



State of Ohio Environmental Protection Agency

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September 28, 2009

Ms. Susan J. Sevy
Environmental Compliance Manager
Clean Harbors Recycling Services of Ohio, LLC
Hebron Recycle Center
581 Milliken Drive SE
Hebron, Ohio 43025

Re: **Clean Harbors Recycling Services of Ohio, LLC**
Hebron Recycle Center
LQG/TSD
U.S. EPA ID#: OHD980587364/ Ohio ID#: 01-45-0518
Licking County, CDO
NOV

Dear Ms. Sevy:

Thank you for accompanying Randy Sheldon and me during Ohio EPA's inspection of Clean Harbors' Recycle Center in Hebron, Ohio, on September 15 and 16, 2009. We inspected the Hebron Recycle Center (Facility) to determine its compliance with Ohio's hazardous waste laws as found in Chapter 3734 of the Ohio Revised Code (ORC) and Chapter 3745 of the Ohio Administrative Code (OAC). The Facility was also inspected for compliance with the terms and conditions of its hazardous waste installation and operation permit renewal issued on June 17, 2005, as modified.

At the time of the inspection, Clean Harbors was operating the Hebron Recycle Center as a permitted hazardous waste treatment and storage facility. The company also operates as a large quantity generator (LQG) of hazardous waste and a universal waste handler at this location. During the inspection, we found the following violations of Ohio's hazardous waste rules. In order to correct these violations, you must do the following and send me the required information **within 30 days** of your receipt of this letter:

1. **OAC Rule 3745-50-58(A), Failure to operate in accordance with the hazardous waste permit application Appendix 3-1 (Waste Analysis Plan):** Page 3-1-9 of Clean Harbors' Waste Analysis Plan, Appendix 3-1 of the hazardous waste permit application, states that "Waste containers accepted at the facility must be properly labeled and marked."

Ted Strickland, Governor
Lee Fisher, Lieutenant Governor
Chris Korteski, Director

Clean Harbors was not operating in accordance with Appendix 3-1 of its hazardous wastes permit application (Waste Analysis Plan). On September 15, 2009, we noted that containers of waste perc that were received from Indiana conditionally exempt small quantity generators (CESQGs) via Bee Environmental Management were not labeled as Hazardous Waste. Instead, they were labeled as Non-RCRA Regulated Waste and/or Non Hazardous Waste. Although CESQGs are subject to the reduced requirements in OAC Rule 3745-51-05 (e.g., do not need to use a manifest, no accumulation time limit), hazardous waste is still hazardous waste and must be labeled and managed as such once it is accepted at the Hebron Recycle Center. It is not excluded from the definition of waste or hazardous waste.

- To return to compliance, Clean Harbors must label these drums as Hazardous Waste and submit photographic documentation to me **within 30 days** of your receipt of this letter. Please note that this waste is hazardous waste and should also be included in your Hazardous Waste Annual Report.
- 2. **OAC Rule 3745-54-76, Unmanifested Waste Report:** If a facility accepts for treatment, storage, or disposal any hazardous waste from an off-site source without an accompanying manifest, then the owner or operator must prepare and submit a single copy of an "Unmanifested Waste Report" to the director within 15 days after receiving the waste. The report must include the information specified in OAC Rule 3745-54-76.

Clean Harbors received one drum of waste methylene chloride (F002) from Johnson Matthey that was not listed as hazardous waste on a manifest (Load 1870-D). Although Clean Harbors identified the waste as unmanifested hazardous waste and requested new paperwork, Ohio EPA did not receive an Unmanifested Waste Report for the drum.

- To demonstrate compliance with this rule, Clean Harbors must send a description of what steps the facility will take in the future to comply with the Unmanifested Waste Report requirements in OAC Rule 3745-54-76. As discussed during the inspection, please note that you can submit these reports to me electronically.

General Comments

1. During the inspection, we discussed modifying the permit application to reflect the equipment changes for Tank Farm 1. This modification would be classified as a Class 1 permit modification per the Appendix to OAC Rule 3745-50-51, Item B.3 – equipment replacement or upgrading with functionally equivalent components (e.g., pipes, valves, pumps, conveyors, controls).

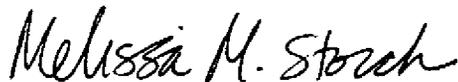
Ms. Susan J. Sevy
Clean Harbors Recycling Services of Ohio, LLC
Hebron Recycle Center
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2. On September 15, 2009, we noted that the secondary containment area for Tank Farm 6 had some cracks in it. Clean Harbors mentioned that a work order had been issued to repair the area. We will revisit this issue during our next inspection.

The Division of Hazardous Waste Management has created an electronic news service to provide you with updates related to hazardous waste activities in Ohio. You can find more information and sign up for this free service at the following Web link http://ohioepa.custhelp.com/cgi-bin/ohioepa.cfg/php/enduser/doc_serve.php?2=subscriptionpage.

Enclosed you will find a copy of the checklists that we completed as a result of the inspection. Should you have any questions, please feel free to call me at (614) 728-3887. You can find copies of the rules and other information on the division's web page at: <http://www.epa.ohio.gov/dhwm/>.

Sincerely,



Melissa M. Storch
Environmental Specialist
Division of Hazardous Waste Management
Central District Office

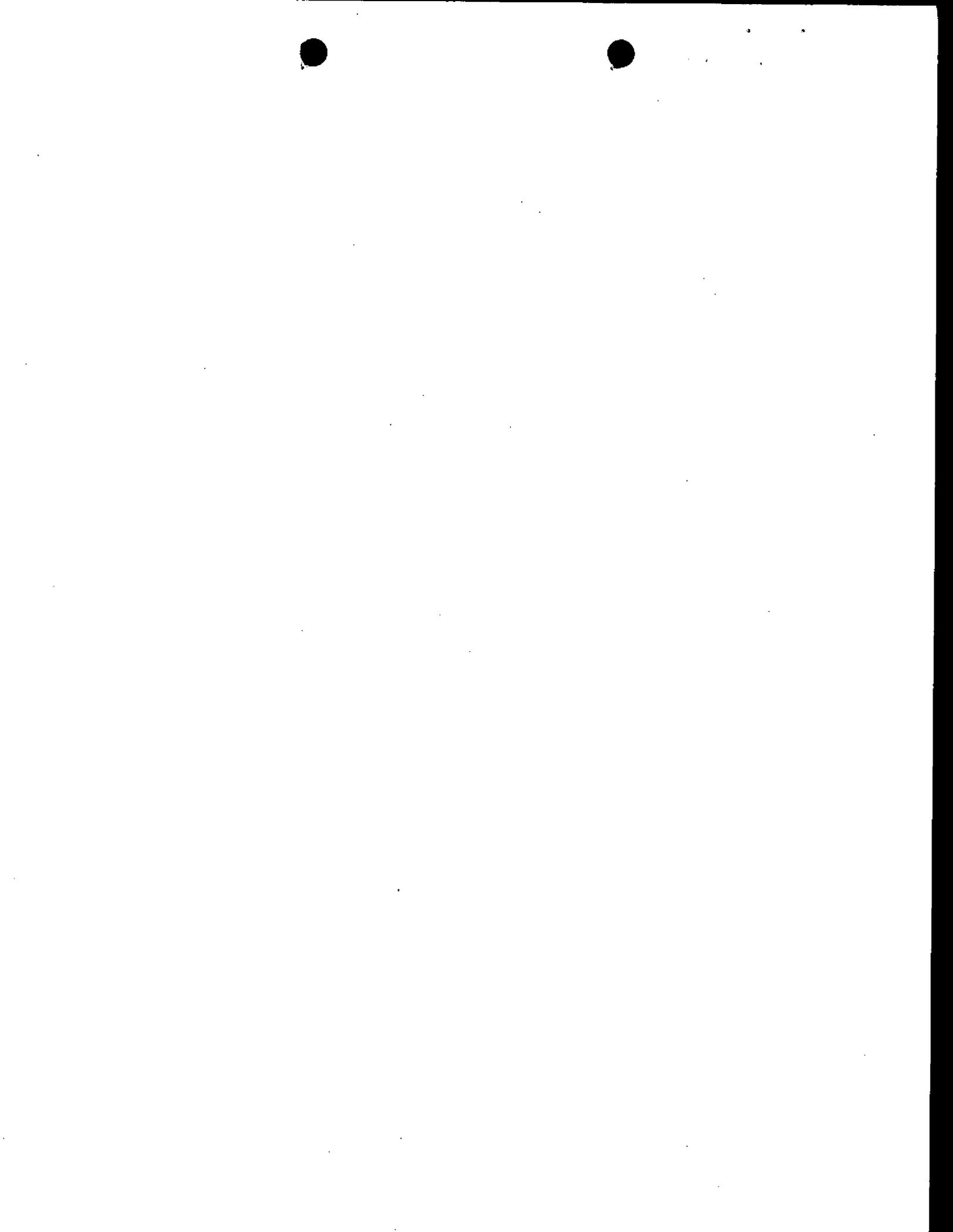
Enclosure

c: Kristina Durnell, DHWM/CO
Randy Sheldon, DHWM/CDO
CDO File

MMS/nsm CH.NOVIletter.Sep109

NOTICE:

Ohio EPA's failure to list specific deficiencies or violations in this letter does not relieve your company from having to comply with applicable regulations.



Ohio Environmental Protection Agency
**RCRA SUBTITLE C SITE
 IDENTIFICATION/VERIFICATION FORM**

For Ohio EPA use only

E-mail this completed form to kristina.durnell@epa.state.oh.us
 or mail it to Kristina Durnell, Central Office

Site EPA ID No. Site Name Site Location Information Site Land Type (check only one) NAICS code(s) www.census.gov/epcd/www/naics.html	EPA ID Number: OHD980587364 Name: Clean Harbors Recycling Services of Ohio, LLC Website: www.cleanharbors.com (Optional)
	Street Address: 581 Milliken Drive SE City, Town, or Village: Hebron County Name: Licking State: OH Zip Code: 43025
Private <input checked="" type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other <input type="checkbox"/>	NAICS code(s): 562920
Facility Representative: Additional names can be recorded in number 12 Only provide address information if it is different than the site address	First Name: Susan MI: J Last Name: Sevy Phone Number: 216.857.2227 (mobile) Phone Number Extension: E-Mail Address: sevys@cleanharbors.com Fax Number: 740.928.1347 Fax Number Extension: Street or P.O. Box: City, Town or Village: State: Zip Code:
Legal Owner And Operator of the Site. List Additional Owners and/or Operators in the Comment Section or on another copy of this form page	Name of Site's Legal Owner: Clean Harbors Recycling Services of Ohio, LLC Date Became Owner (mm/dd/yyyy): 3/21/2008 Owner Type: Private <input checked="" type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other <input type="checkbox"/> Street or P.O. Box: 581 Milliken Drive SE City, Town or Village: Hebron State: OH Owner Phone #: 740.929.3532 Country: USA Zip Code: 43025 Name of Site's Operator: Clean Harbors Recycling Services of Ohio, LLC Date Became Operator (mm/dd/yyyy): 3/21/2008 Operator Type: Private <input checked="" type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other <input type="checkbox"/> Street or P.O. Box: 581 Milliken Drive SE City, Town or Village: Hebron State: OH Operator Phone #: 740.929.3532 United States Zip Code: 43025

VIOLATIONS CITED? Yes No

TYPE OF HANDLER- A MINIMUM OF ONE BOX MUST BE CHECKED

<input type="checkbox"/> Not a HW Generator	<input type="checkbox"/> UNKNOWN: Cited for violation of 3745-52-11	<input checked="" type="checkbox"/> Large Quantity Generator (LQG)
		<input type="checkbox"/> Small Quantity Generator (SQG)
		<input type="checkbox"/> Conditionally Exempt Small Quantity Generator
		<input checked="" type="checkbox"/> U.S. Importer of Hazardous Waste
		<input type="checkbox"/> Mixed Waste (Hazardous and Radioactive) Generator

TYPE OF REGULATED WASTE ACTIVITY (MARK "X" IN ALL OF THE APPROPRIATE BOXES)	
<input checked="" type="checkbox"/> Recycler of Hazardous Waste	<input type="checkbox"/> Exempt Boiler and/or Industrial Furnace
<input type="checkbox"/> Underground Injection Control Facility	<input type="checkbox"/> Small Quantity On-Site Burner Exemption
<input checked="" type="checkbox"/> Hazardous Waste Transporter	<input type="checkbox"/> Smelting, Melting, Refining Furnace Exemption
<input checked="" type="checkbox"/> Treater, Storer or Disposer of Hazardous Waste	

UNIVERSAL WASTE ACTIVITIES (INDICATE TYPES OF UNIVERSAL WASTE MANAGED (CHECK ALL BOXES THAT APPLY))	
<input checked="" type="checkbox"/> Small Quantity Handler of Universal Waste	<input type="checkbox"/> Destination Facility for Universal Waste
<input type="checkbox"/> Large Quantity Handler of Universal Waste (accumulates 5,000 kg. or more)	

CHECK ALL BOXES BELOW THAT APPLY FOR THE TYPES OF UNIVERSAL WASTE THE FACILITY MANAGES	
<input type="checkbox"/> Batteries	
<input type="checkbox"/> Pesticides	
<input type="checkbox"/> Mercury containing equipment	
<input checked="" type="checkbox"/> Lamps	

USED OIL ACTIVITIES (INDICATE TYPE(S) OF ACTIVITY(S))	
<input checked="" type="checkbox"/> Used Oil Generator	
<input checked="" type="checkbox"/> Used Oil Transporter	
<input type="checkbox"/> Used Oil Transfer Facility	
<input type="checkbox"/> Used Oil Processor	
<input type="checkbox"/> Used Oil Re-refiner	
<input type="checkbox"/> Off-Specification Used Oil Burner	
<input type="checkbox"/> Used Oil Fuel Marketer Who Directs Shipment of Off-Spec. Oil	
<input type="checkbox"/> Used Oil Fuel Marketer to Off-Specification Used Oil Burner	

Waste Codes for Federally Regulated Hazardous Wastes: Please list the codes for the federally regulated hazardous waste handled at the site. List them in the order they are presented in the regulations (e.g. D001, D003, F007, U112). Use an additional page if more space is needed. If there are more than 7 waste codes and they are the same as listed in the most recent RCRAInfo source record, you do not need to list them all. Instead just indicate the date of the most recent source record.

see Part A

COMMENTS: USE THIS AREA TO DESCRIBE WHETHER THE INSPECTION WAS ANNOUNCED, WHETHER THE WASTE IS STORED IN TANKS OR CONTAINERS, ETC.			
Announced	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Additional Facility Representatives: Monte Londot, Facility General Manager
Tanks	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Other Comments:
Containers	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	

Name of Inspector(s)	Name of Inspector(s)	Date of Inspection/Time (mm/dd/yyyy) (hh:mm)
Melissa Storch, DHWM/CDO	Randy Sheldon, DHWM/CDO	9/15/2009 10:00am
		9/16/2009 10:00am

OPTIONAL 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 of Owner, Operator, or an Authorized Representative	Name and Title (Print)	Date (mm/dd/yyyy)

PROCESS DESCRIPTION SECTION

Give a general process description (include all processes at the facility)

At the Hebron Recycle Center, Clean Harbors Recycling Services of Ohio, LLC (Clean Harbors) recycles a variety of spent solvents and some solvent-contaminated wastewaters for beneficial reuse/recovery. Clean Harbors stores these solvents and wastewaters in tanks and containers prior to recycling. Clean Harbors also performs fuel blending in 14 permitted treatment tanks. Clean Harbors continues to receive mostly dry-cleaning wastes to process and plans to eventually phase out its current wastewater recycling business.

The Hebron Recycle Center is a permitted treatment, storage, and disposal (TSD) facility; Ohio EPA issued a renewal hazardous waste installation and operation permit for the storage of off-site hazardous waste on June 17, 2005. A Class 3 permit modification was approved on January 5, 2007, which increased the container and tank storage capacity by 818,440 gallons, permitted the facility to receive an additional 25 waste codes, and permitted 2 tanks for treatment (fuel blending). An additional Class 2 permit modification was approved on July 11, 2008, which permitted 12 additional tanks for fuel blending.

Solvent recycling processes include separation/reclamation in two thin film evaporators (LUWAs) and one distillation column, and reclamation in one washex pot still and four cookers. The company receives mostly drycleaning wastes, as well as solvents from other industrial customers. Most of this waste is perc, but the facility also processes mineral spirits, and other solvents, such as TCE and methylene chloride. The company receives shipments of hazardous waste in containers of various types and sizes and in bulk via tanker trucks. Additionally, the facility receives a few hazardous wastewaters from other customers for reclamation. Clean Harbors also blends certain waste solvent/petroleum materials into fuels, which are transported off site and sold as industrial furnace fuels. Finally, the company processes scrap plastics (plastic drums), which are shredded, washed, chipped, and then resold to a plastics manufacturer.

Dry cleaning wastes are processed in the "blues room." The filters are processed in the shredder system prior to being processed in the cookers, and the other drycleaner wastes (e.g., bottoms) are dumped into the jacuzzi tank to separate out the solids, which are then processed in the cookers to recover the solvent by evaporation. The liquid is pumped to a storage tank and eventually processed in the cookers to recover the solvent by evaporation. The solvent distillate and bottoms are fed through a column until Clean Harbors recovers the product (e.g., industrial perc has a purity specification of 98.5% and the dry cleaning perc specification is 99.5%). The solids from the cookers are discharged to an auger system. Metals are separated out and sent to a metal reclaimer (Wooster Iron and Metal). The other solids are accumulated in a <90-day container (i.e., dump trailer) located near the regenerative fume oxidizer, and then they are exported to a landfill in Ontario, Canada, for disposal.

The hazardous wastewaters are sampled, filtered, and then fed to the thin film evaporators where any residual solvents are recovered. The water extracted in the process is treated in the on-site wastewater treatment plant, analyzed for metals, and then discharged to the publicly owned treatment works. The recovered solvent is blended into fuel.

Several other waste streams are also generated by Clean Harbors, but much of this waste can be reintroduced into the recycling process (e.g., perc trash, wastewater treatment plant sludges, contaminated wipers, filter bags, laboratory and sample waste, media from the air stripper, and

some perc solids). Clean Harbors has various satellite accumulation areas around the facility for accumulation of these wastes prior to reintroducing them into the recycling process. There is a 55-gallon drum for the accumulation of lab sample waste, as well as other satellite areas throughout the lab for wastes from each lab analysis/procedure. Also, there is a satellite accumulation drum for each of the four cookers to collect perc waste from the recycling process. Finally, there is a satellite accumulation drum in the maintenance building for the accumulation of used rags and wipers.

Used oil is generated through equipment and fork truck maintenance, and a continued use solvent parts cleaner is available in the maintenance building. The facility also produces a minimal volume of waste fluorescent tubes as a result of burned out bulb replacement. These spent lamps are accumulated in the maintenance building before being shipped off site as universal waste.

A regenerative fume oxidizer (RFO) system treats organic vapors from the majority of the facility.

Clean Harbors is also performing site-wide corrective action because a significant quantity of solvent was released on site due to a fire at the facility in 1985 (when the facility was owned by Safety-Kleen). In addition, ground water contamination due to releases from a hazardous waste underground storage tank (UST) unit was documented when these tanks were closed in the late 1980s, so the unit was closed as a landfill. The company is subject to post-closure care requirements and ground water corrective action for the releases from the UST unit. The company is operating a ground water pump-and-treat system, as well as a water and soil vapor extraction system to treat the contaminated soil and ground water, and semi-annual ground water monitoring and reporting is required by the Part B permit.

WASTE ACTIVITIES AND P2 SUMMARY SECTION

For each of the processes listed above that generate a waste give the following information: (1) name of process generating waste, (2) name or description of waste generated (e.g. sludge, solvent, ash, used oil, spent lamps, etc.), (3) EPA waste codes, if applicable, (4) quantity generated per month, (5) type of accumulation (container, tank, etc.) (6) waste accumulation location in facility, (7) type of on-site treatment (if used), (8) name of off-site management facility and type of waste management activity occurring there, (9) Current P2 activities, and (10) P2 opportunities.

In 2008, the Hebron Recycle Center (HRC) received and processed approximately 8,792 tons of hazardous waste for solvent recovery and 707 tons of hazardous waste for fuel blending (based on the 2008 Annual Report).

Much of the hazardous waste generated in the reclamation processes is accumulated and managed as hazardous waste then reintroduced into the reclamation process. This includes wastewater treatment plant sludge, contaminated wipers, filter bags, laboratory and sample waste, air stripper media, and some perc solids. These wastes are collected in hoppers or other small containers prior to being recycled. Several satellite accumulation areas are present around the facility for accumulation of these wastes.

Finer solids (thermal set bottoms, ground perc filters, perc muck, other processing wastes) are also generated from solvent recycling activities. These "perc fines" are collected in roll-off boxes and shipped to Clean Harbors Canada, LTD in Ontario, Canada where they are landfilled. Waste codes that apply to this waste stream include D004, D006, D007, D008, D009, D011,

D018, D035, D039, D040, F001 and F002. In 2008, the HRC shipped approximately 920,000 pounds of this waste off site. The HRC has evaluated waste reduction options for this waste stream and has concluded that the generation of this waste stream is associated entirely with the volume of solvent bearing wastes received that are contained in a solid or sludge matrix.

Still bottoms are another hazardous waste generated in the solvent recycling process. This waste stream currently carries waste codes D001, D006, D008, D035, D039, D040, F001, F002, F003, and F005. In 2008, the facility shipped approximately 1.5 million pounds of this waste off site to facilities in Illinois and Kentucky for fuel blending. With regard to P2, in order to maximize the recycling of solvent wastes, this material is shipped to off-site facilities for energy recovery. The Hebron facility maximizes the solvent recovery rate through process monitoring and controls.

The HRC is also permitted to blend waste received from off site into fuel. In 2008, Clean Harbors processed 707 tons of hazardous waste for fuel blending. Flammable liquids/fuel blends are currently being sent to Clean Harbors El Dorado for energy recovery or incineration.

Clean Harbors also sends flammable waste liquids to its facility in Ontario, Canada, for incineration. This waste stream carries waste codes that include D001, D004, D006, D008, D009, and D011.

In 2008, the HRC generated approximately 1.3 million pounds of wastewater from solvent recycling activities. This wastewater is biologically treated in the on-site wastewater treatment plant before being discharged to Hebron's publicly owned treatment works. Waste codes applicable to this waste stream include D001, D004, D005, D006, D007, D008, D009, D010, D011, D018, D019, D021, D022, D023, D024, D025, D026, D027, D028, D029, D030, D032, D033, D034, D035, D036, D037, D038, D039, D040, D041, D042, D043, F001, F002, F003, F004, and F005. The wastewater treatment sludge is reintroduced into the recycling process.

Since our last inspection, Clean Harbors also sent waste fuels to Green Castle WDF (IND006419212) for energy recovery and flammable liquids to Clean Harbors' Chicago facility for solvent recovery.

Clean Harbors is also a small quantity handler of universal waste lamps. The facility produces a minimal volume of waste fluorescent tubes as a result of burned out bulb replacement. Four-foot and eight-foot bulbs are being sent as universal waste to Clean Harbors El Dorado, while mercury vapor lamps are sent to Spring Grove and then onto USA Lamp for recycling. As part of the facility's pollution prevention activities, the facility is using longer life bulbs and energy efficient ballasts. Additionally, they have started to use less hazardous bulbs (i.e., green tips). Universal waste batteries are being shipped to Toxco, but none were on site at the time of the inspection. The facility also generates used oil, which is reintroduced into the process. (No used oil was on site at the time of the inspection).

Metal waste in the recycling process is magnetically separated from the other solids, is collected in a dump truck, and sent to a metal reclaimer. Unusable empty metal drums are shipped to Industrial Container Service (formerly Queen City Barrel), while good plastic drums are shipped to MCF for reuse.

Parts washer solvent is in Safety-Kleen's continued use program, and the unit is serviced by the Groveport branch.

Other non-hazardous wastes generated at the HRC include plastic, wooden pallets, and cardboard. The plastic is shredded and washed prior to shipment to a plastic re-processor in Centerburg, Ohio. All wash water is treated on site in the facility wastewater treatment plant. Wooden pallets received with incoming containers are collected by a local company that creates mulch from scrap wood. Cardboard used for packages received by the facility is collected and shipped to a recycler.

Additional P2 remarks and information:

Per the facility's 2007 Waste Minimization and Pollution Prevention Program Report, a few of the P2 measures currently in place at the Hebron Recycle Center include:

- Good housekeeping practices to limit releases from container and tank storage.
- Operation of regenerative fume oxidizer (RFO) to control air emissions that were previously uncontrolled.
- Equipping tanks with pressure/vacuum vent to minimize volatile organic emissions due to diurnal temperature fluctuations.
- Keeping containers closed to minimize the release of VOCs through evaporation.
- Re-use of process wastewater to clean empty dry cleaning waste containers.
- Shredding of plastic drums and other plastics on-site for reuse by plastics manufacturers.
- Use of shredded office paper in the cookers to improve solids handling.
- Shipment of fluorescent bulbs and batteries to recyclers.

Per the facility's permit, the next waste minimization report is due in January 2010.

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GENERAL PERMIT COMPLIANCE AND ACTIVITIES	
1.	Has the expiration date of the permit passed? If so: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>

	a.	Is the permittee continuing any activity regulated by the permit after the expiration date of the permit?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	b.	Has the facility submitted an application for a permit renewal to the director no later than 180 days prior to the expiration date of the permit? [Condition A.6]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
2.		Has the permittee submitted the annual permit fee, payable to "Treasurer, State of Ohio," to Ohio EPA on or before the anniversary of the date of issuance during the term of the permit? [Condition A.25]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
3.		Is the permittee conducting any hazardous waste management activities (not otherwise exempt by law) which are not authorized by the permit? [Conditions A.1(b) and A.5]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
4.		Have any provisions of the permit been identified as invalid? [Condition A.4]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
5.		Has the permittee identified any instances of noncompliance with the permit, ORC Chapter 3734, or the rules adopted thereunder, which may endanger human health or the environment? If so:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	a.	Did the permittee immediately report the following to Ohio EPA's Emergency Response Unit? [Condition A.20]	
	i.	Information concerning a release of any hazardous waste that may cause an endangerment to public drinking water supplies; and	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	ii.	Information concerning a release of hazardous waste, fire or explosion at the facility which could threaten human health or the environment outside the facility including a description of:	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
		A. Name, address and telephone number of the owner/operator?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
		B. Name, address and telephone number of the facility?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
		C. Name and quantity of material(s) involved?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
		D. The extent of injuries, if any?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
		E. An assessment of the actual or potential hazard to the environment and human health outside the facility?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
		F. Estimated quantity and disposition of recovered material that resulted from the incident?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
6.		Did the permittee provide a written report to Ohio EPA's Emergency Response Unit and DHWM within 5 days of becoming aware of the circumstances reported in Questions No. 5? If so, did the report contain: [Condition A.21]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	a.	A description of the noncompliance and its cause (including exact dates and times)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	b.	Whether the noncompliance has been corrected and if not, the anticipated time noncompliance is expected to continue? and	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	c.	Steps taken or planned to minimize the impact on the environment and to reduce, eliminate and prevent recurrence of the noncompliance?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
NOTE: The permittee need not comply with the five day written report requirement if the director, upon good cause shown by the permittee, waives that requirement and the permittee submits a written report within 15 days of the time the permittee became aware of the circumstances. [Condition A.21].			
7.		Has the permittee identified other instances of noncompliance not provided for in Condition A.22? If so:	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	a.	Did the permittee report these instances to Ohio EPA, DHWM? [Condition A.22]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

	b.	Do the reports provided contain the information set forth in Condition A.20? [Condition A.20]	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>	<input checked="" type="checkbox"/>
	c.	Has the permittee taken all steps necessary to minimize releases to the environment or prevent any adverse impact on human health or the environment? [Condition A.8]	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>	<input checked="" type="checkbox"/>
8.		Has the permittee planned any changes in the permitted facility or activity which may result in noncompliance with the conditions of the permit?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>	<input type="checkbox"/>
	a.	If so, has the permittee provided Ohio EPA with advance notice of such changes? [Condition A.17]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
NOTE: Such notification does not waive the permittee's duty to comply with the permit. [Condition A.17]						
9.		Has the permittee become aware that it failed to submit any relevant facts in the permit or issuance proceedings or that it submitted incorrect or incomplete information in permit issuance proceedings or other submissions to Ohio EPA? If so:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>	<input type="checkbox"/>
	a.	Has the permittee properly submitted such facts or corrected information to the appropriate entity? [Condition A.24]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
PERMIT MODIFICATION, REVISION, REVOCATION						
10.		Has the permittee filed a request for a permit modification, revision or revocation since permit issuance? [Condition A.2]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	<input type="checkbox"/>
11.		Has the permit, been transferred to a new owner/operator? If so:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	<input type="checkbox"/>
	a.	Has the transfer been conducted in accordance with ORC Chapter 3734. and the rules adopted thereunder which includes the permittee notifying the new owner in writing of the requirements of ORC Chapter 3734. and the rules adopted thereunder and the applicable Ohio hazardous waste rules before transferring ownership? [Condition A.18]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	<input type="checkbox"/>
12.		Has the permittee submitted reports in any compliance schedule of the permit to Ohio EPA no later than 14 days following each scheduled date, unless otherwise specified? [Condition A.19]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	<input type="checkbox"/>
13.		Has the permittee furnished relevant information which Ohio EPA has requested to determine whether cause exists for modifying, revising, revoking or suspending the permit, to determine compliance with the permit? [Condition A.10]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
14.		Has the facility furnished Ohio EPA, upon request, with copies of records required to be kept by the permit? [Condition A.10]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	<input type="checkbox"/>
15.		Is the permittee maintaining records of all data used to complete the application and any amendments, revisions or modifications to the application? [Condition A.14c]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	<input type="checkbox"/>
16.		Is the permittee retaining a complete copy of the approved application on-site? [Condition A.14c]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	<input type="checkbox"/>
17.		Is the permittee planning any physical alterations or additions to any permitted portions of the facility? If so:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>	<input type="checkbox"/>
	a.	Has the permittee given notice to the director of such alterations/additions? [Condition A.15]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
SITE ENTRY - AVAILABILITY OF RECORDS						
18.		As specified in Condition A.11, has the permittee allowed the director or an authorized representative, upon proper identification to:				
	a.	Enter at reasonable times upon the premises where a regulated activity is located or where records are kept under the conditions of the permit?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	<input type="checkbox"/>

	b.	Have access to and copy, at reasonable times, any records required to be kept under the conditions of the permit?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	c.	Inspect, at any time, facilities, equipment (including control and monitoring equipment), practices or other operations regulated under the conditions of the permit?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	d.	Sample, document, photograph or monitor, at reasonable times, any substances or parameter at the location of the facility to assure compliance with the permit or as otherwise authorized by ORC Chapter 3734. and the rules adopted thereunder?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

INSPECTION ITEMS FROM PART B APPLICATION

NOTE: The inspector or permit writer may add questions pertaining to the permittee's application, as appropriate.
Clean Harbors was not operating in accordance with Appendix 3-1 of its Part B permit application (Waste Analysis Plan). Waste containers accepted at the facility must be properly labeled and marked (page 3-1-9). On September 15, 2009, containers of waste perc that were received from Indiana CESQGs via Bee Environmental were not labeled as Hazardous Waste. Instead, they were labeled as Non-RCRA Regulated Waste and/or Non Hazardous Waste.

RECORDKEEPING/OPERATING REQUIREMENTS

OPERATING RECORD

19.		In accordance with OAC rules 3745-54-73 and 3745-54-74 and Condition B.22 of the permit, does the permittee maintain an Operating Record which contains the following information:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	a.	A description of the quantity of each hazardous waste and the method(s) and date(s) of its treatment or storage?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	b.	The location of each hazardous waste and quantity at each location including cross-reference to specific manifest numbers?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	c.	Records and results of required waste analysis?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	d.	Summary reports and details of all incidents that required implementation of the contingency plan?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
	e.	Records and results of required inspections?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	f.	Documents required to be maintained by LDR requirements of OAC Chapter 3745-270?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	g.	Monitoring, testing, or analytical data, and corrective action where required, from groundwater monitoring and required monitoring of surface impoundments, landfills, waste piles and land treatment units? [3745-54-73(B)(6)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	h.	For disposal facilities , location and quantity of each hazardous waste record on a facility map and cross-references to manifest document numbers? [3745-54-73(B)(2)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

DOCUMENTS TO BE MAINTAINED AT FACILITY

20.		In accordance with Condition A.28 of the permit, is the permittee maintaining the following documents at the facility:			
	a.	Waste analysis plan in accordance with OAC rule 3745-54-13?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	b.	Contingency plan in accordance with OAC rule 3745-54-53?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	c.	Closure plan in accordance with OAC rule 3745-55-12?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

	d.	Cost estimate for facility closure in accordance with OAC rule 3745-55-42? (Estimate only - adequacy will be evaluated by CO financial assurance personnel) [Condition B.36]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	e.	Personnel training plan and records required by OAC rule 3745-54-16(C)? [Condition B.6]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	f.	Inspection schedules developed in accordance with OAC rules 3745-54-15, 3745-55-74 and 3745-55-95? [Condition B.5]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	g.	Operating record in accordance with OAC rule 3745-54-73? [Condition B.22]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	h.	Post-closure plan, as required by OAC rule 3745-55-18(A)? [Condition A.28(a)(viii)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	i.	Annually-adjusted cost estimate for facility closure and post-closure, as required by OAC rules 3745-55-42 and 3745-55-44? [Condition A.28(a)(ix)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
21.		Is the permittee maintaining copies of all inspection logs at the facility for a period of at least 3 years from date of inspection? [Condition B.5]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
22.		Have any of the documents in Question No. 20 been revised? [Condition A.15] If so:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	a.	Has the permittee submitted the revisions to Ohio EPA in accordance with OAC rule 3745-50-51?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	b.	Have all requirements of OAC rule 3745-50-51 been met, including, where required, Ohio EPA approval?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
ANNUAL REPORT REQUIREMENT					
23.		Is the permittee complying with annual report requirements set forth in OAC rule 3745-54-75 and the additional report requirements set forth in OAC rule 3745-54-77? [Condition B.25]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
SAMPLING/MONITORING RECORDKEEPING REQUIREMENTS					
24.		In compliance with Condition 12(b) of the permit, do the permittee's records of monitoring information specify the:			
	a.	Date(s), exact place(s), time(s) and method(s) of sampling or measurement?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	b.	Individual(s) who performed the sampling or measurement?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	c.	Date(s) analyses were performed?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	d.	Individual(s) who performed the analyses?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	e.	Analytical technique(s) or method(s) used?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	f.	Results of such analyses?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
25.		Have the methods used to obtain a representative sample of the waste to be analyzed included the appropriate SW-846 method or an equivalent method specified in the approved waste analysis plan? [Condition 12(a)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
26.		In accordance with Condition A.14 of the permit, is the permittee retaining records of monitoring information as required by the permit for at least 3 years from the date of sampling, including:			
	a.	All calibration and maintenance records?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
27.		Has Ohio EPA requested submittal of any reports or other information from	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

	the permittee? If so:	
a.	Have the submittals been signed and certified according to OAC rule 3745-50-42? [Condition A.13(c)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
INSPECTION ITEMS FROM THE PART B APPLICATION		
<i>NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.</i>		
WASTE MINIMIZATION REQUIREMENTS		
28.	Does the permittee certify at least once every year that a program is in place to reduce the volume and toxicity of hazardous waste generated in accordance with Condition A.29(a) and OAC rule 3745-54-73?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
29.	Did the permittee submit the waste minimization report to Ohio EPA, Office of Compliance Assistance & Pollution Prevention and Central District Office within 180 days of journalization of this permit and updates biennially thereafter? [Condition A.29] The next report is due in January 2010.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
30.	Has the permittee reduced the amount of waste (hazardous waste, solid waste, air emission, waste water discharges, etc.) this year generated at their facility by implementing pollution prevention/waste minimization? Since the Hebron Recycle Center is a TSD that receives and recycles solvents from different customers, much of the waste that is generated from the recycling process is associated entirely with the amount of solvent bearing wastes received at the facility for reclamation (i.e., related to business).	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	If so, what amount of waste has the permittee reduced this year?	
31.	Has the permittee's company saved much money this year by implementing pollution prevention (reducing raw material usage, disposal fees, energy savings, etc.)? See above and the "Waste Activities and P2 Summary Section" for additional discussion.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	If so, how much money has the permittee's company saved this year?	
<i>NOTE: If this facility is inspected two times a year, the information obtained in questions 3 & 4 only needs to be collected one time for the calendar year.</i>		
GROUND WATER MONITORING		
32.	Has the permittee conducted semi-annual sampling of their monitoring wells? See the attached groundwater monitoring checklist.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
33.	Have they reported the results in the Annual Report to the director by March 1 st as required by Condition B.25?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
INSPECTION ITEMS FROM THE PART B APPLICATION		
<i>NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.</i>		
WASTE ACCEPTANCE AND GENERATION		
34.	Is the permittee storing any containers of hazardous waste received from any off-site source that permittee is not permitted to store? [Condition A.1.]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
35.	Has the permittee arranged to receive hazardous waste from a foreign or off-site source that the permittee is not permitted to store? [Condition A.1.]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
36.	Has the permittee notified the director at least four weeks prior to the date the permittee expects to receive hazardous waste from a foreign source, as required by OAC rule 3745-54-12(A)? [Condition B.2(a)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
INSPECTION ITEMS FROM THE PART B APPLICATION		

NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.

36a.	Has the permittee accepted more than 162,129 tons of hazardous waste in any one calendar year from off-site sources? This is a facility-wide limitation and includes all units. [Condition B.1(b)]	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
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OFF-SITE SHIPMENTS/MANIFEST REQUIREMENTS

37.	Is the permittee complying with the following manifest requirements set forth in OAC Chapter 3745-52 and OAC rules 3745-54-70, 3745-54-71, 3745-54-72 and 3745-54-76: [Condition B.24]			
a.	All hazardous wastes shipped off-site have been accompanied by a completed manifest, U.S. EPA Form 8700-22 and, if necessary, U.S. EPA Form 8700-22A in compliance with OAC rule 3745-52-20(A)?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
b.	The manifest form used contains all information required by OAC rule 3745-52-20 and the minimum number of copies required by OAC rule 3745-52-22?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
c.	The permittee has designated at least one permitted disposal facility and has/will designate an alternate facility or instructions to return waste in compliance with OAC rule 3745-52-20(B)(C)(D)?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
d.	Prepared manifests have been signed by the permittee and initial transporter in compliance with OAC rule 3745-52-23?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
38.	As a permittee that generates hazardous waste, are signed copies of all hazardous waste manifests and any documentation required for exception reports retained for at least 3 years at the facility as required by OAC rules 3745-52-40 and 3745-54-71(A)(2)(e)?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

NOTE: If the permittee is generating hazardous waste, remember to attach a complete generator checklist.

39.	Does the permittee use only properly registered transporters when removing hazardous wastes? [Condition A.16]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
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TRANSPORTERS:

40.	Does the permittee give one copy of the manifest to the transporter, send one copy to the generator within 30 days, and keep one copy for at least 3 years? [3745-54-71(A)(2)(c)(d)(e)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
a.	If shipping papers are used in lieu of manifests (bulk shipments, etc.), are the same requirements met? [3745-54-71(B)(3)(4)(5)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
b.	Are any significant discrepancies in the manifest, as defined in 3745-54-72(A) noted in writing on the manifest or shipping paper? [3745-54-71(A)(2)(b)] & [3745-54-71(B)(2)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
41.	Have any manifest discrepancies been reconciled within 15 days as required by 3745-54-72(C)? If not:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
a.	Has the permittee submitted the required information to the director?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
42.	Has the permittee rejected any hazardous waste load or identified a container residue that exceeds the quantity limits for "empty" containers? If so:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
a.	Did the permittee consult with the generator prior to forwarding the rejected waste to an alternate facility? [3745-54-72(D)(1)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
b.	Did the permittee send the rejected waste to an alternate facility or returned the rejected waste to the generator within 60 days after the rejection? [3745-54-72(D)(1)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
c.	While the permittee is making arrangements for forwarding rejected waste to another facility, did the permittee ensure that either the delivering transporter retained custody of the waste or did the permittee provide for secure, temporary custody of the waste?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

	[3745-54-72(D)(2)]	
d.	Did the permittee prepare a manifest in accordance with OAC 3745-54-71(E)(1) through (7) for rejected waste to be sent to an alternate facility? [3745-54-72(E)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
e.	Did the permittee prepare a manifest in accordance with OAC 3745-54-72(F)(1) through (7) for rejected waste to be sent back to the generator? [3745-54-72(F)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
43.	If the permittee receives hazardous waste imported from a foreign source, has the permittee mailed a copy of the manifest to U.S. EPA within 30 days of a delivery? [3745-54-71(A)(3)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
44.	Does the permittee send a hazardous waste shipment to a consignment state (i.e., the state in which the hazardous waste shipment will be transported and subsequently managed)? If so:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	Has the permittee determined whether the consignment state for a shipment regulates any additional wastes (beyond those regulated federally) as hazardous wastes under its state hazardous waste program? [3745-54-71(E)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Has the permittee determined whether the consignment state requires the permittee to submit any copies of the manifest to the state? [3745-54-71(E)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
45.	If the permittee has accepted any unmanifested hazardous wastes from off-site sources for treatment, storage, or disposal, has an unmanifested waste report containing all the information required by OAC 3745-54-76(A) been submitted to the director within 15 days? Clean Harbors received hazardous waste from Johnson Matthey (F002) that was not listed as hazardous waste on a manifest (Load 1870-D). Although Clean Harbors identified the waste as unmanifested hazardous waste and requested new paperwork, Ohio EPA did not receive an unmanifested waste report for the drum.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>

WASTE ANALYSIS/WASTE ANALYSIS PLAN

46.	Does the permittee have a detailed chemical and physical analysis of waste streams which contains all information of the waste in accordance with OAC Chapters 3745-54 to 3745-57, 3745-218 and 3745-270 and the terms and conditions of the permit? [Condition B.3(a)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
47.	Does the permittee follow the procedures described in the WAP (Application Appendix 3-1)? [Condition B.3(b)] See Note on page 4.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
48.	In accordance with OAC rule 3745-54-13(A)(3), does the permittee repeat the waste analysis when the process or operation generating the hazardous waste has changed, or at least annually? [Condition B.3]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
49.	FOR OFF-SITE FACILITIES: Are the sampling methods and procedures specified in the permittee's WAP that will be used to inspect and, if necessary, analyze each movement of hazardous waste received at the facility to ensure that it matches the identification of the waste on the manifest [3745-54-13(c)]?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
50.	FOR FACILITIES OPERATING SURFACE IMPOUNDMENTS EXEMPT FROM LAND DISPOSAL RESTRICTIONS UNDER OAC 3745-270-04(A):	
	Does the waste analysis plan include procedures and schedules for:	
i.	The sampling of impoundment contents? [3745-54-13(B)(7)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
ii.	The analysis of test data? [3745-65-13(B)(7)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
iii.	The annual removal of residues which are not delisted or which exhibit the characteristic of a hazardous waste and either do not meet treatment standards (OAC 3745-270-40 to 3745-270-49) or	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

	where no treatment standards have been established? [3745-54-13(B)(7)]	
51.	Where applicable: The methods which will be used to meet additional waste analysis requirements for specific waste management methods specified in rules 3745-54-17, 3745-57-14, 3745-57-41 and 3745-270-07 of the OAC? [3745-54-13(B)(6)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
52.	Does the permittee place the results of all waste analyses in the facility operating record in accordance with OAC rule 3745-54-73?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

INSPECTION ITEMS FROM THE PART B APPLICATION

NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.

GENERAL INSPECTION REQUIREMENTS

NOTE: Inspector may attach a copy of the inspection procedures and schedules. If so, the attached document is referenced as Appendix _____.

53.	Is the permittee following the inspection procedures and schedules as set forth in the permit (Section 6.2 of the approved Part B permit application) and the requirements of OAC rules 3745-54-15(A),(C) and (D)?[Condition B.5]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
54.	Is the permittee following the approved inspection schedule for inspecting: monitoring equipment, safety equipment, emergency equipment, security devices and operating and structural equipment as specified in OAC rule 3745-54-15(B)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	Is the schedule kept at the facility? [OAC rule 3745-54-15(B)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
55.	Does the permittee remedy deterioration or any malfunctions discovered by an inspection as required by OAC rule 3745-54-15(C)? [Condition B.5]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
56.	In accordance with OAC rule 3745-54-15(D) and Condition B.5 of the permit, do inspection records contain the following information:	
a.	Date and time of inspection?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Name of inspector?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Notation of observations made?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
d.	Date and nature of any repairs or other remedial actions?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

INSPECTION ITEMS FROM THE PART B APPLICATION

NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate

SECURITY REQUIREMENTS

57.	Is the permittee complying with the following security provisions of OAC rule 3745-54-14 and Condition B.4 of the permit: [Section 6.1 of the Part B permit application]?	
a.	Does the permittee have a 24-hour surveillance system which continuously monitors and controls entry onto the active portion of the facility?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	An artificial or natural barrier (in good repair) which completely surrounds the active portion of the facility?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	A means to control entry, at all times, through gates or other entrances, to the active portion of the facility?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
58.	In accordance with OAC rule 3745-54-14(C), does the permittee have signs	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

	reading "Danger - Unauthorized Personnel Keep Out" posted at entrances of the hazardous waste container storage building number _____?	
FACILITY OPERATIONS		
59.	Is construction, maintenance and operation of the facility being conducted to minimize the possibility of a fire, explosion, or unplanned sudden or non-sudden release of hazardous waste or hazardous waste constituents to air, soil, ground or surface water? [OAC rule 3745-54-31; Condition B.1]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
60.	Does the permittee properly maintain and operate the facility to achieve compliance with the terms and conditions of the permit including: [Condition A.9]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	Effective management practices?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Adequate funding?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Adequate operator staffing and training?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
d.	Adequate laboratory and process controls?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
INSPECTION ITEMS FROM THE PART B APPLICATION		
<i>NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.</i>		
PERSONNEL TRAINING		
61.	Is the permittee conducting personnel training in accordance with the conditions of the permit and with the following requirements of OAC rule 3745-54-16? [Condition B.6]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	Does the permittee provide personnel training which includes instruction in safe equipment operation and emergency procedures and implementation of the contingency plan? [OAC rule 3745-54-16(A)(B)(C)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Does the permittee provide personnel training to new employees within six months after their date of employment as required by OAC rule 3745-54-16(B)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Does the permittee provide an annual refresher training course as required by OAC rule 3745-54-16(C)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
62.	Is the permittee maintaining personnel training records as required by OAC rule 3745-54-16(D) and of the approved application, including: written job titles, job descriptions and documented employee training records? [Condition B.6]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
INSPECTION ITEMS FROM THE PART B APPLICATION		
<i>NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.</i>		
REQUIRED EQUIPMENT		
<i>NOTE: Inspector may attach a list of emergency equipment. If so, the attachment document is referenced as Appendix _____.</i>		
63.	Has the permittee equipped the facility with the following emergency equipment as required by OAC rule 3745-54-32 and Condition B.9 of the permit:	
a.	An internal communications or alarm system?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	A device such as a telephone which is capable of summoning emergency assistance from local emergency authorities?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

	c.	Portable fire extinguishes and/or fire control equipment, spill control and decontamination equipment?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	d.	Water in adequate volume and pressure to supply water hose streams, foam producing equipment, automatic sprinklers or water spray systems?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
64.		Is the permittee inspecting, testing and maintaining the equipment specified in Question No. 60 to ensure its proper operating in accordance with OAC rule 3745-54-33 and Condition B.10 of the permit?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
65.		Whenever hazardous waste is being managed at the facility, has the permittee provided all personnel involved in the operation with immediate access to an internal alarm or emergency communication device as required by OAC rule 3745-54-34 and Condition B.11 of the permit?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

INSPECTION ITEMS FROM THE PART B APPLICATION

NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.

CONTINGENCY PLAN - EMERGENCY PROCEDURES

66.		In compliance with Condition B.13 of the permit and OAC rule 3745-54-37(A) and (B), does the permittee:			
	a.	Familiarize emergency response agencies with the layout of the facility, associated hazards, places where personnel will normally be working, entrances and possible evacuation routes?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	b.	Inform such agencies of safety equipment, supplies, proper emergency safety procedures that are applicable to the facility?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	c.	Familiarize the local hospital listed in the approved application with the properties of hazardous waste handled at the facility and the types of injuries or illness that could result from fires, explosions or releases at the facility?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
67.		Has a state or local agency declined to enter into the arrangements set forth in OAC rule 3745-54-37(A)? If so:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
	a.	Has the permittee documented the refusal in the operating record as required by OAC rule 3745-54-37(B)? [Condition B.13(b)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
68.		Has the permittee, in accordance with OAC rule 3745-54-53 submitted a copy of the approved contingency plan (including amendments, revisions or changes) to all local authorities, agencies and response contractors designated in the approved contingency plan? [Condition B.18(b)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
69.		Has the permittee notified all parties identified in the contingency plan in writing of amendments, modifications, or revisions to the plan within 10 days of the effective date of the change in the plan? [Condition B.18(b)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
70.		Has the permittee submitted a copy of the approved contingency plan and all revisions, amendments and modifications to the Ohio EPA, Division of Emergency and Remedial Response (DERR) in accordance with OAC rule 3745-54-53? [Condition B.18(c)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
71.		Is the permittee reviewing the approved contingency plan at least annually and amending the plan immediately if needed in compliance with OAC rule 3745-54-54? [Condition B.17]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

NOTE: Also see Question No. 4 of Recordkeeping Requirements to verify that any changes to the contingency plan were submitted in accordance with OAC rule 3745-50-51.

EMERGENCY COORDINATOR

72.		In accordance with OAC rule 3745-54-55 and Condition B.19 of the permit, is an emergency coordinator on premises or on call at all times?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
73.		In accordance with OAC rule 3745-54-55 and Condition B.19 of the permit, is/are the emergency coordinator(s) at the facility familiar with the following:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	a.	Contingency plan?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

	b.	Facility operations/activities?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c.	Waste characterization and location?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d.	Location of all records in the facility?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	e.	Facility layout?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
74.	In accordance with OAC rule 3745-54-55, does/do the emergency coordinator(s) have the authority to commit the resources needed to carry out the contingency plan? [Condition B.19]		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
75.	Does the permittee have a contingency plan for the facility that: [Condition B.19]		
	a.	Describes the actions facility shall take to comply with OAC rules 3745-54-51 through 3745-54-56 in response to fires, explosions, or any unplanned sudden or nonsudden release of hazardous waste or hazardous waste constituents to air, soil or surface water at the facility?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b.	Describes arrangements agreed to by local police, fire departments, hospitals, contractors and Ohio EPA and the local emergency response team to coordinate emergency services?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c.	Includes an up-to-date list of names, addresses and phone numbers (office and home) for all persons qualified to act as emergency coordinator in the order that they will assume responsibility for coordination of emergency response?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d.	Includes a list of all emergency equipment, including fire extinguishing systems, spill control equipment, communications and alarm systems and decontamination equipment?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	e.	Includes the location and a physical description of each item on the list referenced in Question No. 72(d), and a brief outline of its capabilities?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	f.	Includes an evaluation plan for facility personnel describing signals to be used to begin evacuation, evacuation routes, and alternate evacuation routes, in situations where the primary routes could be blocked by releases of hazardous waste?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
IMPLEMENTATION OF CONTINGENCY PLAN			
76.	Has there been a fire, explosion or release of hazardous waste or hazardous waste constituents at the facility including spill or release of hazardous waste or hazardous waste constituents greater than or equal to 55 gallons; any spill or release of hazardous waste or hazardous waste constituents less than 55 gallons may result in a fire or explosion hazard as determined by the Emergency Coordinator; or any spill on-site that may potentially cause on or off-site soil and/or ground or surface water contamination; any spill or release of hazardous waste or hazardous waste constituents that is reported to the National Response Center or local (city or county) emergency response center because the spill exceeded the "RQ" limits; any fire involving hazardous waste; any explosion involving hazardous waste; since the date of the last inspection? If so:		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	a.	Did the permittee immediately implement the approved contingency plan and follow the emergency procedures described in OAC rule 3745-54-56? [Conditions B.14 and B.20]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	b.	Did the permittee immediately notify Ohio EPA's emergency response team using the 24-hour toll free number (800)282-9378 providing the following information: [OAC rule 3745-54-56(D)(2)]	

	i.	Name and telephone number of the reporter?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
	ii.	Name and address of the facility?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
	iii.	Time and type of incident?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
	iv.	Name and quantity of materials involved?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
	v.	The extent of injuries?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
	vi.	The possible hazards to human health or the environment outside the facility?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
	c.	Did the permittee collect and manage as hazardous waste all liquid or solid material resulting from fire, explosion, released material or emergency response materials until such time as the permittee can demonstrate to Ohio EPA that such waste are not hazardous wastes? [Condition B.16]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
	d.	Within 15 days of the incident did the permittee submit to the director a written report of the incident? If so:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
	i.	Did the report contain the elements set forth in OAC rule 3745-54-56(J)? [Condition B.23]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
	e.	Did the permittee note in the operating record the time, date and details of any incident that required the implementation of the approved contingency plan as required by OAC rule 3745-54-56(J)? [Condition B.23]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

INSPECTION ITEMS FROM THE PART B APPLICATION

NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.

CLOSURE REQUIREMENTS

77.	Does the permittee maintain the approved closure plan at the facility? [Condition B.29]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
78.	Is the permittee keeping at the facility and submitting annually to Ohio EPA, the latest closure cost estimate as required by OAC rule 3745-55-42(D)? [Condition B.36]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
79.	Has the permittee amended the closure plan? If so:			
a.	Has the plan been amended in accordance with OAC rule 3745-55-18(D)? [Condition B.28]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

NOTE: Also see Recordkeeping Requirements (Question #4) in order to verify that any changes to the closure plan were submitted in accordance with OAC rule 3745-50-51.

80.	Has the permittee closed the facility? If so:			
a.	Did the permittee complete closure of the facility 180 days after receiving the final volume of hazardous waste, as required by Condition B.31 of the permit?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
b.	Was closure conducted in accordance with the closure performance standard of OAC rule 3745-55-11? [Condition B.26]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
c.	Did the permittee carry out the approved closure plan as set found in Section 9 of the approved permit application? [Condition B.27]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
d.	After receiving the final volume of hazardous waste, did the permittee remove all hazardous waste and complete closure activities in accordance with the schedule specified in the approved closure plan and as required by OAC rule 3745-55-13? [Condition B.31]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

e.	Has the permittee decontaminated and/or disposed of all facility equipment, structures and soils as required by OAC rule 3745-55-14 and the approved closure plan? [Condition B.32]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
f.	Has the permittee certified that the facility has been closed in accordance with the specifications in the approved closure plan as required by OAC rule 3745-55-15? [Condition B.33]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
g.	Has the permittee submitted a survey plat to the director and local zoning authority no later than the submission of certification of closure of each hazardous waste disposal unit? [Condition B.34] The Underground Storage Tank (UST) area (former location of tank #s 18, 19, 20, and 21) was closed in accordance with the interim standards closure/post-closure plan approved by Ohio EPA on September 30, 1992. This unit had to be closed as a landfill due to residual waste constituents found in the tank cavity (soil and groundwater) that could not be removed at the time closure occurred. The post-closure care period for the unit began on March 29, 1993, the date that closure of the unit was completed. The notices required to be filed pursuant to OAC Rules 3745-55-16 and 3745-55-19 were completed prior to Ohio EPA's acceptance of the closure certification for the UST area.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

POST-CLOSURE MAINTENANCE

NOTE: Inspector may attach a post-closure maintenance inspection schedule. If so, the attached document is referenced as Appendix _____.

81.	Has the permittee inspected the components, structures, and equipment at the site in accordance with the inspection schedule in §____ of the permit application on a quarterly basis? [OAC rule 3745-55-17(A)(1)(b)] [Condition B.35] The UST area was closed in accordance with the interim standards closure/post-closure plan approved by Ohio EPA on September 30, 1992. This unit had to be closed as a landfill due to residual waste constituents found in the tank cavity (soil and groundwater) that could not be removed at the time closure occurred. The area is currently in the post-closure care period which includes groundwater monitoring and corrective action. See the attached Post-Closure Care checklist for inspection items applicable to the former UST area.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
82.	Has the permittee conducted and recorded an inspection of at least the following? [Condition B.35]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	Security control devices (gates, locks, fences and signs);	
b.	Erosion control;	
c.	Cover settlement, subsidence and displacement;	
d.	Vegetative cover conditions;	
e.	Integrity of run-on/run-off control measures;	
f.	Cover drainage system functioning;	
g.	Monitor well conditions; and	
h.	Benchmark integrity.	
83.	Is the permittee using the inspection forms found in the approved Part B permit application? [§____ of the approved permit application]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
84.	Have suitable repairs been made within a reasonable amount of time? [Condition B.35]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
85.	Have repairs been indicated on the Notification Repair Form? [Condition B.35]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

86.	Was the Notification of Repair Form submitted to Ohio EPA within one week after determining that repairs are necessary? [Condition B.35]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
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INSPECTION ITEMS FROM THE PART B APPLICATION

NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.

STORAGE OF HAZARDOUS WASTES IN CONTAINERS

NOTE: The requirements of Condition C do not apply to the permittee's activities as a generator accumulating hazardous waste for <90 days per OAC rule 3745-52-34(A). Please complete the applicable sections of the Generator Requirements checklist to document compliance with activities associated with <90 day accumulation of wastes.

CONDITION OF CONTAINERS

87.	Are containers holding hazardous wastes in good condition as required by OAC 3745-55-71? [Condition C.4] If not:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	a. Did the permittee transfer the hazardous waste from such a container to one that is in good condition or otherwise manage the waste in a manner that complies with the conditions of the permit? [Condition C.4]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
88.	Does the permittee ensure that all containers used at the facility are compatible with the hazardous waste to be stored in them as required by OAC rule 3745-55-72? [Condition C.5]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
89.	Does the permittee keep all containers closed during storage except when it is necessary to add or remove waste as required by OAC rule 3745-55-73? [Condition C.6(a)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
90.	Does the permittee store all containerized hazardous waste on the container storage containment system as described in Condition C.7 of the permit? [Condition C.7]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

INSPECTIONS

NOTE: Inspector may attach a container inspection checklist. If so, the attached document is referenced as Appendix _____.

91.	Is the permittee inspecting the container area weekly in accordance with OAC rule 3745-55-74 and the approved inspection schedule in Section 6.2 of the Part B permit application to detect leaking containers and deterioration of containers and the containment system? [Condition C.9]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	a. Does the permittee note the results of these inspections in the inspection log along with any remedial action taken as required by OAC rule 3745-54-15(D)?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

CONTAINMENT SYSTEM

92.	Does the permittee maintain the containment system as described in the approved permit application, Section 4.2.3, including: [Condition C.7]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	a. Sufficient capacity to hold 10% of the total volume of containers or the volume of the largest container, whichever is greater.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	b. A system which is free of gaps and sufficiently impervious to contain leaks and spills?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
93.	Has the permittee had a spill or leak of wastes? If so:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
	a. Was spilled or leaked waste removed in a timely manner? [Condition C.7(e)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

NOTE: This time period is not to exceed 24 hours. [Condition C.7(e)]

AISLE SPACE

94.	Is the permittee maintaining adequate aisle space to allow unobstructed movement of personnel and equipment in the event of an emergency as required by OAC rule 3745-54-35 and Condition B.12 of the permit?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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INSPECTION ITEMS FROM THE PART B APPLICATION

NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.

94a.	Does the permittee limit the total quantity of containerized waste in the permitted container storage areas (Container Storage Areas No.1, No. 2B, No. 2E, Truck Station No.1 and Truck Station No. 2) to 199,020 gallons at any given time? [Condition C.1.]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
94b.	Is the permittee storing in containers only those waste codes identified in the approved permit? [Condition C.3]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

LAND DISPOSAL RESTRICTION REQUIREMENTS

NOTE: In order to determine compliance with all applicable LDR requirements the inspector may need to complete the separate LDR checklist:

95.	Does the permittee comply with all applicable regulations regarding land disposal prohibitions and restrictions as required by OAC Chapter 3745-270?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
96.	Does the permittee comply with the notification and certification requirements of OAC rule 3745-270-07(A)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
97.	Does the permittee comply with the requirements of OAC rule 3745-270-03 and does not in any way dilute a restricted waste or treatment residue as a substitute for adequate treatment?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
98.	Does the permittee retain supporting data used to determine if wastes managed at the facility are restricted from land disposal in the facility files as required by OAC rule 3745-270-07(A)(5)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	Are copies of all notices, certifications, demonstrations, waste analysis and other documentation produced pursuant to OAC Chapter 3745-270 retained for a period of 3 years as required by OAC rule 3745-270-07(A)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
99.	Is the permittee in compliance with the requirements of OAC rule 3745-270-50 regarding the storage of wastes restricted or prohibited from land disposal under OAC rule 3745-270-50?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

INSPECTION ITEMS FROM THE PART B APPLICATION

NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.

CORRECTIVE ACTION

100.	Has the permittee submitted the monthly progress report for all corrective action activities? (This report is due by the 15 th of the month following the reporting period.) [Condition _____] See the attached Corrective Action checklist for additional inspection items that are applicable to the Hebron Recycle Center.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
101.	Has the permittee identified any new WMUs or releases at the facility? [Condition E.10]? If so:	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
a.	Did the permittee follow the steps indicated in Conditions E.10(a) and (b) and E.11?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

INSPECTION ITEMS FROM THE PART B APPLICATION

NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.

TANK REQUIREMENTS		
102.	Did the permittee limit the storage of hazardous waste to the following tanks in Tank Farms 1, 2, 4, and 6 and to a total volume of 1,237,500 gallons as required by Condition D.1(a) of the permit:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	Tank Farm 1 (30 tanks) 32-37, 39-45, 50-53, 56-61, 63, and 65-69 -ignitable waste -595,000 gallons	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	Tank Farm 2 (37 tanks) 80-82, 83a, 83b, 84a, 84b, 85-88, 89a, 89b, 90-91, 92a, 92b, 93, 94a, 94b, 95, 100-101, 102a, 102b, and 103-114 -chlorinated solvents -525,000 gallons	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	Tank Farm 4 (4 tanks) 203-205 and 209 -chlorinated solvents -60,000 gallons	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	Tank Farm 6 (4 tanks) 96-98 and Bin #2 -chlorinated solvents and mineral spirits -57,500 gallons	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
103.	Did the permittee only treat hazardous waste in the 14 tanks authorized in the permit application and Condition D.2?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
104.	Did the permittee store or treat in tanks only those waste codes identified in the permit application and Condition D.1(c)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
105.	Has the permittee designed, constructed, and operated the secondary containment system, in accordance with the detailed design plans and descriptions contained in Section 4 of the permit application? [Condition D.4]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
106.	If needed, did the permittee repair the secondary containment as soon as concrete surface temperatures exceeded 38 degrees F for the applicable curing period? Clean Harbors has a work order to repair the secondary containment for Tank Farm 6 as soon as possible.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
107.	Did the permittee place hazardous wastes or treatment reagents in the tank system if they could cause the tank, its ancillary equipment, or a containment system to rupture, leak, corrode, or otherwise fail? [Condition D.5a]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
108.	Did the permittee prevent spills and overflows from the tank or containment systems using the methods described in the permit application?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
109.	Did the permittee inspect the tank systems, in accordance with the Inspection Schedule found in Section 6.2 of the permit application and Condition D.6 of the permit?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
110.	For all permitted hazardous waste storage tanks, did the permittee perform ultrasonic thickness testing using the procedures in Section 4.3.1 of the permit application? [Condition D.6(d)] – once every three years. The next round of testing is scheduled for October 2009.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
111.	Did the permittee have on file at the facility the written assessment of each tank system's integrity?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
112.	Did the permittee maintain at the facility a record of the results of the ultrasonic tank tests conducted in accordance with Condition D.6(d)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
113.	Did the permittee place ignitable or reactive waste in the tank system or in the secondary containment system?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	If so, did the permittee follow the procedures specified in the permit and document compliance with Condition D.10 and place it in the operating record?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
114.	Did the permittee comply with the requirements for the maintenance of protective distances between the waste management area and any public ways, streets, alleys, or an adjoining property line that can be built upon, as required by the National Fire Protection Association's "Flammable and	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

	Combustible Liquids Code"?	
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CORRECTIVE ACTION

1.	Has the permittee identified any new WMUs or releases at the facility? [Condition E.10]? If so:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	a. Did the permittee follow the steps indicated in Conditions E.10(a) and (b) and E.11?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
2.	Did the permittee institute Corrective Action as necessary to protect human health and the environment for all releases of hazardous waste or hazardous constituents from any waste management units (WMUs) at the facility? [Condition E.1]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
3.	Did the permittee implement corrective action beyond the facility boundary when necessary to protect human health and the environment; unless the permittee was unable to obtain permission to undertake such actions (if permission is denied on-site measures will be required on a case-by-case basis)? [Condition E.2] In the past, there has not been agreement as to whether the contaminated groundwater is migrating beyond the downgradient facility boundary. The permittee has been and will continue to conduct additional investigations to determine the extent of groundwater contamination at this site and whether additional corrective measures are necessary.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.	Has the permittee implemented and continued to operate the following to address site-wide contamination [Condition E.9(a)]:	
	a. the ground water recovery system	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b. the water and soil vapor extraction system	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c. the Health and Safety Public Involvement Plans	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d. semiannual ground water monitoring and reporting in accordance with the approved permit and plans.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
5.	Has the permittee provided financial assurance in the amount specified in Section 9 of the permit application as necessary to implement the selected remedy described in Condition E.9(a), including current and future operation and maintenance costs? [Condition E.9(b)] The permittee currently does not have financial assurance (FA) for post-closure care of the UST unit or site-wide corrective action, but is currently required to provide FA and update its financial assurance mechanism within 60 days of Ohio EPA's approval of the risk assessment report referenced in Permit Condition A.27(a)(ii)(b) [per Permit Condition A.27(c)].	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

POST-CLOSURE CARE

Note: This module is required for the UST area that was closed as a landfill. The contamination resulting from the UST area is being addressed under the site-wide RCRA corrective action.

1.	Did the permittee maintain and monitor the ground water and comply with all other ground water monitoring requirements during the post-closure care period? [Condition F.2(b)] The next required semi-annual ground water report is due to Ohio EPA by March 1, 2010. Ohio EPA will review this report, and any issues that are identified will be discussed under separate cover at a later date.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
2.	Did the permittee implement the post-closure plan and conduct all post-closure care activities in accordance with the approved Post-Closure Plan? [Condition F.2(c)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
3.	Did the permittee inspect components, structures, and equipment at the site in accordance with the inspection schedule found in the post-closure plan? [Condition F.3]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

4.	Did the permittee close any units other than the UST area as a landfill? If so,	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	(a) Did the permittee submit to the Director and to the local zoning authority records of the type, location, and quantity of hazardous waste disposed within each cell or disposal unit within 60 days of certification of closure? [Condition F.4(a)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	(b) Did the permittee, within 60 days of certifying closure of the first disposal unit and within 60 days of certifying closure of the last unit: [Condition F.4(b)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	(i) record a notation on the deed to the facility that the land has been used to manage hazardous waste and is restricted?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	(ii) file a survey plat and record as required by Condition F.4(a)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	(iii) submit to the director certification that the notation has been filed and a copy of the document in which the notation has been recorded?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
5.	If hazardous waste, hazardous waste residues, liners, or contaminated soil is to be removed during post-closure, was a permit modification requested and received? [Condition F.4(c)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
6.	Did the permittee, within 60 days of completion of the established post-closure care period, certify that the post-closure activities were performed in accordance with the specifications in the approved post-closure plan? [Condition F.4(d)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
7.	Is the permittee maintaining financial assurance for post-closure care in accordance with the applicable requirements of OAC Rules 3745-55-40 through 3745-55-51? [Condition F.5] The permittee currently does not have financial assurance (FA) for post-closure care of the UST unit or site-wide corrective action, but is currently required to provide FA and update its financial assurance mechanism within 60 days of Ohio EPA's approval of the risk assessment report referenced in Permit Condition A.27(a)(ii)(b) [per Permit Condition A.27(c)].	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
8.	Has the permittee amended the post-closure plan?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	If so, has a permit modification request been submitted in accordance with OAC Rules 3745-50-40 to 3745-50-62 and 3745-55-18? [Condition F.6]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

GROUND WATER MONITORING

1.	Did the permittee comply with the application requirements in OAC Rules 3745-54-90 through 3745-54-100 for the purpose of detecting and characterizing releases to the uppermost aquifer, and evaluating the effectiveness of the corrective action program for the UST area (former location of tank #s 18, 19, 20, and 21)? [Condition G.1(a)] The next required semi-annual ground water report is due to Ohio EPA by March 1, 2010. Ohio EPA will review this report, and any issues that are identified will be discussed under separate cover at a later date.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
2.	Did the permittee monitor the ground water to determine whether regulated units are in compliance with the ground water protection standard under OAC Rule 3745-54-92? [Condition G.2(a)]? See Comment 1.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
3.	Did the permittee monitor well H-10S at the point of compliance and wells H-9S, H-15S, and H-15D as required? [Condition G.2(b)] See Comment 1.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.	Does the permittee's monitoring system consist of the ground water wells as specified in Figure 5.1 in the permit application and in conformance with Condition G.3? [Condition G.3]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

5.	Are the wells cased in a manner that maintains the integrity of the monitoring well bore holes and complies with the detailed plans and specification presented in Section 5.6 of the permit application and presented in the 1993 RFI report?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
6.	Did the permittee implement a ground water monitoring program in accordance with Sections 2 through 5 of Appendix 5-1 of the permit application? [Condition G.4] See Comment 1.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
7.	Were field and analytical data validated in accordance with the procedures specified in Section 5 of Appendix 5-1 of the permit application? [Condition G.4(c)] See Comment 1.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
8.	Did the permittee determine the ground water surface elevation at each monitoring well each time the ground water was sampled? [Condition G.5] See Comment 1.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
9.	Did the permittee follow the sampling procedure and interval for each constituent as described in Section 2.3 of Appendix 5-1 of the permit application? [Condition G.6] See Comment 1.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
10.	Did the permittee sample the ground water semi-annually during the compliance period? [Condition G.7]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
11.	Did the permittee conduct statistical procedures as presented in Section 5.7 of the permit application? [Condition G.7(b)] See Comment 1.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
12.	Did the permittee enter all of the information specified in Permit Condition G.8(a) in the operating record? See Comment 1.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
13.	Did the permittee report, in writing, semi-annually to the director on the effectiveness of the corrective action program? These reports must be submitted on March 1 and September 1 of each year until the corrective action program has been completed. [Condition G.8(b)(i)] See Comment 1.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
14.	Did the permittee submit an annual report to the director by March 1 st of the following year or first business day thereafter if this falls on a weekend? [Condition G.8(b)(ii)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>



**LARGE QUANTITY GENERATOR REQUIREMENTS
COMPLETE AND ATTACH A PROCESS DESCRIPTION SUMMARY**

CESQG: ≤100Kg. (Approximately 25-30 gallons) of waste in a calendar month or ≤ 1 Kg. of acutely hazardous waste.
 SQG: Between 100 and 1,000 Kg. (About 25 to under 300 gallons) of waste in a calendar month.
 LQG: ≥ 1,000 Kg. (~300 gallons) of waste in a calendar month or >1 Kg. of acutely hazardous waste in a calendar month.
NOTE: To convert from gallons to pounds: Amount in gallons x Specific Gravity x 8.345 = Amounts in pounds.

Safety Equipment Used:

GENERAL REQUIREMENTS

1.	Have all wastes generated at the facility been adequately evaluated? [3745-52-11]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
2.	Are records of waste determination being kept for at least 3 years? [3745-52-40(C)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
3.	Has the generator obtained a U.S. EPA identification number? [3745-52-12]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
4.	Were annual reports filed with Ohio EPA on or before March 1 st ? [3745-52-41(A)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
5.	Are annual reports kept on file for at least 3 years? [3745-52-40(B)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
6.	Has the generator transported or caused to be transported hazardous waste to other than a facility authorized to manage the hazardous waste? [ORC 3734.02(F)]	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
7.	Has the generator disposed of hazardous waste on-site without a permit or at another facility other than a facility authorized to dispose of the hazardous waste? [ORC 3734.02(E)&(F)]	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
8.	Does the generator accumulate hazardous waste?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

NOTE: If the LQG does not accumulate or treat hazardous waste, it is not subject to 52-34 standards. All other requirements still apply, e.g., annual reports, manifest, marking, record keeping, LDR, etc.

9.	Has the generator accumulated hazardous waste on-site in excess of 90 days without a permit or an extension from the director ORC §3734.02(E)&(F)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
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NOTE: If F006 waste is generated and accumulated for > 90 days and is recycled see 3745-52-34(G)&(H).

10.	Does the generator treat hazardous waste in a: [ORC 3734.02(E)&(F)]			
a.	Container that meets 3745-66-70 to 3745-66-77?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
b.	Tank that meets 3745-66-90 to 3745-66-101 except 3745-66-97(C)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
c.	Drip pads that meet 3745-69-40 to 3745-69-45?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
d.	Containment building that meets 3745-256-100 to 3745-256-102?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

NOTE: Complete appropriate checklist for each unit.

NOTE: If waste is treated to meet LDRs, use LDR checklist.

11.	Does the generator export hazardous waste? If so:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
a.	Has the generator notified U.S. EPA of export activity? [3745-52-53(A)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
b.	Has the generator complied with special manifest requirements? [3745-52-54]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
c.	For manifests that have not been returned to the generator: has an exception report been filed? [3745-52-55]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
d.	Has an annual report been submitted to U.S. EPA? [3745-52-56]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

e.	Are export related documents being maintained on-site? [3745-52-57(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
MANIFEST REQUIREMENTS		
12.	Have all hazardous wastes shipped off-site been accompanied by a manifest? (U.S. EPA Form 8700-22) [3745-52-20(A)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
13.	Have items (1) through (20) of each manifest been completed? [3745-52-20(A)(1)]&[3745-52-27(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<i>NOTE: U.S. EPA Form 8700-22(A) (the continuation form) may be needed in addition to Form 8700-22. In these situations items (21) through (35) must also be completed. [3745-52-20(A)(1)]</i>		
14.	Does each manifest designate at least one facility which is permitted to handle the waste? [3745-52-20(B)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<i>NOTE: The generator may designate on the manifest one alternate facility to handle the waste in the event of an emergency which prevents the delivery of waste to the primary designated facility. [3745-52-20(C)].</i>		
15.	If the transporter was unable to deliver a shipment of hazardous waste to the designated facility did the generator designate an alternate TSD facility or give the transporter instructions to return the waste? [3745-52-20(D)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
16.	Have the manifests been signed by the generator and initial transporter? [3745-52-23(A)(1)&(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
17.	If the generator received a rejected load or residue and accumulated the waste on-site, did the generator sign item 18c or 20 of the manifest? [3745-52-34(M)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
<i>NOTE: Remind the generator that the certification statement they signed indicates: 1) they have properly prepared the shipment for transportation and 2) they have a program in place to reduce the volume and toxicity waste they generate.</i>		
18.	If the generator did not receive a return copy of each completed manifest within 35 days of the waste being accepted by the transporter, did the generator contact the transporter and/or TSD facility to check on the status of the waste? [3745-52-42(A)(1)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
19.	If the generator has not received the manifest within 45 days, did the generator file an exception report with Ohio EPA? [3745-52-42(A)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
20.	Are signed copies of all manifests and any exception reports being retained for at least three years? [3745-52-40]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<i>NOTE: Waste generated at one location and transported along a publicly accessible road for temporary consolidated storage or treatment on a contiguous property also owned by the same person is not considered "on-site" and manifesting and transporter requirements must be met. To transport "along" a public right-of-way the destination facility has to act as a transfer facility or have a permit because this is considered to be "off-site." For additional information see the definition of "on-site" in OAC rule 3745-50-10.</i>		
PERSONNEL TRAINING		
21.	Does the generator have a training program which teaches facility personnel hazardous waste management procedures (including contingency plan implementation) relevant to their positions? [3745-65-16(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
22.	Does the personnel training program, at a minimum, include instructions to ensure that facility personnel are able to respond effectively to emergencies involving hazardous waste by familiarizing them with emergency procedures, emergency equipment and emergency systems (where applicable)? [3745-65-16(A)(3)(a-f)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
23.	Is the personnel training program directed by a person trained in hazardous waste management procedures? [3745-65-16(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
24.	Do new employees receive training within six months after the date of hire (or assignment to a new position)? [3745-65-16(B)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
25.	Does the generator provide annual refresher training to employees? [3745-65-16(C)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
26.	Does the generator keep records and documentation of:	
a.	Job titles? [3745-65-16D(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

	b.	Job descriptions? [3745-65-16D(2)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	c.	Type and amount of training given to each person? [3745-65-16D(3)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	d.	Completed training or job experience required? [3745-65-16D(4)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
27.		Are training records for current personnel kept until closure of the facility and are training records for former employees kept for at least three years from the date the employee last worked at the facility? [3745-65-16(E)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

NOTE: The following section can be used by the inspector to document that all personnel who are involved with hazardous waste management have been trained. The employees who need training (written and/or on-the-job) may include the following: environmental coordinators, drum handlers, emergency coordinators, personnel who conduct hazardous waste inspections, emergency response teams, personnel who prepare manifest, etc.

Job Performed	Name of Employee	Date Trained

CONTINGENCY PLAN

28.		Does the owner/operator have a contingency plan to minimize hazards to human health or the environment from fires, explosions or any unplanned release of hazardous waste? [3745-65-51(A)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
29.		Does the plan describe the following:			
	a.	Actions to be taken in response to fires, explosions or any unplanned release of hazardous waste? [3745-65-52(A)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	b.	Arrangements with emergency authorities? [3745-65-52(C)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	c.	A current list of names, addresses and telephone numbers (office and home) of all persons qualified to act as emergency coordinator? [3745-65-52(D)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	d.	A list of all emergency equipment, including: location, a physical description and brief outline of capabilities? [3745-65-52(E)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	e.	An evacuation plan for facility personnel where there is possibility that evacuation may be necessary? [3745-65-52(F)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

NOTE: If the facility already has a "Spill Prevention, Control and Countermeasures Plan" under CFR Part 112 or 40 CFR Part 1510, or some other emergency plan, the facility can amend that plan to incorporate hazardous waste management provisions that are sufficient to comply with OAC requirements. [3745-65-52(B)]

30.		Is a copy of the plan (plus revisions) kept on-site and been given to all emergency authorities that may be requested to provide emergency services? [3745-65-53(A)&(B)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
31.		Has the generator revised the plan in response to rule changes, facility, equipment and personnel changes, or failure of the plan? [3745-65-54]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
32.		Is an emergency coordinator available at all times (on-site or on-call)? [3745-65-55]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

NOTE: The emergency coordinator shall be thoroughly familiar with: (a) all aspects of the facility's contingency plan; (b) all operations and activities at the facility; (c) the location and characteristics of waste handled; (d) the location of all records within the facility; (e) facility layout; and (f) shall have the authority to commit the resources needed to implement provisions of the contingency plan.

EMERGENCY PROCEDURES

33.		Has there been a fire, explosion or release of hazardous waste or hazardous waste constituents since the last inspection? If so:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
	a.	Was the contingency plan implemented? [3745-65-51(B)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
	b.	Did the facility follow the emergency procedures in 3745-65-56(A) through (H)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
	c.	Did the facility submit a report to the Director within 15 days of the incident as required by 3745-65-56(J)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

NOTE: OAC 3745-65-51(b) requires that the contingency plan be implemented immediately whenever there is a fire, explosion, or release of hazardous waste or hazardous waste constituents, which could threaten human health and the environment.

PREPAREDNESS AND PREVENTION

34.	Is the facility operated to minimize the possibility of fire, explosion, or any unplanned release of hazardous waste? [3745-65-31]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
35.	Does the generator have the following equipment at the facility, if it is required due to actual hazards associated with the waste:	
a.	Internal communications or alarm system? [3745-65-32(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Emergency communication device? [3745-65-32(B)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Portable fire control, spill control and decon equipment? [3745-65-32(C)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
d.	Water of adequate volume/pressure per documentation or facility rep? [3745-65-32(D)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

NOTE: Verify that the equipment is listed in the contingency plan.

36.	Is emergency equipment tested (inspected) as necessary to ensure its proper operation in time of emergency? [3745-65-33]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
37.	Are emergency equipment tests (inspections) recorded in a log or summary? [3745-65-33]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
38.	Do personnel have immediate access to an internal alarm or emergency communication device when handling hazardous waste (unless the device is not required under 3745-65-32)? [3745-65-34(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
39.	If there is only one employee on the premises, is there immediate access to a device (e.g., phone, hand held two-way radio) capable of summoning external emergency assistance (unless not required under 3745-65-32)? [3745-65-34(B)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
40.	Is adequate aisle space provided for unobstructed movement of emergency or spill control equipment? [3745-65-35]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
41.	Has the generator attempted to familiarize emergency authorities with possible hazards and facility layouts? [3745-65-37(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
42.	Where authorities have declined to enter into arrangements or agreements, has the generator documented such a refusal? [3745-65-37(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

SATELLITE ACCUMULATION AREA REQUIREMENTS

43.	Does the generator ensure that satellite accumulation area(s):	
a.	Are at or near a point of generation? [3745-52-34(C)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Are under the control of the operator of the process generating the waste? [3745-52-34(C)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Do not exceed a total of 55 gallons of hazardous waste per waste stream? [3745-52-34(C)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
d.	Do not exceed one quart of acutely hazardous waste at any one time? [3745-52-34(C)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
e.	Containers are closed, in good condition and compatible with wastes stored in them? [3745-52-34(C)(1)(a)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
f.	Containers are marked with words "Hazardous Waste" or other words identifying the contents? [3745-52-34(C)(1)(b)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
44.	Is the generator accumulating hazardous waste(s) in excess of the amounts listed in the preceding question? If so:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
a.	Did the generator comply with 3745-52-34(A)(1) through (4) or other applicable generator requirements within three days? [3745-52-34(C)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

b.	Did the generator mark the container(s) holding excess with the accumulation date when the 55 gallon (one quart) limit was exceeded? [3745-52-34(C)(2)]	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input checked="" type="checkbox"/>
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NOTE: The satellite accumulation area is limited to 55 gallons of hazardous waste accumulated from a distinct point of generation in the process under the control of the operator of the process generating the waste (less than 1 quart for acute hazardous waste). There could be individual waste streams accumulated in an area from different points of generation.

USE AND MANAGEMENT OF CONTAINERS IN <90 DAY ACCUMULATION AREAS

45.	Has the generator marked containers with the words "Hazardous Waste?" [3745-52-34(A)(3)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
46.	Is the accumulation date on each container? [3745-52-34(A)(2)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
47.	Are hazardous wastes stored in containers which are:			
a.	Closed (except when adding/removing wastes)? [3745-66-73(A)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
b.	In good condition? [3745-66-71]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
c.	Compatible with wastes stored in them? [3745-66-72]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
d.	Handled in a manner which prevents rupture/leakage? [3745-66-73(B)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

NOTE: Record location on process summary sheets, photograph the area, and record on facility map.

48.	Is the container accumulation areas(s) inspected weekly? [3745-66-74] Per ORC§1.44(A) "Week" means 7 consecutive days.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
a.	Are inspections recorded in a log or summary? [3745-66-74]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
49.	Are containers of ignitable or reactive wastes located at least 50 feet (15 meters) from the facility's property line? [3745-66-76]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
50.	Are containers of incompatible wastes stored separately from each other by means of a dike, berm, wall or other device? [3745-66-77(C)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
51.	If the generator places incompatible wastes, or incompatible wastes and materials in the same container, is it done in accordance with 3745-65-17(B)? [3745-66-77(A)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
52.	If the generator places hazardous waste in an unwashed container that previously held an incompatible waste, is it done in accordance with 3745-65-17(B)? [3745-66-77(B)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

NOTE: OAC 3745-65-17(B) requires that the generator treat, store, or dispose of ignitable or reactive waste, and the mixture or commingling of incompatible wastes, or incompatible wastes and materials so that it does not create undesirable conditions or threaten human health or the environment.

53.	If the generator has closed a <90 day accumulation area does the closure appear to have met the closure performance standard of 3745-66-11? [3745-52-34(A)(1)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
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NOTE: Please provide a description of the unit and documentation provided by the generator for the file to demonstrate that closure was completed in accordance with the closure performance standards. If the generator has closed a <90 day tank, closure must also be completed in accordance with OAC 3745-66-97 (except for paragraph C of this rule). [3745-52-34]

PRE-TRANSPORT REQUIREMENTS

54.	Does the generator package/label its hazardous waste in accordance with the applicable DOT regulations? [3745-52-30, 3745-52-31 and 3745-52-32(A)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
55.	Does each container ≤119 gallons have a completed hazardous waste label? [3745-52-32(B)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
56.	Before off-site transportation, does the generator placard or offer the appropriate DOT placards to the initial transporter? [3745-52-33]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>



**GENERATOR LDR CHECKLIST
DOES NOT APPLY TO CESQGS**

GENERAL REQUIREMENTS

- | | | |
|----|--|--|
| 1. | If LDRs do not apply, does the generator have a statement that lists how the HW was generated, why LDRs don't apply and where the HW went? [3745-270-07 (A)(7)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| 2. | Did the generator determine if the HW/soil must be treated to meet the LDR treatment standard prior to disposal? Generator knowledge or testing may be used. [3745-270-07(A)(1)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |

NOTE: This is done by determining if the HW /soil contains levels of constituents greater than the levels given in its LDR treatment standard in 3745-270-40. However, if a specific treatment method is given in 3745-270-40 for the HW, no determination is required [3745-270-07 (A)(1)(b)]. If soil, generator can choose to have soil treated to LDR levels given in 3745-270-49 (alternative treatment levels for soils).

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|----|--|--|
| 3. | Does the generator have documentation of how he determined whether the HW/soil meets or does not meet the LDR treatment standard in 2, above? [3745-270-07(A)(6)(a) or 3745-270-07(A)(6)(b)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| 4. | Does the generator keep the documentation required in #2, above, on-site for at least three years from the last date the HW/soil was sent on-site/off-site for treatment/disposal? [3745-270-07(A)(8)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| 5. | Does the generator generate a listed HW that exhibits a characteristic? If yes, | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| a. | Did the generator determine if the listed HW exhibits a characteristic that is not treated under the LDR treatment standard for the listed HW? [3745-270-09(A)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |

FOR EXAMPLE: F006 that exhibits the characteristic for silver or K062 that is corrosive, D002. Review LDR treatment standard in 3745-270-40 to determine what constituents the listed HW is treated for.

- | | | |
|----|---|--|
| 6. | Did the generator determine if its characteristic HW contains underlying hazardous constituents that need to be treated? [3745-270-09(A)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
|----|---|--|

NOTE: This is done by evaluating which underlying hazardous constituents (UHC) are in the HW at levels above the universal treatment standards given in 3745-270-48. This requirement does not apply to high total organic carbon (i.e., contains >10% TOC) D001 wastes or listed HWs.

NOTE: Written documentation of this determination is not required.

- | | | |
|----|---|--|
| 7. | Did the generator treat his HW /soil on-site <u>to meet</u> the LDR treatment standard? | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> |
|----|---|--|

NOTE If "Yes" see question #16.

- | | | |
|-----|--|--|
| 8. | Did the generator send a one-time LDR notification form to the TSD with the first shipment to that facility?[3745-270-07(A)(2)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| 9. | Did the generator resubmit the LDR notification form to the TSD when the HW changed or the generator used a new TSD? [3745-270-07(A)(2)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| 10. | Does the generator have a copy of the LDR notification form on file?[3745-270-07(A)(2)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| a. | Is the form kept on file for three years after last HW shipped? [3745-270-07(A)(8)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |

NOTIFICATION FORM

- | | | |
|-----|---|--|
| 11. | Does the LDR Notification form contain the following information: | |
| a. | Manifest number of the first waste shipment to the TSD?[3745-270-07(A)(2)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| b. | Applicable waste codes (includes characteristic codes for a listed HW if applicable)? [3745-270-07(A)(2)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| c. | A statement that conveys that the HW is subject to LDRs and must be treated to meet LDR treatment requirements? [3745-270-07(A)(2)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| d. | A designation whether the HW is a wastewater or non-wastewater? [3745-270-07(A)(2)]. | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |

NOTE: A wastewater contains <1% by wt. total suspended solids (TSS) and <1% by wt. TOC. If you doubt the HW is a wastewater or non-wastewater, the HW can be tested using for example, Standard Methods (SM) 160.2 for TSS, SW-846 method 9060a for TOC.

e.	Designation of the waste subcategory when applicable? [3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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NOTE: Subcategories are found on the LDR treatment standards table under the applicable waste code. Not all HWs have subcategories

f.	A listing of the underlying hazardous constituents for which a characteristic waste must be treated? [3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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NOTE: Not required if the waste is high TOC D001 or the TSD tests its treatment residues for all underlying hazardous constituents.

g.	If the HW is F001-F005 or F039, did the generator note on the LDR form what solvents or constituents, respectively, the waste contains and must be treated for?[3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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NOTE: Not required if the TSD tests its treatment residues for all underlying hazardous constituents.

PROHIBITED DILUTION

12.	Is the HW treated by burning? If "No," go to #15.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
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13.	Is the HW a metal-bearing HW?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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NOTE: Generally, metal-bearing HWs contain heavy metals above TCLP levels or were listed due to the presence of metals. A list of the restricted metal-bearing HWs is given in the Appendix to 3745-270-03.

14.	a.	Metal-bearing HWs cannot be incinerated, combusted or, blended and burned for fuel unless <u>one</u> of the following conditions apply. [3745-270-03(c)]	
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	i.	Contains > 1% TOC?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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	ii.	Contains organic constituents or cyanide at levels greater than the UST levels?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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	iii.	Is made up of combustible material e.g., paper, wood, plastic?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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	iv.	Has a reasonable heating value (e.g., > 5000 Btu)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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	v.	Co-generated with a HW that must be combusted?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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	b.	If all responses to 14 a.i. through 14 a.v. are "No," HW is being improperly treated by dilution, violation of 3745-270-03(C). Is HW being treated by dilution?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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15.	Was the HW treated by wastewater treatment?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
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	a.	Is a LDR treatment method, other than DEACT or a numerical value, specified for the waste? [3745-270-03(B) and 3745-270-40(A)(3)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
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NOTE: If Yes, HW is improperly being treated by dilution.

	b.	Does the waste carry the D001 code <u>and</u> contain ≥10% TOC?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
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	c.	Does the wastewater treatment process include a process to separate/recover the organic phase of the waste?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
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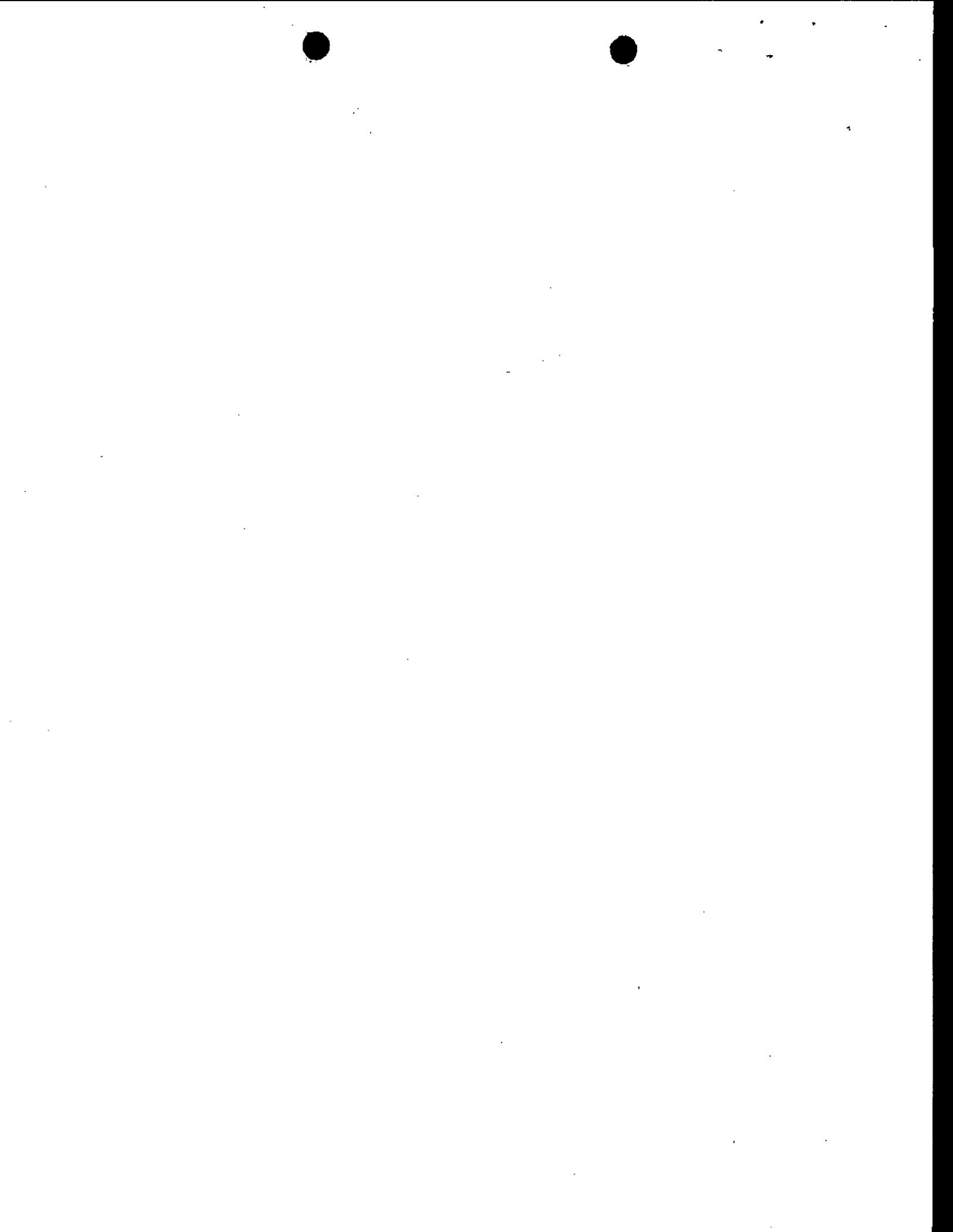
NOTE: If the answers to b & c are "yes" and "no", respectively, waste is improperly being treated by dilution and generator is in violation of [3745-270-03(B) and 3745-270-40(A)(3)].

NOTE: A list of separation/recovery processes are given in 3745-270-42 under RORG.

GENERATOR TREATMENT

16.	Does the generator treat to meet LDRs on-site [3745-270-40(A)]?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
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	Did the generator treat his hazardous waste/soil on-site in a tank, container, drip pad or containment building to meet the LDR treatment standard?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>	
	If "Yes"...complete the rest of the checklist. If "No"...stop...you are done.		
a.	Does the generator have a written waste analysis plan (WAP) that describes the procedures he will follow to treat the HW/soil to the LDR treatment standard? [3745-270-07(A)(5)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>	
b.	Did the generator use a detailed chemical and physical analysis of the HW/soil in order to develop the WAP? [3745-270-07(A)(5)(a)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>	
<i>NOTE: This is a laboratory analysis but it does not have to be kept by the generator.</i>			
c.	Does the WAP contain all information necessary to treat the HW/soil to the LDR treatment standard? [3745-270-07(A)(5)(a)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>	
d.	Does the WAP include the testing frequency of the treated HW/soil to demonstrate that the LDR treatment standard is being met? [3745-270-07(A)(5)(a)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>	
e.	Does the generator keep the WAP on-site? [3745-270-07(A)(5)(b)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>	
f.	Is the WAP available for the inspector's review during the inspection? [3745-270-07(A)(5)(b)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>	
NOTIFICATION FORM			
17.	a.	Contains all information in #11 a-g above and	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	b.	If the treated HW/soil is listed.....notification contains the following certification statement: "I certify under penalty of law that I personally have examined and am familiar with the waste, through analysis and testing or through knowledge of the waste, to support this certification that the waste complies with the treatment standards specified in rule 3745-270-40 to 3745-270-49 of the Administrative Code. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	c.	If the treated HW/soil no longer exhibits a characteristic and is no longer a HW, did the generator:	
	i.	Send a one-time notification to the director?[3745-270-09(D)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	ii.	Maintain a copy of the notice onsite?[3745-270-09(D)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	iii.	Include in the notification: [3745-270-09(D)(1)(a)]	
	1.	Name & address of receiving landfill?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	2.	Description of HW when generated?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	3.	HW code when generated?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	4.	Treatability group when generated?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	5.	Underlying hazardous constituents present when generated?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	iv.	Contain the right certification statement as required by 3745-270-07(b)(4)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>



SMALL QUANTITY UNIVERSAL WASTE HANDLER REQUIREMENTS – BATTERIES AND LAMPS

Large Quantity Universal Waste Handler (LQUWH) = 5,000 Kg or more

Small Quantity Universal Waste Handler (SQUWH) = 5,000 Kg or less

PROHIBITIONS

1.	Did the SQUWH dispose of universal waste? [3745-273-11(A)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
2.	Did the SQUWH dilute or treat universal waste, except when responding to releases as provided in OAC rule 3745-273-17 or managing specific wastes as provided in OAC rule 3745-273-13? [3745-273-11(B)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>

WASTE MANAGEMENT AND LABELING/MARKING

UNIVERSAL WASTE BATTERIES

3.	Are batteries that show evidence of leakage, spillage or damage that could cause leaks contained? [3745-273-13(A)(1)] At the time of the inspection, the facility was not accumulating any universal waste batteries on site.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
4.	If batteries are contained, are the containers closed and structurally sound, compatible with the contents of the battery and lack evidence of leakage, spillage or damage that could cause leakage? [3745-273-13(A)(1)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
5.	Are the casings of the batteries breached, not intact, or open (except to remove the electrolyte)? [3745-273-13(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
6.	If the electrolyte is removed or other wastes generated, has it been determined whether the electrolyte or other wastes exhibit a characteristic of hazardous waste? [3745-273-13(A)(3)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
a.	If the electrolyte or other waste is characteristic, is it managed in compliance with OAC Chapters 3745-50 through 3745-69? [3745-273-13(A)(3)(a)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
b.	If the electrolyte or other waste is not hazardous, is it managed in compliance with applicable law? [3745-273-13(A)(3)(b)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
7.	Are the batteries or containers of batteries labeled with the words "Universal Waste - Batteries" or "Waste Battery(ies)" or "Used Battery(ies)"? [3745-273-14(A)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>

UNIVERSAL WASTE LAMPS

8.	Does the SQUWH contain lamps in containers or packages that are structurally sound, adequate to prevent breakage, and compatible with contents of the lamps? Are containers or packages closed and do they lack evidence of leakage, spillage or damage that could cause leakage? [3745-273-13(D)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
9.	Are lamps that show evidence of breakage, leakage or damage that could cause a release of mercury or hazardous constituents into the environment immediately cleaned up? Are they placed into a container that is closed, structurally sound, compatible with the contents of the lamps, and lack evidence of leakage, spillage or damage that could cause leakage or releases of mercury or hazardous waste constituents to the environment? [3745-273-13(D)(2)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>

NOTE: Treatment (such as crushing) by a UWH is prohibited under this rule unless the facility is permitted for such activities [3745-273-31(B)]. A generator crushing lamps must manage lamps according to hazardous waste rules (OAC Chapter 3745-52). Lamp crushing is a form of generator treatment (OAC rule 3745-52-34). Crushed lamps must be transported by a registered hazardous waste transporter to a permitted hazardous waste facility using a hazardous waste manifest.

10.	Are the lamps or containers or packages of lamps labeled with the words "Universal Waste - Lamp(s)" or "Waste Lamp(s)" or "Used Lamp(s)"? [3745-273-14(E)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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ACCUMULATION TIME

11.	Is the waste accumulated for less than one year? [3745-273-15(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	If not, is the waste accumulated over one year in order to facilitate	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

	proper recovery, treatment or disposal? (Burden of proof is on the handler to demonstrate) [3745-273-15(B)]	
<i>NOTE: Accumulation is defined as date generated or date received from another handler.</i>		
12.	Is the handler able to demonstrate the length of time the universal waste has been accumulated? [3745-273-15(C)] If yes, describe below: Marking or labeling the container with the earliest date when the universal waste became a waste or was received.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
EMPLOYEE TRAINING		
13.	Are employees who handle or have the responsibility for managing universal waste informed of waste handling/emergency procedures, relative to their responsibilities? [3745-273-16]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
RESPONSE TO RELEASES		
14.	Are releases of universal waste and other residues immediately contained? [3745-273-17(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
15.	Is the material released characterized? [3745-273-17(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
16.	If the material released is a hazardous waste, was it managed as required in OAC Chapters 3745-50 through 3745-69? (If the waste is hazardous, the handler is considered the generator of the waste and is subject to OAC Chapter 3745-52) [3745-273-17(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
OFF-SITE SHIPMENTS		
<i>NOTE: If a SQUWH self-transport waste, then the handler must comply with the Universal Waste transporter requirements.</i>		
17.	Are universal wastes sent to either another handler, destination facility or foreign destination? [3745-273-18(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
18.	Is the handler aware of DOT requirements for packaging and shipping? If no, make aware of 49 CFR 171-180.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
19.	Prior to shipping universal waste off-site, does the originating handler ensure that the receiver agrees to receive the shipment? [3745-273-18(D)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
20.	Has the originating handler ever had an off-site shipment rejected by another handler or destination facility?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
a.	If yes, did the originating handler receive the waste back or agree to where the shipment was sent? [3745-273-18(E)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
21.	If a handler rejects a partial or full load from another handler, does the receiving handler contact the originating handler and discuss and do <u>one of the following</u> :	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
a.	Send the waste back to the originating handler or send the shipment to a destination facility (if both the originating and receiving handler agree)? [3745-273-18(F)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
22.	If the handler received a shipment of hazardous waste that was not a universal waste, did the SQUWH immediately notify Ohio EPA? [3745-273-18(G)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
EXPORTS		
23.	Is waste being sent to a foreign destination? If so:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
a.	Does the small quantity handler comply with primary exporter requirements in OAC rules 3745-52-53, 3745-52-56, and 3745-52-57? [3745-273-20(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
b.	Is waste exported only upon consent of the receiving country and in conformance with the U.S. EPA "Acknowledgment of Consent" as defined in OAC rules 3745-52-50 to 3745-52-57? [3745-273-20(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
c.	Is a copy of the U.S. EPA "Acknowledgment of Consent" provided to the transporter? [3745-273-20(C)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>