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State of Ohio Environmental Protection Agency

FILE COPY

STREET ADDRESS:

Central District Office

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Columbus, Ohio 43215

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P.O. Box 1049  
Columbus, OH 43216-1049

April 1, 2009

Mr. Jim Dillion and Kathy Gray  
Salvage One  
33 Cherry Street  
Richwood, OH 43344

Re: **Union County  
Salvage One  
Notice of Violation**

Dear Mr. Dillion and Ms. Gray:

During the morning March 24, 2009, Phil Famlacher and I from the Ohio EPA, along with Holly Rast and Paul Pryor of the Union County Health Department met with you and Kathy Gray, the property owner, at the Salvage One junk yard located at 33 Cherry Street in Richwood, Ohio. The purpose of our visit was to investigate a complaint alleging the improper disposal of construction and demolition debris and the improper management of Freon from junk automobiles. Upon talking with both you and Kathy Gray, it is our understanding that you are no longer wanting to be in the business of accepting scrap materials and are in the process of cleaning up the property.

Most of the cars on site were owned by Jack Kirby of Kirby's Auto Parts. You stated the fluids are recovered by Kirby's Auto Parts before they come onto the site. Kirby's Auto Parts has several Freon recovery units. Therefore Freon is not being released.

There was an area where engine cores were being stored on the ground and oil had spilled on to the ground. These cores were being shipped to Melalico Anncco at 943 Hazel Street, Akron, Ohio 44309.

Therefore the following Ohio Administrative Code (OAC) rule was violated:

1. **OAC 3745-279-22 (D):** calls for stopping the release of used oil, containing the release of used oil, and cleaning up the used oil and disposing of it properly.

There is oil on the ground in the area of the engine core storage at Salvage One.

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

Mr. Jim Dillion and Kathy Gray  
Salvage One  
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Salvage One should cleanup the oil contaminated soils in this area. This contaminated soil should be evaluated and disposed of properly. New gravel, pavement or clean hard fill can then be placed in this area. Clean soil is also acceptable.

This cleanup should be conducted as soon as possible but not longer than 30 days from receipt of this letter. A return to compliance inspection will be conducted upon completion of the work.

It does not appear that this violation will reoccur since the facility is closing.

Failure to list specific deficiencies in this communication does not relieve Salvage One from the responsibility of complying with all applicable hazardous waste regulations. This letter does not relieve Salvage One from liability for any past or present violations of Ohio's hazardous waste laws.

Please call me at 614-728-5036 if you have any questions about this correspondence.

Sincerely,



Chris Bulinski  
Environmental Specialist  
Division of Hazardous Waste Management  
Central District Office

c: CDO-File  
Kristina Durnell, DHWM/CO

**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](mailto:kristina.durnell@epa.state.oh.us)  
or mail it to Kristina Durnell, Central Office

<b>Site EPA ID No.</b> <b>Site Name</b>  <b>Site Location Information</b>  <b>Site Land Type</b> (check only one) <b>NAICS code(s)</b> <a href="http://www.census.gov/epcd/www/naics.html">www.census.gov/epcd/www/naics.html</a>	EPA ID Number: Name: <b>Salvage One</b>		Website: (Optional)	
	Street Address: <b>33 Cherry Street</b> City, Town, or Village: <b>Richwood</b> County Name: <b>Union</b>		State: <b>OH</b> Zip Code: <b>43344-1166</b>	
	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"/>
	<b>44131</b>			
<b>Facility Representative</b>  Additional names can be recorded in number 12  Only provide address information if it is different than the site address	First Name: <b>Jim</b>		MI:	
	Last Name: <b>Dillion</b>		Phone Number Extension:	
	Phone Number: <b>740-225-2003</b>		E-Mail Address:	
	Fax Number:		Fax Number Extension:	
	Street or P.O. Box:		City, Town or Village:	
	State:		Zip Code:	
<b>Legal Owner And Operator of the Site.</b> List Additional Owners and/or Operators in the Comment Section or on another copy of this form page	Name of Site's Legal Owner: <b>Kathy Gray</b>		Date Became Owner (mm/dd/yyyy):	
	Owner Type: <input checked="" type="checkbox"/>	Private <input type="checkbox"/>	County <input type="checkbox"/>	District <input type="checkbox"/>
			Indian <input type="checkbox"/>	Municipal <input type="checkbox"/>
			State <input type="checkbox"/>	Other <input type="checkbox"/>
	Street or P.O. Box:		Owner Phone #:	
	City, Town or Village:		Country:	
	State:		Zip Code:	
	Name of Site's Operator:		Date Became Operator (mm/dd/yyyy):	
	Operator Type: <input type="checkbox"/>	Private <input 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:		Operator Phone #:	
	City, Town or Village:		United States	
	State:		Zip Code:	

**VIOLATIONS CITED?**  Yes  No

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

<input checked="" type="checkbox"/> Not a HW Generator	<input type="checkbox"/> UNKNOWN: Cited for violation of 3745-52-11	<input type="checkbox"/> Large Quantity Generator (LQG)
		<input type="checkbox"/> Small Quantity Generator (SQG)
		<input type="checkbox"/> Conditionally Exempt Small Quantity Generator
		<input 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 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 type="checkbox"/> Hazardous Waste Transporter	<input type="checkbox"/> Smelting, Melting, Refining Furnace Exemption
<input type="checkbox"/> Treater, Storer or Disposer of Hazardous Waste	

**UNIVERSAL WASTE ACTIVITIES (INDICATE TYPES OF UNIVERSAL WASTE MANAGED (CHECK ALL BOXES THAT APPLY))**

<input 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**

Batteries  
 Pesticides  
 Mercury containing equipment  
 Lamps

**USED OIL ACTIVITIES (INDICATE TYPE(S) OF ACTIVITY(S))**

Used Oil Generator  
 Used Oil Transporter  
 Used Oil Transfer Facility  
 Used Oil Processor  
 Used Oil Re-refiner  
 Off-Specification Used Oil Burner  
 Used Oil Fuel Marketer Who Directs Shipment of Off-Spec. Oil  
 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.

**COMMENTS: USE THIS AREA TO DESCRIBE WHETHER THE INSPECTION WAS ANNOUNCED, WHETHER THE WASTE IS STORED IN TANKS OR CONTAINERS, ETC.**

Announced	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Additional Facility Representatives:	<b>Kathy Gray</b>
Tanks	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Other Comments:	<b>Engine cores leaking oil onto ground, no containers of oil.</b>
Containers	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		

Name of Inspector(s)	Name of Inspector(s)	Date of Inspection/Time (mm/dd/yyyy) (hh:mm)
<b>Chris Bulinski</b>	<b>Phil Farnlacher</b>	<b>3/24/2009 10:00AM</b>

**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)

