

File
003



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

March 5, 2007

**Re: Daido Metal Bellefontaine L.L.C.
Large Quantity Generator
OHR000131433
Logan County
Compliance Evaluation Inspection
Return to Compliance, Concerns
Addressed and Additional Violation
Cited and Corrected**

Mr. Adam Bates
Daido Metal Bellefontaine L.L.C.
1215 S. Greenwood St.
Bellefontaine, OH 43311

Dear Mr. Bates:

Thank you for Daido Metal Bellefontaine LLC's February 2, 2007 e-mail with attachments and fax and February 5, 2007 e-mail in response to Ohio EPA's January 23, 2007 Notice of Violation letter. The February 2, 2007 e-mail (with attached pictures) addressed Ohio EPA's violation cited in our January 23, 2006 letter. The February 2, 2007 e-mail with attachments and fax and February 5, 2007 e-mail addressed concerns identified in Ohio EPA's January 23, 2007 letter regarding universal waste generation, hazardous waste storage and emergency equipment inspection records and employee training conducted in 2004 and 2005.

Daido Metal Bellefontaine LLC (DMB) corrected the following violation of Ohio's hazardous waste laws:

**1. Accumulation Time of Hazardous Waste
OAC 3745-52-34(C)(1)(b)**

A generator must label satellite accumulation drums with the words "Hazardous Waste" or words to identify the contents.

During the December 19, 2006 inspection, DMB failed to label its F006 hazardous waste roll off box located in the wastewater treatment plant with the words "Hazardous Waste" or any others identifying its contents.

DMB submitted proof of labeling to our office on February 2, 2007; this action **corrected** the above violation.

Mr. Adam Bates
March 5, 2007
Page 2

Additional Violation Cited (and Corrected) Based upon February 2, 2007 and February 5, 2007 information received from DMB

1. **Inspections**
OAC 3745-66-74

A generator must inspect their hazardous waste storage area (hwsa) at least weekly, looking for leaks and for deterioration and record these inspections in a log or summary.

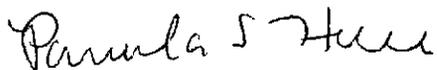
Partial 2006 inspection records were obtained from DMB during Ohio EPA's December 19, 2006 inspection. No further records were obtained from DMB's February 2, 2007 e-mail and fax.

DMB's February 5, 2007 e-mail explained how DMB will ensure that weekly inspection records will occur; this action **corrected** the above violation.

I'm also sending you a completed **RCRA Subtitle C Site Identification/Verification Form** (copy enclosed) based upon DMB's universal waste info. Also, I'm sending the **LARGE QUANTITY REQUIREMENTS** with Questions 24, 34 and 45 filled out based upon DMB's February 2, 2007 and February 5, 2007 e-mails.

If you have any questions, please call me at (937) 285-6091.

Sincerely,



Pamela Hull
Environmental Specialist 2
Division of Hazardous Waste Management

Enclosures

cc: Dinah Crawford, SWDO-DHWM/SWDO file
SWDO-file: Daido Metal Bellefontaine L.L.C., LQG, OHR000131433, Logan County

PH/mab

19. Does the personnel training program include instructions to ensure that facility personnel are able to respond effectively to emergencies by familiarizing them with emergency procedures, emergency equipment and emergency systems (where applicable)? [3745-65-16(A)(3)(a-f)] Yes No N/A
20. Is the personnel training program directed by a person trained in hazardous waste management procedures? [3745-65-16(A)(2)] Yes No N/A
21. Do new employees receive training within six months after the date of hire (or assignment to a new position)? [3745-65-16(B)] Yes No N/A
22. Does the generator provide annual refresher training to employees? [3745-65-16(C)] Yes No N/A
23. Does the generator keep records including: job titles [D(1)], job descriptions [D(2)], type and amount of training given to each person [D(3)] and documentation of completed training or job experience required [D(4)]? [3745-65-16(D)] Yes No N/A
24. 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 No N/A

DMB provided Ohio EPA with remaining training records on 2/2/07.

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.

<u>Job Performed</u>	<u>Name of Employee</u>	<u>Date Trained</u>

CONTINGENCY PLAN

25. 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 No N/A
26. 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 No N/A
 - b. Arrangements with emergency authorities [3745-65-52(C)]. Yes No N/A
 - 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 No N/A
 - d. A list of all emergency equipment, including: location, a physical description and brief outline of capabilities? [3745-65-52(E)] Yes No N/A
 - e. An evacuation plan for facility personnel where there is possibility that evacuation may be necessary? [3745-65-52(F)] Yes No N/A

NOTE: If the facility already has a "Spill Prevention, Control and Counter measures 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)]

27. 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 No N/A

28. 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 No N/A

29. Is an emergency coordinator available at all times (on-site or on-call)? [3745-65-55] Yes No N/A

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

30. Has there been a fire, explosion or release of hazardous waste or hazardous waste constituents since the last inspection? If so: Yes No N/A

A release of hazardous waste occurred at DMB on 6/23/05.

a. Was the contingency plan implemented? [3745-65-51(B)] Yes No N/A

b. Did the facility follow the emergency procedures in 3745-65-56(A) through (H)? Yes No N/A

c. Did the facility submit a report to the Director within 15 days of the incident as required by 3745-65-56(J)? Yes No N/A

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

31. Is the facility operated to minimize the possibility of fire, explosion, or any unplanned release of hazardous waste? [3745-65-31] Yes No N/A

32. Does the generator have the following equipment at the facility, if it is required due to actual hazards associated with the waste:

a. Internal alarm system? [3745-65-32(A)] Yes No N/A

b. Emergency communication device? [3745-65-32(B)] Yes No N/A

c. Portable fire control, spill control and decon equipment? [3745-65-32(C)] Yes No N/A

d. Water of adequate volume/pressure? [3745-65-32(D)] Yes No N/A

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

33. Is emergency equipment tested (inspected) as necessary to ensure its proper operation in time of emergency? [3745-65-33] Yes No N/A

34. Are emergency equipment tests (inspections) recorded in a log or summary? [3745-65-33] Yes No N/A



43. Is the accumulation date on each container? [3745-52-34(A)(2)] Yes No N/A
44. Are hazardous wastes stored in containers which are:
- a. Closed (except when adding/removing wastes)? [3745-66-73(A)] Yes No N/A
 - b. In good condition? [3745-66-71] Yes No N/A
 - c. Compatible with wastes stored in them? [3745-66-72] Yes No N/A
 - d. Handled in a manner which prevents rupture/leakage? [3745-66-73(B)] Yes No N/A

NOTE: Record location on process summary sheets and photograph the area.

45. Is the container accumulation areas(s) inspected weekly? [3745-66-74] Per ORC§1.44(A) "Week" means seven 7 consecutive days. Yes No N/A

In a February 5, 2007 e-mail DMB provided Ohio EPA with an explanation regarding how it will ensure that weekly inspections will occur. This violation was corrected with this information.

- a. Are inspections recorded in a log or summary? [3745-66-74] Yes No N/A

In a February 5, 2007 e-mail DMB provided Ohio EPA with an explanation regarding how it will ensure that weekly inspections will occur. This violation was corrected with this information.

46. Are containers of ignitable or reactive wastes located at least 50 feet (15 meters) from the facility's property line? [3745-66-76] Yes No N/A

47. 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 No N/A

48. 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 No N/A

49. 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 No N/A

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.

50. 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 No N/A

NOTE: Please provide a description of the unit and documentation provided by the generator 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

51. 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 No N/A

52. Does each container <110 gallons have a completed hazardous waste label? [3745-52-32(B)] Yes No N/A



12/1/19

10. Type of Regulated Waste Activity (Mark in all of the appropriate boxes.)

A. Hazardous Waste Activities																
(choose only one of the following categories)																
<input checked="" type="checkbox"/> a. Large Quantity Generator (LQG): <input type="checkbox"/> b. Small Quantity Generator (SQG) <input type="checkbox"/> c. Conditionally Exempt Small Quantity Generator <input type="checkbox"/> d. United States Importer of Hazardous Waste <input type="checkbox"/> e. Mixed Waste (hazardous and radioactive) Generator	3. Treater, Storer or Disposer of Hazardous Waste 5. Exempt Boiler and/or Industrial Furnace <input type="checkbox"/> a. Small Quantity On-site Burner Exemption <input type="checkbox"/> b. Smelting, Melting, Refining Furnace Exemption 6. Underground Injection Control Facility															
B. Universal Waste Activities																
<input checked="" type="checkbox"/> 1. Small Quantity Handler of Universal Waste (Indicate types of universal waste generated and/or accumulated (check all boxes that apply): <input type="checkbox"/> 2. Large Quantity Handler of Universal Waste (accumulates 5,000 kg or more). <input type="checkbox"/> 3. Destination Facility for Universal Waste (Check all boxes below that apply for each of the three types of facilities above.)	C. Used Oil Activities 1. Used Oil Generator 2. Used Oil Transporter Indicate Type(s) of Activity(ies) <input type="checkbox"/> Transporter <input type="checkbox"/> Transfer Facility 3. Used Oil Processor and/or Re-refiner Indicate Type(s) of Activity(ies) <input type="checkbox"/> Processor <input type="checkbox"/> Re-refiner 4. Off-Specification Used Oil Burner 5. Used Oil Fuel Marketer - Indicate Type(s) of Activity(ies) <input type="checkbox"/> a. Marketer Who Directs Shipment of Off-Specification Oil <input type="checkbox"/> b. Used Oil to Off-Specification Used Oil Burner															
<table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:15%;"></th> <th style="width:15%; text-align: center;"><u>Generated</u></th> <th style="width:15%; text-align: center;"><u>Accumulated</u></th> </tr> </thead> <tbody> <tr> <td>A. Batteries</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td>B. Pesticides</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>C. Thermostats</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td>D. Lamps</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> </tbody> </table>			<u>Generated</u>	<u>Accumulated</u>	A. Batteries	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	B. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>	C. Thermostats	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	D. Lamps	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	<u>Generated</u>	<u>Accumulated</u>														
A. Batteries	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>														
B. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>														
C. Thermostats	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>														
D. Lamps	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>														

11. Waste Codes for Federally Regulated Hazardous Wastes. Please list the codes for the federally regulated hazardous waste handled at your 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	2005	Annual	Report	Information	for	Codes
-----	------	--------	--------	-------------	-----	-------

12. Comments: Use this area to describe whether the inspection was announced, whether the waste is stored in tanks or containers, etc.

Y / N	Announced ?	Additional Facility Representatives:
Y / N	Tanks?	Other comments:
Y / N	Containers?	

13. Name of Inspector(s)	Name of Inspector(s)	Date of Inspection/ Time (mm-dd-yyyy) (HH:MM)
Pam Hull		12-19-2006 / 9:15

14. 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)
---	------------------------	-------------------

