



State of Ohio Environmental Protection Agency

Southwest District Office

401 E. Fifth St.
Dayton, Ohio 45402

TELE: (937) 285-6357 FAX: (937) 285-6249
www.epa.state.oh.us

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

Prt
file

004/005

004

January 12, 2009

Re: **Twist Inc.-Plants 4 & 6**
Large Quantity Generator
OHD987035326
Greene County, SWDO
NOV/RTC

Mr. Steve Burnham
Twist Inc.
P.O. Box 177
Jamestown, Ohio 45335

Dear Mr. Burnham:

Thank you and for accompanying me during Ohio EPA's November 26, 2008 inspection of Twist Inc's Plant 6 in Xenia, Ohio. I inspected Twist Inc.. (Twist) 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). Dave Bennett of Twist was also present during the inspection.

I found the following violations of Ohio EPA's hazardous waste laws during my November 26, 2008 inspection:

1. **OAC Rule 3745-279-22(C)(1), Used Oil Storage Requirements for Generators-Used Oil Containers and Tanks must be labeled with the words Used Oil:** Containers used to store used oil at generator facilities must be labeled with the words "Used Oil".

During the inspection, a used oil tank was not labeled with the words "Used Oil".

Twist submitted a picture showing that the tank was labeled "Used Oil" on December 15, 2008. This action **corrected** the above violation.

2. **OAC Rule 3745-52-40, Manifest-Recordkeeping:** A generator of hazardous waste must retain their signed manifest as a record for at least three years from the date the waste was accepted by the initial transporter.

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During the inspection, signed copies of hazardous waste manifests dated January 10, 2006, January 31, 2006, February 27, 2007, April 30, 2007, June 11, 2007 and December 5, 2007 were not included with Twist's records.

Twist submitted the signed copies of these manifests (sent to them by their TSDs) on December 2, 2008 and December 15, 2008. This action **corrected** the above violation.

Concerns

Ohio EPA identified the following concerns during my November 26, 2008 inspection:

- 1) A hazardous waste sludge bag from Plant 4 being stored in your 90 day storage area was dated August 25, 2008. The earliest it could have been picked up was November 28, 2008 (given November 27, 2008 was Thanksgiving) and would have been stored for greater than 90 days. However, I discovered later during my inspection that the current sludge bag under the press in Plant 4 was dated November 17, 2008 and had no sludge stored in it. Twist believed that operators may have been incorrectly dating the bag when it was first placed under the press (and not when sludge first was placed in it). On December 15, 2008, you sent me an e-mail summarizing information you had previously discussed with me via telephone. You explained how you spoke with Tim Seymour (the person responsible for the hazardous waste in Plant 4) on December 1, 2008. He stated that when he puts a new bag under the press, he fills in the accumulation start date. However, it is typically 2-3 weeks after this when he first dumps any material in to the bag. You also explained that, in the future, the accumulation start date will not be filled in until material is placed in the bag. Therefore, this action **addressed this concern**.
- 2) Twist had a gap in weekly container inspections from March 2006 until October 2006. I originally informed you that this was a violation. However, I discovered that Ohio EPA asking for three years of inspection records is a policy (not a requirement-see A2 below). On December 2, 2008, Twist submitted the missing container inspections (still with some weekly gaps) and a new work procedure for the weekly inspection of your hazardous waste storage area. The scope of this procedure was for work instruction for checking the hazardous waste storage area. This action **addressed this concern**. However, thorough record keeping is important for documenting generator closure (versus the need to perform performance-based generator closure-refer to Ohio EPA and Twist correspondence regarding generator

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closure of a trailer outside of Plant 4 and liquid hazardous waste storage located near the plating shop in Plant 6 in 2003.

Info Requested by Twist

During the inspection, Twist requested info regarding the following ("Q" denotes Twist's questions, and "A" denotes Ohio EPA's answers):

Q1 What are the cutoff amounts for Small Quantity Universal Waste Handler (SQUWH) and Large Quantity Universal Waste Handler (LQUWH)? Also, what are the extra requirements for a LQUWH? What additional requirements exist for a Universal Waste Transporter.

A1 SQUWH is a universal waste handler who accumulates less than five thousand kilograms (11,025 lbs) of universal waste (batteries, pesticides, thermostats, or lamps, calculated collectively) at any time.

LQUWH is a universal waste handler who accumulates five thousand kilograms (11,025 lbs) or more total of universal waste (batteries, pesticides, thermostats, or lamps, calculated collectively) at any time. This designation as a LQUWH is retained through the end of the calendar year in which five thousand kilograms or more total of universal waste is accumulated.

I'm enclosing a Universal Waste Handler Requirements chart that outlines the differences between the two types of universal waste handlers and transporters (along with destination facilities).

Q2 How long do hazardous waste records need to be retained?

A2 Waste determinations - 3 years - 3745-52-40(C)
Annual reports - 3 years - 3745-52-40(B)
Signed copies of all manifests and any exception reports - 3 years - 3745-52-40
Personnel training records - for current personnel kept until closure of the facility, for former employees kept for at least three years from the date the employee last worked at the facility - 3745-65-16(E)
Land Disposal Restriction (LDR) documentation - 3 years - 3745-270-07(A)(8)

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Information still required by Twist

During the inspection, it was unclear what universal waste Twist generates. I won't be filling out the "CHECK ALL BOXES BELOW THAT APPLY FOR THE TYPES OF UNIVERSAL WASTE THE FACILITY MANAGES" section on page 2 of the RCRA Subtitle C Site Identification/Verification Form (copy enclosed) until Twist identifies what boxes should be checked. Twist should submit this information to this office for our review.

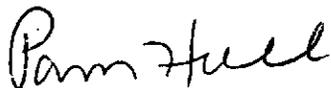
Pollution Prevention Discussion

The Ohio Department of Development's Office of Energy Efficiency may be able to help with energy efficiency issues. Their website is at: <http://www.odod.state.oh.us/cdd/oe/>

If you would like a free, non-regulatory on-site pollution prevention assessment or if you would like more information about pollution prevention, please contact me at (937)285-6091. Ohio EPA has helpful information about this at the following web address: <http://www.epa.state.oh.us/ocapp/ocapp/>

Please submit information regarding your universal waste generation **within 30 days** of your receipt of this letter. 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 (937)285-6091. You can find copies of the rules and other information on the division's web page at: <http://www.epa.state.oh.us/dhwm/>.

Sincerely,



Pam Hull
District Representative
Division of Hazardous Waste Management

Enclosures

cc: Dinah Crawford, SWDO-DHWM/SWDO file
SWDO-file: Twist Inc, LQG, Greene County
OHD987035326

NOTICE:

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

SPRING SPECIALISTS

TWIST
inc.

p.o. box 177 jamestown, ohio 45335 Telephone (937) 675-9581

FAX (937) 675-6781

December 9, 2003

Ohio EPA
401 E. Fifth St.
Dayton, OH 45402-2911

ATTN: Pam Hull

Subject: Letter dated 11/20/03

Dear Pam,

In response to the violations and/or concerns stated in subject letter, Twist submits the following corrective measures:

1. Attached are updates to the Contingency Plan, Hazardous Waste Management Program and Training Program. Specifically to the violation, the Contingency Plan reflects the updates we discussed for Emergency Spill Procedures.
2. Attached is a digital picture reflecting the sign you requested on where to pour used oil.
3. Attached is a copy of the updated Inspection Log Sheet for Hazardous Waste Storage Areas.
4. a. As we cannot effectively demonstrate closure of the trailer used to store solid hazardous waste, we have elected to take your advice and we triple washed the trailer in Plant 6 on 12/4/03. The wastewater was captured and ran through our wastewater treatment area.
b. Same as "a" above except the liquid hazardous waste storage area was triple rinsed.

Pam, in closing, I believe we have satisfied all your requests and if I can be of further assistance please feel free to call.

Regards,

Eric Waggoner

Eric Waggoner
Plant Manager

Cc: Don Maynard

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DEC 16 2003

SOUTHWEST DISTRICT



of it. I suggested that a sign be posted to clarify exactly where employees should pour used oil for disposal. Before I left on November 4, 2003, Don Maynard explained that the sign had already been ordered. Therefore, Twist should send documentation (e.g., photographic) that this new sign has been posted.

- 2) Twist's ***Inspection Log Sheet for Hazardous Waste Storage Areas*** should be updated to reflect the current "hazardous waste storage areas to be inspected" (in-process satellite accumulation of solids and new storage area located near the staging area). Right now the log sheet indicates that three areas need to be inspected. Therefore, Twist should send documentation that the inspection log sheet has been updated.
- 3) Twist still need to demonstrate that they have performed generator closure of the previous hazardous waste storage areas (trailer outside of Plant 4 and liquid hazardous waste storage (lhws) located near the plating shop in Plant 6). Twist ceased using these storage areas in February of 2003.
 - a) Twist was able to submit inspection documentation (weekly inspections during life of the storage area showing no spills or leaks) for the lhws located near the plating shop in Plant 6. Twist still needs to submit a signed statement that there have been no released in this previous storage area.
 - b) Given Twist was not keeping any inspection records of the solid hazardous waste storage (shws) trailer outside of Plant 4 when it was inspected by Ohio EPA on 12/5/95, performance-based generator closure (e.g., triple rinsing) of the trailer needs to be conducted; to-date Twist has not completed generator closure of this previous storage trailer. Don Maynard explained on November 4, 2003 that Twist still is in possession of this trailer. Twist still needs to perform generator closure of this previous shws trailer.

As discussed during the inspection, you may be able to reduce the costs associated with waste generation, treatment and disposal and possibly reduce those regulatory requirements if you eliminate or reduce the amount of waste that your company generates or find ways to recycle those wastes. During the inspection, you explained that Twist has completed their own pollution prevention activities; therefore, Twist was not interested in a pollution prevention assessment by Ohio EPA.

If you would like to be considered for an in depth on-site pollution prevention assessment or if you need any assistance with pollution prevention please contact me at (937) 285-6083. Also, Ohio EPA also has helpful information about pollution prevention at the following web address: <http://www.epa.state.oh.us/opp>.



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NOTIFICATION/CERTIFICATION FORM - UTS



Note: This form is used when treatment standards for constituents do not have to be specified.

CUSTOMER INFORMATION:

Generator Name: TWIST INC
Pickup Address: 47 S. Limestone, Jamestown, Ohio
Generator EPA ID#: OH098703532
Manifest Document # per Item 1 of Manifest: 19501
State Manifest Document #: 45335
Envirite Waste Stream per Manifest Item #: 11a. CS1548

Table with 4 columns: MANIFEST ITEM NUMBER, EPA HAZARDOUS WASTE NUMBER, TREATABILITY GROUP, and SUBCATEGORY. Row 1: 11A, F019, Non-Waste Water.

* The subcategories "Acid," "Alkaline," "Reactive Cyanides," and "Reactive Sulfides" are described at 40 CFR 261.

SECTION 1: Restricted Wastes Requiring Treatment prior to Land Disposal

The purpose of this section is twofold: 1) to notify the designated facility specified on the referenced manifest that the subject waste does not meet applicable land disposal treatment standards set forth in 40 CFR 268 Subpart D [or exceeds the applicable prohibition levels set forth in 40 CFR 268.32 or RCRA section 3004(d)], and 2) to apprise the designated facility that, before being land disposed, the waste must be treated to comply with the applicable standards of 40 CFR 268 subpart D, 40 CFR 268.32, and RCRA 3004(d).

Printed Name: Kenneth S. Middleton Signature/Date: Kenneth S. Middleton, 1-9-95

SECTION 2: Restricted Wastes from Generators that Can be Land Disposed Without Further Treatment

The purpose of this section is twofold: 1) to notify the designated facility specified on the referenced manifest that the subject waste can be land disposed without further treatment; and 2) to certify that the waste meets the standards referenced above and does not exceed the applicable prohibitions set forth in 40 CFR 268 subpart D, 40 CFR 268.32, and RCRA section 3004(d).

I certify under penalty of law that I personally have examined and familiar with the waste through testing or through knowledge the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR 268 Subpart D and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA 3004(d). I believe that the information I submitted is true, accurate, and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.

Printed Name: Signature/Date:

SEND ORIGINAL WITH SHIPMENT TO ENVIRITE - RETAIN COPY FOR YOUR FILES

WASTE PROFILE INFORMATION FORM



If you need help with this form, please consult your Envirite Technical Marketing Representative or refer to Instructions for Completing Waste Profile Information Form.

I. CUSTOMER INFORMATION:

Name of Generator Twist Inc. / Acc-u-coil Div. SIC 3471
Facility Address 47 S. Limestone Jamestown Ohio 45335
Pickup Address 1380 LaVelle Dr. Xenia Ohio 45385
Primary Contact Ken Montgomery / Ken Middleton Title Plant Mgr. / Asst. Plant Mgr. Phone (513) 675-9581
Technical Contact Charlie Garman Title Plating Supervisor Phone same as above
Emergency Contact Same After-hours Phone Same
Parent Company Same
Generator USEPA ID# OH D 987035326 Generator State ID#
Customer Address for Invoicing Twist Inc. / Acc-u-coil Div.
1430 LaVelle Dr. Xenia Ohio 45385
Pat Burke (513) 675-9581

II. WASTE INFORMATION:

Generator's Description/Identification of Waste Metal Hydroxide Sludge
Physical State at 20°C (68°F) - (Check one box.) [X] Solid [] Powder [] Sludge [] Liquid
Other Characteristics - (Must complete "Color" and "Number of Phases." Complete others if known.)
Color Brown TOX n/a ppm BOD n/a ppm Percent Free Liquid 0
Number of Phases 1 Oils/Grease n/a ppm TOC n/a ppm Flash Point > 140 °F
Percent Solids 100 pH 9-10

Generator Storage Method - (Check one box.)
[] Tank [] Roll Off [] Dump Trailer [] Bags [X] Drums [] Surface Impoundment [] Other
Does this waste contain flammables? [] Yes [X] No Comments
Does this waste have an obvious odor? [] Yes [X] No If "yes," describe
Does this waste produce any explosive, combustible or toxic gases upon neutralization with lime? [] Yes [X] No

Comments:
Waste Quantity: Estimated Volume 3 tons Estimated Frequency per quarter

SHADED AREA FOR ENVIRITE USE ONLY



III. PROCESS INFORMATION:

The information provided in this Section will be used by Enviro to verify the waste codes identified in Section IV. Please describe in detail the process which generates this waste. (Include plating activity [i.e., nickel, chrome, copper], raw solutions and base metals being plated.) It is important for this information to describe the process that actually generates the waste, namely the process that first causes the waste to be regulated as hazardous. (Attach additional sheets or diagrams if necessary.)

Plating process including acid zinc chloride, zinc phosphate, passivation, electropolishing, and aluminum chromate, + zinc chromating.

Are other products used in this area which may contaminate the waste (i.e., cleaning solutions or any other chemicals used by maintenance personnel)? Yes No If "yes," identify material and attach copy of Material Safety Data Sheet if available.

Material: _____

Are paint-stripping operations on site? Yes No

Are cyanide-plating operations on site? Yes No

IV. HAZARDS INFORMATION:

Is the waste a RCRA Hazardous Waste as described per 40 CFR 261 or equivalent state regulations? Yes No
Please identify all EPA Hazardous-Waste Numbers which apply to the waste by placing an "X" in the box next to the codes specified below. In the blank space(s) provided, please specify any (all) other Hazardous-Waste Numbers that apply.

Characteristic Hazardous Wastes		Listed Hazardous Wastes		
<input type="checkbox"/> D001 (Oxidizers)	<input type="checkbox"/> D007 (Chromium)	<input type="checkbox"/> F006	<input type="checkbox"/> K002	<input type="checkbox"/> K007
<input type="checkbox"/> D002 (Corrosive)	<input type="checkbox"/> D008 (Lead)	<input type="checkbox"/> F007	<input type="checkbox"/> K003	<input type="checkbox"/> K008
<input type="checkbox"/> D003 (Reactive)	<input type="checkbox"/> D009 (Mercury)	<input type="checkbox"/> F008	<input type="checkbox"/> K004	<input type="checkbox"/> K062
<input type="checkbox"/> D004 (Arsenic)	<input type="checkbox"/> D010 (Selenium)	<input type="checkbox"/> F009	<input type="checkbox"/> K005	
<input type="checkbox"/> D005 (Barium)	<input type="checkbox"/> D011 (Silver)	<input type="checkbox"/> F011	<input type="checkbox"/> K006	
<input type="checkbox"/> D006 (Cadmium)		<input type="checkbox"/> F012		
<input type="checkbox"/> Other _____		<input checked="" type="checkbox"/> F019	<input type="checkbox"/> Other _____	

Does the waste contain free liquid?* Yes No

Is the waste subject to Land Disposal Restrictions (LDR) per 40 CFR 268 or its equivalent state regulations? Yes No

Does this waste require treatment to conform to Land Disposal Restrictions? Yes No Varies

Per the LDR program's definition, the waste is a: Wastewater† Nonwastewater**

Has EP Toxicity, TCLP or any other testing been done? Yes No If "yes," please attach a copy of the most recent reports.

Does the liquid portion of the RCRA Hazardous Waste contain nickel \geq 134 mg/l? No Yes Specify _____ mg/l

Does the liquid portion of the RCRA Hazardous Waste contain thallium \geq 130 mg/l? No Yes Specify _____ mg/l

If the waste is not a RCRA Hazardous Waste as described by federal or state regulation, is it regulated as a "special waste" in the state from which it is being shipped? Yes No Not Applicable Please provide applicable codes.

* As determined by Method 9095 (Paint Filter Liquids Test) described in "Test Methods for Evaluating Solid Wastes, Physical/Chemical Methods." (EPA Publication No. SW-846, 2nd edition)

† "Wastewaters" are wastes that contain less than 1% total organic carbon (TOC) and less than 1% total suspended solids (Nonfilterable Residues Test — Method No. 160.2 Methods for Chemical Analysis of Water and Wastes, EPA — 600/4-79-020, March 1983).

** "Nonwastewaters" are those wastes that do not meet the definition of "Wastewaters."

V. WASTE CONSTITUENTS:

The waste constituent information may be supplied either on the basis of the generator's knowledge or laboratory analysis. It must be comprehensive, as it will be used to ensure the health and safety of our laboratory personnel and as a comparison to Enviro's analysis of the representative sample submitted. Please address each line entry. Also, note that "TOTAL," not leachable, concentrations are requested below. All unmarked units will be assumed to be mg/kg. If other units are used, please include the proper units with the concentration. If you need help with this section, consult your Enviro Technical Marketing Representative or refer to *Instructions for Completing Waste Profile Information Form.*

METALS

	TOTAL CONCENTRATION
Aluminum	present
Arsenic	<LDR
Barium	<LDR
Beryllium	NO
Boron	NO
Cadmium	<LDR
Chromium	present
Chromium (+6)	present
Copper	present
Iron	present
Lead	NO
Manganese	NO
Mercury	NO
Nickel	low level
Selenium	NO
Silver	NO
Tin	NO
Zinc	present
Other	

ANIONS

	TOTAL CONCENTRATION
Chloride	NO
Sulfate	NO
Nitrate	possibly
Fluoride	NO
Phosphate	present

CHELATING AGENTS

	TOTAL CONCENTRATION
Ammonia	NO
Cyanide Total	NO
Cyanide Amenable	NO
Cyanide Leachable	NO
Other	NO

VOLATILE ORGANIC COMPOUNDS

	TOTAL CONCENTRATION
Acrylonitrile (vinyl cyanide)	n/a
Benzene	
Bis(chloromethyl) ether	
Methylene chloride	
Methylchloromethyl ether	
Methyl ethyl ketone	
Tetrachloroethylene	
Trichloroethylene	
Vinyl chloride	
Carbon tetrachloride	
Chloroform	
Other	
Other	
Other	

SEMI-VOLATILE ORGANIC COMPOUNDS

	TOTAL CONCENTRATION
1,2-Diphenylhydrazine	n/a
1-Naphthylamine	
2-Naphthylamine	
Anthracene	
Benzidine	
Dioxins	
Ethyleneimine	
N-Nitrosodimethylamine	
p-Nitrosodiphenylamine	
Phenol	
Other	
Other	
Other	

GENERAL

	TOTAL CONCENTRATION
Asbestos	n/a
Carcinogens	
Herbicides	
PCBs	
Pesticides	
Radioactives	
Solvents	
Organometallic Compounds	
Other	
Other	
Other	

VI. TRANSPORTATION INFORMATION:

Proper DOT Shipping Name RQ. Hazardous Waste #05 Solid N.O.S.

DOT Hazard Class 9 pg 3 DOT UN/NA Number NA 3077

Will the temperature of the waste to be transported ever be greater than 110°F? Yes No

Comments: _____

Are special precautions required at the time of pickup? Yes No If "yes," indicate precautions: _____

Is Envirote handling transportation? Yes No Unresolved If "no," and you know who will be transporting the waste, please complete the following information:

Transporter Name _____

Transporter EPA ID# _____ State Transporter ID# _____

Transporter Contact _____ Phone _____

After-hours Emergency Contact _____ Phone _____

VII. SAMPLING:

Type of Sampler — (Check one box.) Coliwasa Sludge Judge Auger Other

Is this a composite sample? Yes No If "yes," indicate how many samples: _____

Identify source of sample (e.g., lagoon, tank, etc.) drum



Date of Sampling 11/3/93 Time of Sampling 11:15 AM/PM

Sampler's Signature Ken Middleton

Sampler's Name Ken Middleton

Title and Affiliation of Sampler Asst. ^{Plant} Mgr.

VIII. CERTIFICATION:

I hereby avow that any pertinent information that is known by the generator concerning possible hazards has been disclosed in the information contained herein and attached to this form. I certify that I have designated the location point(s) for sample collection and the sample accompanying this document is representative of the waste that will be shipped to Envirote. I confirm that, to the best of my knowledge, all statements and attachments are correct and accurate representations of this waste material.

Signature Ken Middleton Title Asst. Plt. Mgr.

Name Ken Middleton Date 11/3/93

All information submitted on this form and its attachments will be kept confidential within the limits of existing environmental laws and regulations. We suggest that you retain a copy of this form and its attachments for your records.

✓

**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: \geq 1,000 Kg. (300 gallons) of waste in a calendar month or \geq 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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input 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 type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
a.	Has the generator notified U.S. EPA of export activity? [3745-52-53(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
b.	Has the generator complied with special manifest requirements? [3745-52-54]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

e.	Are export related documents being maintained on-site? [3745-52-57(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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)]	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)] Twist submitted 6 manifests (with all items completed) they received from their TSDs on 11/26/08 to Ohio EPA on 12/2/08 and 12/15/08.	Yes <input type="checkbox"/> No <input checked="" 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)]</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 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>		
17.	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"/>
18.	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"/>
19.	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		
20.	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"/>
21.	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"/>
22.	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"/>
23.	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"/>
24.	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"/>
25.	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"/>
26.	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

27.	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"/>
28.	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)]

29.	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"/>
30.	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"/>
31.	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

32.	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

33.	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"/>
34.	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.

35.	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"/>
36.	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"/>
37.	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"/>
38.	If there is only one employee on the premises, is there immediate access to a device (eg., 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"/>
39.	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"/>
40.	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"/>
41.	Where authorities have declined to enter into arrangements or agreements, has the generator documented such a refusal? [3745-65-37(B)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

SATELLITE ACCUMULATION AREA REQUIREMENTS

42.	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"/>

43.	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 type="checkbox"/> N/A <input checked="" type="checkbox"/>

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

44.	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"/>
45.	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"/>
46.	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.

47.	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"/>
48.	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"/>
49.	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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
50.	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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
51.	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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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.

52.	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)] On December 9, 2003, Twist documented generator closure of two 90 days storage areas (a trailer outside of Plant 4 and liquid hazardous waste storage located near the plating shop in Plant 6). Copies of our correspondence is included for your reference.	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-No waste was ready for transport during 11/26/08 CEI

53.	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 type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
54.	Does each container <110 gallons have a completed hazardous waste label? [3745-52-32(B)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
55.	Before off-site transportation, does the generator placard or offer the appropriate DOT placards to the initial transporter? [3745-52-33]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

USED OIL INSPECTION CHECKLIST (Short Version)

NOTE: This checklist does not include requirements for used oil transporters and transfer facilities, processors and re-refiners, burners, and marketers.

PROHIBITIONS

1. Does the generator manage used oil in a surface impoundment or waste pile? If yes: Yes No N/A RMK#
- Is the surface impoundment or waste pile regulated as a hazardous waste management unit? [3745-279-12(A)] Yes No N/A RMK#
2. Is used oil used as a dust suppressant? [3745-279-12(B)] Yes No N/A RMK#
3. Is off-specification used oil fuel burned for energy recovery in devices specified in 3745-279-12(C)? Yes No N/A RMK#

Note: Multiple sections of used oil checklist may be applicable if used oil handler is performing multiple tasks (e.g., If generating used oil and shipping directly to a burner, complete generator and marketer checklist at a minimum).

USED OIL GENERATOR STANDARDS

4. Does the generator mix hazardous waste with used oil? [3745-279-21(A)] If yes: Yes No N/A RMK#
- Note:** Used Oil mixed with listed (3745-51-30 to 3745-51-35) or characteristic (3745-51-20 to 3745-51-24) hazardous waste are subject to regulation as a hazardous waste, unless the listed hazardous waste is listed solely because it exhibits a hazardous characteristic, and the resultant mixtures do not exhibit a characteristic. Mixtures of used oil and CESQG hazardous waste are subject to OAC Chapter 3745-279.
5. Does the generator of a used oil containing greater than 1,000 ppm total halogens manage the used oil as a hazardous waste unless the presumption is rebutted successfully? [3745-279-21(B)] Yes No N/A RMK#
- NOTE:** If used oil contains greater than 1000 ppm total halogens, it is presumed to be listed hazardous waste until the presumption is successfully rebutted.
6. Does the generator only store used oil in tanks; or, containers, or a unit(s) subject to regulation as a hazardous waste management unit? [3745-279-22(A)] Yes No N/A RMK#

7. Are containers and aboveground tanks used to store used oil in good condition with no visible leaks? [3745-279-22(B)] Yes No N/A RMK#
8. Are containers, above ground tanks, and fill pipes used for underground tanks clearly labeled or marked AUsed Oil?@ [3745-279-22(C)] Yes No N/A RMK# 1
9. Has the generator, upon detection of a release of used oil, done the following: [3745-279-22(D)]
- a. Stopped the release? Yes No N/A RMK#
- b. Contained the release? Yes No N/A RMK#
- c. Cleaned up and properly managed the used oil and other materials? Yes No N/A RMK#
- d. Repaired or replaced the containers or tanks prior to returning them to service, if necessary? Yes No N/A RMK#

ON-SITE BURNING IN SPACE HEATER

10. Does the generator burn used oil in used fired space heaters? [3745-279-23] If so: Yes No N/A RMK#
- a. Does the heater burn only used oil that owner/operator generates or used oil received from household do-it-yourself (DIY) used oil generators? Yes No N/A RMK#
- b. Is the heater designed to have a maximum capacity of not more than 0.5 million BTU per hour? Yes No N/A RMK#
- c. Are the combustion gases from heater vented to the ambient air? Yes No N/A RMK#

GENERATOR TRANSPORTATION

11. Does the generator have the used oil hauled only by transporters that have obtained U.S. EPA ID#, unless the generator qualifies for an exemption pursuant to 3745-279-24 (self transportation or tolling agreements)? [3745-279-24] Yes No N/A RMK# 2

COLLECTION CENTERS AND AGGREGATION POINTS

12. Is the DIY used oil collection center in compliance with the generator standards in 3745-279-20 to 3745-279-24? [3745-279-30] Yes ___ No N/A RMK#
13. Is the non-DIY used oil collection center registered with Ohio EPA? [3745-279-31] Yes ___ No N/A RMK#
14. Is the used oil aggregation point in compliance with the generator standards in 3745-279-20 to 3745-279-24? [3745-279-32] Yes ___ No N/A RMK#
- NOTE: Complete Used Oil Generator and any other applicable used oil handler checklist (e.g., marketer, burner, ect.) for used oil collection centers and aggregation points.

L:\Inspection Checklist\MegaSet Rule Updates\USED OIL.SHORT.11.2004.fin.megaset.wpd

REMARKS

- 1 During Ohio EPA's November 26, 2008 inspection, a used oil tank was not labeled with the words "Used Oil". Twist submitted a picture showing that the tank was labeled "Used Oil" on December 15, 2008. This action **corrected** the above violation.
- 2 Ohio EPA received Twist's used oil disposal records with Heritage Crystal Clean (ILR000130062) for 2008 on December 5, 2008.



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PROCESS, WASTE, P2 SUMMARY SHEET

Facility Name: Twist Inc. Facility Type: LQG SQG CESQG TSD Date of Inspection: 11/26/08 EPA ID#: OHD987035326

Waste Generated			On- or Off-Site Management		P2 Activities	
Process/Activity Generating Waste <small>(e.g. plating bath, machining, baghouse, painting, general maintenance, etc)</small>	Waste Description <small>(e.g. sludge, solvent, ash, used oil, spent lamps, etc.) and EPA Waste Code, if applic.</small>	QTY Generated per Month, Type of Accumulation (container, tank, etc) and location of waste accumulation area	Type of On-Site Treatment (recycle, wwt, etc)	Name, state, and type of activity occurring at the off-site facility.	Current P2 Activities	P2 Opportunities
1	Wastewater Treatment Filter Press Cake F019 F006	> 10 tons SAA-WWT HWAA-near staging area		Envirite of Ohio, TSD		
2	Zinc Nickel Bath cleanout Zinc Nickel Solution	20 tons/year		Clean Water Limited, TSD, Dayton OH		
3						
4						
5						
6						
7						

8							
9							

REMARKS **GENERAL INFORMATION**

General Process Information:

Twist plates internal products and those for external clients who use Twist exclusively for their plating services. Twist utilizes barrel and rack plating methods

Regulatory/Enforcement History (if applicable):

Additional P2 remarks and information:

Would this facility be interested in a P2 assessment? Yes* No *If yes, refer promptly to your district P2 coordinator.
 Office of Compliance Assistance and Pollution Prevention - 1-800-329-7518 or p2mail@epa.state.oh.us or www.epa.state.oh.us/ocapp/ocapp.html

Other:

GENERATOR LDR CHECKLIST
EVALUATED F006, F019 FILTER PRESS CAKE WASTE (SAME AS 2003 CEI)

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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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"/>
<p><i>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).</i></p>		
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 type="checkbox"/> No <input checked="" 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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
<p><i>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.</i></p>		

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"/>
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NOTE If a 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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
NOTE: Not required if the TSD tests its treatment residues for all underlying hazardous constituents.			
PROHIBITED DILUTION			
12.		Is the HW treated by burning? This element is not a required paperwork item in Column A of Table 1 of OAC 3745-270-07; additionally, per information provided in the 1999 version of Elsevier's 1999 LDR Compliance Guide, "EPA simplified (with promulgation of the Phase II LDR rule) the LDR notification requirements by deleting the requirement to list the treatments standards for each waste identified on the notifications form that accompanies each shipment". If a No, go to #15.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
13.		Is the HW a metal-bearing HW?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
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 are 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)]	
	i.	Contains > 1% TOC?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	ii.	Contains organic constituents or cyanide at levels greater than the UST levels?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	iii.	Is made up of combustible material e.g., paper, wood, plastic?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	iv.	Has a reasonable heating value (e.g., > 5000 Btu)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	v.	Co-generated with a HW that must be combusted?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	b.	If all responses to 14 a.i. through 14 a.v. are aNo, 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 checked="" type="checkbox"/>

15.	Was the HW treated by wastewater treatment?		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	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"/>
<i>NOTE: If Yes, HW is improperly being treated by dilution.</i>			
	b.	Does the waste carry the D001 code <u>and</u> contain $\geq 10\%$ TOC?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	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"/>
<i>NOTE: If the answers to b & c are Ayes@ and Ano@, respectively, waste is improperly being treated by dilution and generator is in violation of [3745-270-03(B) and 3745-270-40(A)(3)].</i>			
<i>NOTE: A list of separation/recovery processes are given in 3745-270-42 under RORG.</i>			
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"/>
	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 type="checkbox"/> N/A <input checked="" type="checkbox"/>
	If AYes@...complete the rest of the checklist. If ANo@...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 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 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 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 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 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 type="checkbox"/> N/A <input type="checkbox"/>
NOTIFICATION FORM			
17.	a.	Contains all information in #11 a-g above and	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b.	If the treated HW/soil is listed.....notification contains the following certification statement: A I certify under penalty of law that I personally have examined and am familiar with the waste, through analysis and testing or trough knowledge of the waste, to support this certification that the waste complies with the treatment stands 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 checked="" type="checkbox"/> No <input 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 type="checkbox"/> N/A <input checked="" type="checkbox"/>
	ii.	Maintain a copy of the notice onsite?[3745-270-09(D)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 type="checkbox"/> N/A <input checked="" type="checkbox"/>
			2. Description of HW when generated?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
			3. HW code when generated?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
			4. Treatability group when generated?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
			5. Underlying hazardous constituents present when generated?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
		iv.	Contain the right certification statement as required by 3745-70-07(b)(4)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

**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	EPA ID Number: OHD987035326 Name: Twist Inc Plants 4 & 6 (contiguous)		Website: (Optional)					
	Street Address: 1370 and 1380 Lavelle Dr. City, Town, or Village: Xenia County Name: Greene		State: OH Zip Code: 45385					
Site Land Type (check only one) NAICS code(s) www.census.gov/epcd/www/naics.html	Private <input checked="" type="checkbox"/>	County <input type="checkbox"/>	District <input checked="" type="checkbox"/>	Federal <input type="checkbox"/>	Indian <input type="checkbox"/>	Municipal <input type="checkbox"/>	State <input type="checkbox"/>	Other <input type="checkbox"/>
	33612		332812		332813			

Facility Representative Additional names can be recorded in number 12 Only provide address information if it is different than the site address	First Name: Steve	MI:	Last Name: Burnham
	Phone Number: 937-675-9581 E-Mail Address: sburnham@twistinc.com Fax Number: 937-675-6781 Street or P.O. Box: P.O. Box 177 City, Town or Village: Jamestown State: OH		Phone Number Extension: Fax Number Extension:

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:		Date Became Owner (mm/dd/yyyy):						
	Owner Type:	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: City, Town or Village: State:		Owner Phone #: Country:		Zip Code:				
	Name of Site's Operator:		Date Became Operator (mm/dd/yyyy):						
	Owner Type:	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: City, Town or Village: State:		Operator Phone #: United States		Zip Code:					

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 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 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

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.

REFER	TO	Twist's	2007	ANNUAL	REPORT	INFO
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:		Dave Bennett	
Tanks	<input type="checkbox"/> Yes	<input checked="" 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)
Pam Hull		11/26/08 at 10:00

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)