IV. Installation Mailing Address

Street or P.O. Box: 722 NEPPERHAM AVE

City or Town: YONKERS | State: NY | Zip Code: 10703

V. Installation Contact *(Person to be contacted regarding waste activities at site)*

Name *(Last)*: WOOD | *(First)*: JOHN

Job Title: DIRECTOR | Phone Number *(Area Code and Number)*: 914-965-5040

VI. Installation Contact Address

A. Contract Address Location Mailing Other [ ] [ ] [ ]

B. Street or P.O. Box: 722 NEPPERHAM AVE

City or Town: YONKERS | State: NY | Zip Code: 10703

VII. Ownership PROPERTY

A. Name of Installation's Legal Owner: LENORE A. MINERVA

Street, P.O. Box, of Route Number: 722 NEPPERHAM AVE

City or Town: YONKERS | State: NY | Zip Code: 10703

Phone Number *(Area Code and Number)*: 914 965 5040

B. Land Type: P

C. Owner Type: P

D. Change of Owner Indicator: Yes [ ] No [ ]

(Date Changed) Month Day Year

From: Jack Hoyt, AWMD, EPA, Region 2, 290 Broadway, 22 Fl.
New York, NY 10007-1866. Tel; (212) 637 4106

address verified US Post office - (88)

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

Form Approved. OMB No. 2050-0028 Expires 9-3
GSA No. 0246-EP

ID - For Official Use Only

VIII. Type of Regulated Waste Activity *(Mark 'X' in the appropriate boxes; Refer to instructions)*

A. Hazardous Waste Activity

1. Generator (See instructions)
   - a. Greater than 1000kg/mo (2,200 lbs.)
   - b. 100 to 1000 kg/mo (200-2,200 lbs.)
   - c. Less than 100 kg/mo (220 lbs)
2. Transporter (Indicate Mode in boxes 1-5 below) → TRANSPORTER ONLY
   - a. For own waste only
   - b. For commercial purposes

   Mode of Transportation
   - 1. Air
   - 2. Rail
   - 3. Highway
   - 4. Water
   - 5. *Other - specify*
3. Treater, Storer, Disposer (at installation) Note: A permit is required for this activity; see instructions.
4. Hazardous Waste Fuel
   - a. Generator Marketing to Burner
   - b. Other Marketers
   - c. Boiler and/or Industrial Furnace
     - 1. Smelter Deferral
     - 2. Small Quantity Exemption

     Indicate Type of Combustion Device(s)
     - 1. Utility Boiler
     - 2. Industrial Boiler
     - 3. Industrial Furnace
5. Underground Injection Control

B. Used Oil Recycling Activities

1. Used Oil Fuel Marketer
   - a. Marketer Directs Shipment of Used Oil to Off-Specification Burner
   - b. Marketer Who First Claims the Used Oil Meets the Specifications
2. Used Oil Burner - Indicate Type(s) of Combustion Device(s)
   - a. Utility Boiler
   - b. Industrial Boiler
   - c. Industrial Furnace
3. Used Oil Transporter - Indicate Type(s) of Activity(ies)
   - a. Transporter
   - b. Transfer Facility
4. Used Oil Processor/Re-refiner - Indicate Type(s) of Activity(ies)
   - a. Process
   - b. Re-refine

IX. Description of Hazardous Wastes *(Use additional sheets if necessary)*

A. Characteristics of Nonlisted Hazardous Wastes. *(Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles; See 40 CFR Parts 261.20 - 261.24)*

1. Ignitable (D001)	2. Corrosive (D002)	3. Reactive (D003)	4. Toxicity Characteristic

(List specific EPA hazardous waste number(s) for the Toxicity characteristic contaminant(s))

B. Listed Hazardous Wastes. *(See 40 CFR 261.31 - 33; See instructions if you need to list more than 12 waste codes.)*

1	2	3	4	5	6
D001	X001	F003			
7	8	9	10	11	12

C. Other Wastes. *(State or other wastes requiring a handler to have an I.D. number; See instructions.)*

1	2	3	4	5	6

X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature ORIGINAL	Name and Official Title *(Type or print)*	Date Signed
[signature]	Lenore A. Minerva Pres	11/4/98

XI. Comments

Note: Mail completed form to the appropriate EPA Regional or State Office. *(See Section III of the booklet for addresses.)*

EPA Form 8700-12 (Rev. 11-30-93) Previous edition is obsolete.

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*****************************************************************************
*                  RCRIS: Notification Add/Update Screen 2                  *
*****************************************************************************
*EPA ID: NYD000824565     Other ID:                    Merge Send: Y        *
*Date Received(MMDDYY): 081880    Source( N/E/S ): N Non-Notifier Flag:     *
*Date Acknowledged (MMDDYYYY): 11071980    Send Acknowledgement:            *
*Name of Installation: REITER DRUM & BARREL CO INC                          *
*                    Installation Location Address                          *
*Streets: 722 NEPPERHAN AVE                                                 *
*City:    YONKERS                    State: NY    Zip: 10703               *
*County Code: 119      County Name: WESTCHESTER                             *
* Installation Mailing Address (Type 'SAME' if same as Above)               *
*Streets: 886 NORTH ST                                                      *
*City:    WHITE PLAINS               State: NY    Zip: 10605               *
*                      Contact Information                                  *
*  Last Name      First Name        Title        Phone  Address(M,L,O)*
* REITER          JERRY           PRESIDENT      7147616747    L           *
*Streets: 722 NEPPERHAN AVE                                                 *
*City:    YONKERS                    State: NY    Zip: 10703               *
*Land Type:                                                                 *
*****************************************************************************
*                  RCRIS: Notification Add/Update Screen 3                  *
*****************************************************************************
* EPA ID:     NYD000824565   Other ID:                Source: N             *
*                                                                           *
* Owner Sequence Number:     1                                              *
* Ownership:  REITER DRUM & BARREL CO INC              Type of Owner: P     *
*                                                                           *
*                                                                           *
*                     Address of Owner                                      *
*                                                                           *
*     Street: 886 NORTH ST                                                  *
*     City:   WHITE PLAINS              State: NY  Zip Code  10605          *
*     Phone:  9147616747                                                    *
*                                                                           *
* Current/Previous Indicator:  CO   Change Date(MMDDYY):                    *
*                                                                           *
*                                                                           *
*                                                                           *
*****************************************************************************
* Enter-Continue      F3-Exit      F4-Exit Group Process   F5-Curr. Owner  *
* F6-Prev. Owner      F8-Help      F9-First                F10-Next        *
*****************************************************************************
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Gen = N/R
+ Transporter
WC = X
F003, F005, F006
K002, K005
K049

They are no longer at that address (Reiter & Drum)