



State of Ohio Environmental Protection Agency

Northeast District Office

2110 East Aurora Rd.
Twinsburg, Ohio 44087

TELE: (330) 963-1200 FAX: (330) 487-0769
www.epa.state.oh.us

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

January 14, 2009

RE: **CHEMICAL SOLVENTS, INC.
TSDF/LARGE QUANTITY GENERATOR
OHD 980 897 656/#02-18-0669
CUYAHOGA COUNTY, NOV**

Mr. Anthony Datillo
Chemical Solvents, Inc.
3751 Jennings Road
Cleveland, Ohio 44109

Dear Mr. Datillo:

Thank you for accompanying me during Ohio EPA's December 23, 2008, inspection of Chemical Solvents' Dennison Avenue facility in Cleveland, Ohio. I inspected Chemical Solvents 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).

I found the following violation of Ohio's hazardous waste laws. In order to correct this violation you must do the following and send me the required information **within 30 days** of your receipt of this letter:

1. **OAC Rule 3745-65-52 (E), Content of Contingency Plan:** The contingency plan must include a list of all emergency equipment at the facility, where this equipment is required. This list must be kept up to date. In addition, the contingency plan must include the location and a physical description of each item on the list.

Chemical Solvents has violated this rule as follows:

Chemical Solvents' contingency plan does not include a list which specifies the amount of emergency equipment being maintained at the facility nor the specific location of this emergency equipment. At the time of the inspection, spill control equipment was not located in specific areas designated for it and much of the materials were being used in day to day operations rather than reserved for its intended use.

Chemical Solvents must update the contingency plan to specify the amount and specific location of all emergency equipment, including but not limited to fire extinguishers, spill control equipment, and decontamination equipment. If the location or the type of emergency equipment is different than what is in the permit application, then Chemical Solvents will need to submit a permit change request.

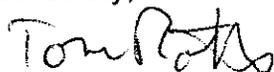
Mr. Anthony Dattilo
Chemical Solvents, Inc.
January 14, 2009
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General Comments

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

Enclosed you will find a copy of the checklists that I completed as a result of the inspection. Should you have any questions, please feel free to call me at (330) 963-1231. 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,



Tom Roth
District Representative
Division of Hazardous Waste Management

TR:cl
Enclosure

cc: Nyall Mckenna, DHWM, NEDO
Natalie Oryshkewych, DHWM, NEDO

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	EPA ID Number: 04D 980 897 656 Name: Chemical Solvents, Inc.		Website: (Optional)	
Site Location Information	Street Address: 1010 Denison Av. City, Town, or Village: Cleveland County Name: Cuyahoga		State: OH Zip Code: 44109	
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 type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other <input type="checkbox"/>			
Facility Representative Additional names can be recorded in number 12 Only provide address information if it is different than the site address	First Name: Tony Dattilo MI: _____ Last Name: Dattilo Phone Number: 216 741-9310 Phone Number Extension: _____ E-Mail Address: _____ Fax Number Extension: _____ Fax Number: _____ Street or P.O. Box: _____ City, Town or Village: _____ Zip Code: _____ State: _____			
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: Chemical Solvents, Inc. Owner 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"/> Type: _____ Street or P.O. Box: 3751 Jennings Rd City, Town or Village: Cleveland State: Ohio Name of Site's Operator: _____		Date Became Owner (mm/dd/yyyy): _____ Owner Phone #: (216) 741-9310 Country: _____ Zip Code: 44109 Date Became Operator (mm/dd/yyyy): _____ 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)

- Recycler of Hazardous Waste
- Underground Injection Control Facility
- Hazardous Waste Transporter
- Treater, Storer or Disposer of Hazardous Waste
- Exempt Boiler and/or Industrial Furnace
- Small Quantity On-Site Burner Exemption
- Smelting, Melting, Refining Furnace Exemption

UNIVERSAL WASTE ACTIVITIES (INDICATE TYPES OF UNIVERSAL WASTE MANAGED)

(CHECK ALL BOXES THAT APPLY)

- Small Quantity Handler of Universal Waste
- Large Quantity Handler of Universal Waste
(accumulates 5,000 kg. or more)
- Destination Facility for Universal Waste

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.

See permit

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

- Announced Yes No
- Tanks Yes No
- Containers Yes No

Additional Facility Representatives:
Other Comments:

Name of Inspector(s)

Name of Inspector(s)

Date of Inspection/Time
(mm/dd/yyyy) (hh:mm)

Tom Roth

12-23-08

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)

OHIO PART B PERMITTED FACILITY
RCRA INSPECTION CHECKLIST

Facility: Chemical Solvents Denison
Address: 1010 Denison Avenue
Cleveland, Ohio 44109

Ohio Permit: 02-18-0669
USEPA ID: OHD 980897656

County: Cuyahoga

Facility Phone: 216-741-9310

Inspection Date: 12 / 23 / 08

Time: 9:00 - 3:45

Was advance notice of the inspection given? (yes) _____ (no)
If so, how far in advance? _____

	<u>Name</u>	<u>Agency/Title</u>	<u>Phone</u>
Inspectors:	<u>Tom Roth</u>	<u>Ohio EPA / DHWM</u>	<u>(330) 963-1231</u>
Facility	<u>Tony Dattilo</u>	<u>Chemical Solvents, Inc.</u>	<u>(216) 741-9310</u>
Representatives:			

Is facility operating as a generator? (yes) (no) _____

If so, complete the applicable sections of the Generator Requirements checklist for wastes being managed under generator status.

PERMIT STATUS

Permit Issued: February 2, 2005
Permit Effective Date: February 2, 2005
Permit Expiration Date: February 2, 2015

AUTHORIZED ACTIVITIES

STORAGE

TREATMENT

DISPOSAL

Container (82,500 G)

Tank (88,000 G)

Container (88.4 yd³)

Tank (156,000 G)

(The Permittee is authorized to accept only up to 28,000 tons of hazardous waste from off-site sources in any one calendar year)

GENERAL CONDITIONS OF PERMIT

GENERAL PERMIT COMPLIANCE AND ACTIVITIES

1. Has the expiration date of the permit passed? Yes___ No N/A___ RMK#___
- (a) **If so**, is the Permittee continuing any activity regulated by the permit after the expiration date of the permit? Yes___ No___ N/A RMK#___
- (b) Has the facility submitted an application for a permit renewal to the Director no later than (180) days prior to the expiration date of the permit? (or upon a later date if the Permittee can demonstrate good cause for late submittal) [Condition A.6.(a)] Yes___ No N/A RMK#___

NOTE: The Permittee may continue to operate in accordance with the terms and conditions of the expired permit until a renewal permit is issued or denied if:

- (a) The Permittee has submitted a timely and complete application for a renewal permit under OAC Rule 3745-50-40, and;
- (b) Through no fault of the Permittee, a new permit has not been issued pursuant to OAC Rule 3745-50-40 on or before the expiration date of the permit. [Condition A.6.(b)]
2. Has the Permittee submitted the annual permit fee, payable to Treasurer of the State, to the Ohio EPA on or before the anniversary of the date of issuance during the term of the permit [Condition A.25.]? Yes No N/A___ RMK#___
3. Is the Permittee conducting any hazardous waste management activities (not otherwise exempt by law) which are not authorized by the permit? [Condition A.1. and A.5.] Yes No N/A___ RMK#___
4. Have any provisions of the permit been identified as invalid?[Condition A.4.] Yes___ No N/A___ RMK#___
5. Did the facility orally report information concerning a release of any hazardous waste that caused an endangerment to public drinking water supplies, a fire or an explosion which threatened human health or the

environment outside the facility to the Ohio EPA Division of Emergency and Remedial Response within two hours of becoming aware of the circumstance(s): [Condition A.20.(a)]

no releases of HW since last inspection

Yes___ No N/A RMK#___

6. Did the report contain the following information?(if such information was available at the time of the oral report):

i. Name, address and telephone number of the owner or operator?

Yes___ No N/A RMK#___

ii. Name, address and telephone number of the facility?

Yes___ No N/A RMK#___

iii. Name and quantity of material(s) involved?

iv. The extent of injuries, if any?

Yes___ No N/A RMK#___

v. An assessment of the actual or potential hazards to the environment and human health outside the facility, where applicable?

Yes___ No N/A RMK#___

vi. Estimated quantity and disposition of recovered material that resulted from the incident?

Yes___ No N/A RMK#___

7. Did the Permittee provide a written report to the Ohio EPA's Division of Emergency and Remedial Response and DHWM NEDO within (5) days of the time the Permittee became aware of the circumstances reported in Question 5? [Condition A.21.]

Yes___ No N/A RMK#___

If so, did the report contain the following?

(a) A description of the noncompliance and its causes;

Yes___ No N/A RMK#___

(b) The periods of non compliance (including exact dates and times);

Yes___ No N/A RMK#___

(c) Whether the noncompliance has been corrected and if not, the anticipated it is expected to continue? and;

Yes___ No N/A RMK#___

(d) Steps taken or planned to minimize the impact on human health and the environment and to reduce and prevent recurrence of the noncompliance?

Yes___ No N/A RMK#___

NOTE: The Permittee need not comply with the (5) day written report requirement if the Director, upon good cause shown by the Permittee, waives that requirement and the Permittee submits a written report within (15) days of the time the Permittee

becomes aware of the circumstances. [Condition A.21.(c)]

8. Has the Permittee expeditiously taken all steps necessary to minimize or correct any adverse impact on the environment or public health resulting from noncompliance with the permit? [Condition A.8.] Yes__ No N/A RMK#__
9. Has the Permittee identified any other instances of noncompliance not provided for in Question #5? Yes__ No N/A__ RMK#__
- (a) **If so**, did the Permittee report these instances to the Director within a month of becoming aware of the noncompliance? [Condition A.22.] Yes__ No N/A RMK#__
- (b) Do the reports provided contain the information set forth in Condition A.20? [Condition A.22.] Yes__ No N/A RMK#__
10. Did the Permittee make any planned changes in the permitted facility or operations which may result in noncompliance with the terms and conditions of the permit? [Condition A.17] Yes__ No N/A__ RMK#__
- (a) If so, did the facility provide Ohio EPA with notice of such changes? Yes__ No N/A RMK#__

NOTE: Such notification does not waive the Permittee's duty to comply with the permit pursuant to Condition A.5.

PERMIT MODIFICATION, REVISION, REVOCATION

1. Has the Permittee filed a request for a permit modification, revision or revocation since issuance of the permit? [Condition A.2.] Yes No__ N/A__ RMK#__
2. Has the permit been transferred to a new owner or operator? [Condition A.18.] **If so**, Yes__ No N/A__ RMK#__
- (a) Was the transfer conducted in accordance with O.R.C. Chapter 3734 and the rules adopted thereunder? [Condition A.18.(b)] and; Yes__ No N/A RMK#__
- (b) Before transferring ownership did the Permittee notify the new owner / operator in writing of the requirements of O.R.C. Chapter 3734 and the rules adopted thereunder (including all applicable

corrective action requirements? [Condition A.18.(b)]

Yes___ No N/A RMK#__

3. Has the Permittee submitted reports of compliance or non-compliance with, or any progress reports on the requirements contained in any compliance schedule of the permit to the Ohio EPA no later than (14) days following each scheduled date, unless otherwise specified? [Condition A.19.]

Yes___ No N/A RMK#__

4. Has the Permittee furnished relevant information which the Ohio EPA has requested to determine whether cause exists for modifying, revising, revoking or suspending the permit, or to determine compliance with the permit? [Condition A.10.]

Yes No N/A__ RMK#__

5. Has the facility furnished Ohio EPA, upon request, with copies of records required to be kept by the permit? [Condition A.10]

Yes No N/A__ RMK#__

6. Did the Permittee fail to submit any relevant facts or submit incorrect, misleading or incomplete information in permit? [Condition A.23]

Yes___ No N/A__ RMK#__

(a) **If so**, upon becoming aware that it failed to submit this information, did the Permittee promptly submit such facts or corrected information to the appropriate entity?

Yes___ No N/A RMK#__

7. Is the Permittee maintaining records of all data used to complete the Part B permit application and any amendments, supplements, modifications or revisions to the application? [Condition A.14.(c)]

Yes No N/A__ RMK#__

8. Is the Permittee retaining a complete copy of the approved application? [Condition A.14.(c)]

Yes No N/A__ RMK#__

9. Is the Permittee planning any physical alterations or additions to the permitted container storage facility?

Yes___ No N/A__ RMK#__

(a) **If so**, has the Permittee given notice to the Director of such alterations/additions? [Condition A.15]

Yes___ No N/A RMK#__

(b) Have such changes been made in accordance with O.A.C. Rule 3745-50-51? [Condition A.15.]

Yes___ No N/A RMK#__

SITE ENTRY - AVAILABILITY OF RECORDS

1. Has the Permittee allowed the Director or an authorized representative, upon proper identification and upon stating the purpose and necessity of an inspection, to: [Condition A.11]
- (a) Enter at reasonable times upon the premises where a regulated activity is located or conducted, or where records are kept under the conditions of the permit? Yes No N/A ___ RMK# ___
- (b) Have access to and copy any records required to be kept under the conditions of the permit? Yes No N/A ___ RMK# ___
- (c) Inspect and photograph, at reasonable times, any facilities, equipment (including control and monitoring equipment), practices or operations regulated under the conditions of the permit? Yes No N/A ___ RMK# ___
- (d) Sample, document, or monitor any substance or parameter at any location of the facility to assure compliance with the permit or as otherwise authorized by O.R.C. Chapter 3734 and the rules adopted thereunder? Yes No N/A ___ RMK# ___

RECORDKEEPING REQUIREMENTS

1. Has the Permittee requested confidentiality of any information of the permit in accordance with O.R.C. Chapter 3734 and the rules adopted thereunder? [Condition A.24.] Yes No ___ N/A ___ RMK# ___
2. Is the Permittee maintaining a written operating record at the facility as set forth in O.A.C. Rule 3745-54-73 and Condition B.21 of the permit which contains the following elements:
- (a) A description and the quantity of each hazardous waste received? Yes No N/A ___ RMK# ___
- (b) Method(s) and date(s) of treatment, storage or disposal at the facility? Yes No N/A ___ RMK# ___
- (c) The location of each hazardous waste within the facility and the quantity at each location? Yes No N/A ___ RMK# ___

3. Is the Permittee maintaining, until closure is complete and certified, the following documents (including amendments, revisions and modifications): [Condition A.27.(a)]

- (i) Waste analysis plan in accordance with O.A.C. Rule 3745-54-13 and the conditions of the permit? Yes No N/A ___ RMK# ___
- (ii) Contingency plan in accordance with O.A.C. Rule 3745-54-53 and the conditions of the permit? Yes No N/A ___ RMK# ___
- (iii) Closure plan in accordance with O.A.C. Rule 3745-55-12 and the conditions of the permit? Yes No N/A ___ RMK# ___
- (iv) Cost estimate for facility closure in accordance with O.A.C. Rule 3745-55-42 and the conditions of the permit? (estimate only - adequacy of estimate will be evaluated by C.O. financial assurance personnel) Yes No N/A ___ RMK# ___
- (v) Personnel training plan and records required by O.A.C. Rule 3745-54-16 and the conditions of the permit? Yes No N/A ___ RMK# ___
- (vi) Operating record required by O.A.C Rule 3745-54-73 and the conditions of the permit? Yes No N/A ___ RMK# ___
- (vii) Inspection schedules developed in accordance with O.A.C. Rule 3745-54-15 and O.A.C. Rule 3745-55-74 3745-55-95 and the conditions of the permit? Yes No N/A ___ RMK# ___
- (viii) Post-Closure Plan required by O.A.C. Rule 3745-55-18(A) and the permit? Yes No N/A ___ RMK# ___
- (ix) Annually-adjusted cost estimate for facility closure as required by O.A.C. Rule 3745-55-42 and 3745-55-44 and the permit? Yes No N/A ___ RMK# ___
- (x) All other documents required by Module A? Yes No N/A ___ RMK# ___

4. Have any of the documents identified in Question #3 been revised as required by the permit?

- (a) **If so**, has the Permittee submitted the revisions to the Director? [Condition A.27.(b)] Yes No N/A ___ RMK# ___

(b) Has the Permittee received approval in accordance with Ohio hazardous waste rules to make such changes?
[Condition A.27.(b)]

Yes No N/A ___ RMK# ___

5. Is the Permittee maintaining copies of all inspection logs at the facility for a period of at least three years from date of inspection? [Condition A.27.(c)]

Yes No N/A ___ RMK# ___

6. Are Corrective Action reports and records as required by Conditions E.1 through E.11 of the permit being maintained for at least 3 years after all Corrective Action activities have been completed? [Condition A.27.(d)]

Yes No N/A ___ RMK# ___

ANNUAL REPORT REQUIREMENT

7. Is the Permittee complying with annual report requirements set forth in O.A.C. Rule 3745-54-75 and the additional report requirements set forth in O.A.C. Rule 3745-54-77?
[Condition B.24.]

Yes No N/A ___ RMK# ___

SAMPLING/MONITORING RECORDKEEPING REQUIREMENTS

8. In compliance with Condition A.12.(b) of the permit, do the Permittee's records of monitoring information specify the:

(i) Date(s), exact place(s), time(s) and method(s) of sampling or measurement?

Yes No N/A ___ RMK# ___

(ii) Individual(s) who performed the sampling or measurement? Yes No N/A ___ RMK# ___

(iii) Date(s) analyses were performed?

Yes No N/A ___ RMK# ___

(iv) Individual(s) who performed the analyses?

Yes No N/A ___ RMK# ___

(v) Analytical technique(s) or method(s) used?

Yes No N/A ___ RMK# ___

(vi) Results of such analyses?

Yes No N/A ___ RMK# ___

9. Was the appropriate SW-846 method or an equivalent method specified in the approved waste analysis plan followed when obtaining a representative sample?
[Condition A.12(a)]

Yes No N/A ___ RMK# ___

10. Have all applications, reports or information been properly signed and certified in accordance with O.A.C. Rule 3745-50-58(K)? [Condition A.13.]

Yes No N/A ___ RMK# ___

WASTE MINIMIZATION REQUIREMENTS

11. Has the Permittee submitted a Waste Minimization Report describing the waste minimization program required by O.A.C. Rules 3745-54-75(H),(I), and (J); 3745-54-73(B)(9); and 3745-52-20(B) at least once every two years and the provisions of O.A.C. Rules 3745-54-75(H),(I), and (J); and 3745-54-73(B)(9) annually? [Condition A.28.(a)]

Yes No N/A ___ RMK# ___

OFF-SITE SHIPMENTS/MANIFEST REQUIREMENTS

1. Is all hazardous waste transported from the facility by a properly registered transporter of hazardous waste in accordance with all applicable laws and rules? [Condition A.16.]

Yes No N/A ___ RMK# ___

MANIFEST REQUIREMENTS/WASTES RECEIVED ON-SITE

2. Upon receipt of manifests, has the Permittee signed and dated each copy of the manifest? [OAC 3745-54-71(A)(1); Condition B.23.]

Yes No N/A ___ RMK# ___

3. For any significant discrepancies identified on the manifest(s): did the Permittee note such discrepancies on the manifest(s) in accordance with OAC rule 3745-54-71 (A)(2) and Condition B.23.?

Yes No N/A ___ RMK# ___

(a) Did the Permittee attempt to reconcile the discrepancy? [Condition B.23.]

Yes No N/A ___ RMK# ___

(b) If the discrepancy was not resolved within (15) days: did the Permittee submit a report, including a copy of the manifest, to the Director in accordance with OAC rule 3745-54-72? [OAC rule 3745-54-72(B) Condition B.23.(b)]

Yes ___ No N/A RMK# ___

4. Does the Permittee immediately give the transporter at least one copy of the signed manifest? [OAC rule 3745-54-71 (A)(3); Condition B.23.]

Yes No N/A ___ RMK# ___

5. Does the Permittee provide the generator with a copy of the manifest within 30 days of receipt of waste on-site? [OAC rule 3745-54-71(A)(4); Condition B.23.] Yes No N/A RMK#
6. Does the Permittee retain a copy of each manifest on-site for at least three years from the date of delivery? [OAC rule 3745-54-71(A)(5); Condition B.23.] Yes No N/A RMK#
7. Does the Permittee receive bulk shipment(s) of hazardous waste from rail or water?
- (a) **If so**, is the Permittee complying with the requirements of OAC rule 3745-54-71(B)? [Condition B.23.] Yes No N/A RMK#
8. Has the Permittee received any hazardous waste from a foreign source since the date of last inspection? Yes No N/A RMK#
- (a) **If so**, did the Permittee provide notification to the Director of receipt of such wastes in writing at least four weeks in advance of the date the Permittee expected to receive the waste? [Condition B.2.(a)] Yes No N/A RMK#
9. *Where the Permittee received waste from an off-site source (except where the Permittee is also the generator):* Does the Permittee inform the generator in writing that the facility has the appropriate permits and will accept the waste the generator is shipping? [Condition B.2.(b)] Yes No N/A RMK#
- (a) Is the Permittee maintaining a copy of this written notice in the operating record? [Condition B.2.(b)] Yes No N/A RMK#
10. Does the Permittee ensure that no more than 28,000 tons of hazardous waste from off-site sources are accepted in any one calendar year? (Note: This is a facility-wide limitation and includes all units) [Condition B.1.(b)] Yes No N/A RMK#

NOTE: *For wastes shipped off-site by the Permittee:* the Permittee must comply with the generator manifest/shipment requirement of Chapter 3745-52 of the Ohio Administrative Code. Please complete the Generator Requirements section of the current inspection checklist to document compliance with these requirements.

WASTE ANALYSIS/WASTE ANALYSIS PLAN

GENERAL REQUIREMENTS

1. Does the Permittee follow the procedures described in the approved waste analysis plan found in Section C of the approved permit and the terms and conditions of this permit? [Condition B.3.; O.A.C. Rule 3745-54-13] Yes No N/A RMK#
2. Since the last inspection, were any wastes generated by the facility which were unable to be characterized through process knowledge? Yes No N/A RMK#
- (a) **If so**, were the waste analysis procedures described in Section C of the approved permit application followed? Yes No N/A RMK#
3. Is the Permittee maintaining waste analysis data in the facility's operating record as required by OAC rule 3745-65-73 and Condition B.21. of the permit? Yes No N/A RMK#

WASTE ANALYSIS QUALITY ASSURANCE REQUIREMENTS

4. Is the Permittee verifying the analysis of each waste stream annually as part of its quality assurance program in accordance with SW-846? [Condition B.3.] Yes No N/A RMK#
5. In accordance with Condition B.3. of the permit, does the Permittee's quality assurance plan ensure that the Permittee is, at a minimum:
- (a) Maintaining proper functional instruments? Yes No N/A RMK#
- (b) Using approved sampling/analytical methods? Yes No N/A RMK#
- (c) Verifying the validity of sampling and analytical procedures and performance of correct calculations? Yes No N/A RMK#
7. Does the Permittee use a contract laboratory to perform analysis? Yes No N/A RMK#
- (a) **If so**, has the Permittee informed the lab in writing that it must operate under the waste analysis conditions as set forth in the permit? [Condition B.3.] Yes No N/A RMK#

GENERAL INSPECTION REQUIREMENTS

1. Is the Permittee following the inspection procedures and schedules described in Section F of the approved permit application and the requirements of O.A.C. Rule 3745-54-15? [Condition B.5] Yes No N/A ___ RMK# ___
2. Does the Permittee inspect the facility with such regularity as to identify problems resulting from deterioration, malfunctions, operator errors or discharges which may lead to a release of hazardous waste to the environment or a threat to human health? [O.A.C. Rule 3745-54-15(A)(1)(2)] Yes No N/A ___ RMK# ___
3. Is the Permittee following the approved inspection schedule for inspecting: monitoring equipment, safety equipment, emergency equipment, security devices and operating and structural equipment as specified in O.A.C. Rule 3745-54-15? Yes No N/A ___ RMK# ___
- (a) Is the schedule kept at the facility? [O.A.C. Rule 3745-54-15(B)(2)] Yes No N/A ___ RMK# ___
- (b) Does the schedule identify the types of problems which are to be looked for during the inspection? [O.A.C. Rule 3745-54-15(B)(3)] Yes No N/A ___ RMK# ___
- (c) Does the schedule include the daily inspection of areas subject to spills when they are in use and according to other applicable regulations when not in use? [O.A.C. Rule 3745-54-15(B)(4)] Yes No N/A ___ RMK# ___
4. Does the Permittee remedy deterioration or any malfunctions discovered by an inspection as required by O.A.C. Rule 3745-54-15(C)? [Condition B.5.] Yes No N/A ___ RMK# ___
5. Is the Permittee maintaining records of inspections for a minimum of three years? [Condition B.5] Yes No N/A ___ RMK# ___
6. In accordance with O.A.C. Rule 3745-54-15(D) and Condition B.5 of the permit, do inspection records contain the following information:
- (a) Date and time of inspection? Yes No N/A ___ RMK# ___

- (b) Signature of inspector? Yes No N/A ___ RMK#_
- (c) Notation of observations made? Yes No N/A ___ RMK#_
- (d) Date/nature of any repairs or other remedial actions? Yes No N/A ___ RMK#_

SECURITY PROVISIONS/FACILITY OPERATION

1. Is the Permittee complying with the security provisions of O.A.C. Rule 3745-54-14 and Section F of the approved permit application, including the following: [Condition B.4]
- (a) Does the Permittee have a 24-hour surveillance system which continuously monitors and controls entry onto the active portion of the facility, or; Yes No N/A ___ RMK#_
- (b) An artificial or natural barrier (in good repair) which completely surrounds the active portion of the facility, or; Yes No N/A ___ RMK#_
- (c) A means to control entry, at all times, through gates or other entrances, to the active portion of the facility? Yes No N/A ___ RMK#_
2. In accordance with O.A.C. Rule 3745-54-14(C), does the Permittee have signs reading "Danger-Unauthorized Personnel Keep Out" posted at each entrance and at other locations and in sufficient numbers to be seen when approaching the active portion of the facility? [Condition B.4.] Yes No N/A ___ RMK#_
3. Is construction, maintenance and operation of the facility being conducted to minimize the possibility of a fire, explosion, or unplanned sudden or non-sudden release of hazardous waste constituents to air, soil ground or surface waters? [Condition B.1.(a)] Yes No N/A ___ RMK#_

PERSONNEL TRAINING

1. Is the facility conducting personnel training in accordance with Section H of the approved permit application and the following requirements of O.A.C. Rule 3745-54-16: [Condition B.6.] Yes No N/A ___ RMK#_

(a) The facility provides personnel training which includes instruction in safe equipment operation and emergency procedures and implementation of the contingency plan? [O.A.C. Rule 3745-54-16(A)(3)] Yes No N/A__ RMK#_

(b) The facility provides personnel training to new employees within 6 months after their date of employment as required by O.A.C. Rule 3745-54-16(B)? Yes No N/A__ RMK#_

(c) The facility provides an annual refresher training course as required by O.A.C. Rule 3745-54-16(C)? Yes No N/A__ RMK#_

2. Is the Permittee maintaining personnel training records as required by O.A.C. Rule 3745-54-16(D) including; written job titles, job descriptions, and the type and amount of both introductory and continuing training? [Condition B.6.] Yes No N/A__ RMK#_

3. Are training records kept until closure of the facility in accordance with O.A.C. Rule 3745-54-16(E)? [Condition B.6] Yes No N/A__ RMK#_

REQUIRED EQUIPMENT

1. Is the Permittee, at a minimum, maintaining the equipment required by O.A.C. Rule 3745-54-32 and the equipment set forth in the approved contingency plan (Section G) of the approved Part B permit application? [Condition B.8.] Yes No N/A__ RMK#_

(a) An internal communication or alarm system? Yes No N/A__ RMK#_

(b) A device, such as a telephone or hand held two-way radio? Yes No N/A__ RMK#_

(c) Portable fire extinguishers or fire control equipment? Yes No N/A__ RMK#_

(d) Water in adequate volumes and pressure to supply water hoses, foam equipment, automatic sprinklers, or water spray systems? Yes No N/A__ RMK#_

2. Is the Permittee inspecting, testing and maintaining the equipment specified in Question #1 to assure its proper operation as specified in O.A.C. Rule 3745-54-33, the inspection plans and Section G of the approved permit application? [Condition B.9.] Yes No N/A__ RMK#_

3. Whenever hazardous waste is being poured, mixed, spread, or otherwise handled at the facility, has the Permittee provided all personnel involved in the operation with immediate access to an internal alarm or emergency communication device as required by O.A.C. Rule 3745-54-34 and Section G of the approved permit application? [Condition B.10.]
- Yes No N/A ___ RMK#__

CONTINGENCY PLAN REQUIREMENTS

EMERGENCY PROCEDURES

1. In compliance with Condition B.12.(a) of the permit, does the Permittee:
- (a) Familiarize the emergency response agencies likely to respond to an emergency at the facility with:
- i. The location and layout of the facility? Yes No N/A ___ RMK#__
 - ii. Properties of hazardous waste managed at the facility and associated hazards? Yes No N/A ___ RMK#__
 - iii. Places where facility personnel will normally be working? Yes No N/A ___ RMK#__
 - iv. Entrances to and roads inside the facility? Yes No N/A ___ RMK#__
 - v. Evacuation routes as depicted in Section G of the permit application? Yes No N/A ___ RMK#__
- (b) Inform emergency response agencies of safety equipment, supplies, proper emergency procedures that are applicable to the facility, and any further requirements imposed by the permit? and; Yes No N/A ___ RMK#__
- (c) Familiarize local police and fire departments, hospitals and any other local emergency services, with the properties of hazardous waste managed at the facility and the types of injuries or illness which could result from fires, explosions or a release of hazardous wastes at the facility? Yes No N/A ___ RMK#__
2. Is the Permittee in compliance with the requirements of O.A.C. Rule 3745-54-56 and Section G of the approved permit application regarding emergency procedures? [Condition B.19.]
- Yes No N/A ___ RMK#__

EMERGENCY AUTHORITIES

3. Has a state or local agency declined to enter into the arrangements set forth in O.A.C. Rule 3745-54-37(A)? Yes__ No N/A__ RMK#__

(a) **If so**, has the Permittee documented the refusal in the operating record as required by O.A.C. Rule 3745-54-37(B)? [Condition B.12.(b)] Yes__ No N/A RMK#__

4. Has the Permittee, in accordance with O.A.C. Rule 3745-54-53 submitted a copy of the approved contingency plan (including amendments, revisions or changes) to all local police departments, fire departments, hospitals, and local emergency response teams that may be called upon to provide emergency services? [Condition B.17.(b)] Yes No N/A__ RMK#__

5. Has the Permittee notified the agencies in Question #4, in writing, within (10) days of the effective date of any amendments, revisions or modifications to the contingency plan? [Condition B.17.(b)] Yes No N/A__ RMK#__

6. Has the Permittee submitted a copy of the approved contingency plan to the Ohio EPA, Division of Emergency and Remedial Response in accordance with O.A.C. Rule 3745-54-53? [Condition B.17.(c)] Yes No N/A__ RMK#__

EMERGENCY COORDINATOR

7. Is the Permittee in compliance with the requirements of O.A.C. Rule 3745-54-55 with regard to the emergency coordinator? [Condition B.18.] Yes No N/A__ RMK#__

AMENDMENT OF PLAN

8. Is the Permittee reviewing the approved contingency plan at least annually and, if necessary, amending the plan in compliance with O.A.C. Rule 3745-54-54? [Condition B.16.] Yes No N/A__ RMK#__

NOTE: Also see Question #4 of Recordkeeping Requirements to verify that any changes to the contingency plan were submitted in accordance with O.A.C. Rule 3745-50-51.

IMPLEMENTATION OF PLAN

9. Has there been a fire, explosion or release of hazardous

waste or hazardous waste constituents at the facility since date of last inspection as described by Condition B.13. of the permit?

Yes___ No N/A___ RMK#___

(a) **If so**, did the Permittee immediately implement the approved contingency plan and follow the emergency procedures described in O.A.C. Rule 3745-54-56? [Condition B.13.]

Yes___ No N/A RMK#___

(b) Did the Permittee collect and manage released material, emergency response material and by-products as hazardous waste until such a time that the Permittee was able to demonstrate that such waste was not hazardous in accordance with O.A..C. Rules 3745-51-03(C) and (D)? [Condition B.15.]

Yes___ No N/A RMK#___

(c) Within (15) days of the incident did the Permittee submit, to the Director, a written report of the incident containing the following information:

i. Name, address, and telephone number of the owner or operator?

Yes___ No N/A RMK#___

ii. Name, address, and telephone number of the facility?

Yes___ No N/A RMK#___

iii. Date, time, and type of incident (e.g. fire, explosion)?

Yes___ No N/A RMK#___

iv. Name an quantity of material involved?

Yes___ No N/A RMK#___

v. The extent of injuries, if any?

Yes___ No N/A RMK#___

vi. An assessment of actual or potential hazards to human health and the environment?

Yes___ No N/A RMK#___

vii. Estimated quantity and disposition of recovered material that resulted from the incident?

Yes___ No N/A RMK#___

viii. Any other information as the Director may require?

Yes___ No N/A RMK#___

NOTE: See also Conditions A.21. and A.22. of the permit for additional reporting/recordkeeping requirements.

(d) Did the Permittee note in the operating record the time, date and details of any incident that required the implementation of the approved contingency plan? [Condition B.22.]

Yes___ No N/A RMK#___

REMARKS

CLOSURE REQUIREMENTS

CLOSURE PLAN/AMENDMENT

1. Is the Permittee maintaining at the facility, the approved closure plan which contains the elements set forth in O.A.C. Rule 3745-55-12? [Condition B.28.] Yes No N/A RMK#
2. Has the Permittee amended the closure plan? **NO**
- (a) **If so**, has the plan been amended in accordance with O.A.C. Rule 3745-55-12(C)? [Condition B.27.] Yes No N/A RMK#

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

CLOSURE ACTIVITIES

3. Has the facility been closed? **NO**
- (a) **If so**, was closure conducted in accordance with approved closure plan and the closure performance standard of O.A.C. Rule 3745-55-11? [Condition B.25.] Yes No N/A RMK#
- (b) After receiving the final volume of hazardous waste, did the Permittee remove from the facility or treat or dispose of on site all hazardous waste in accordance with the approved closure plan within (90) days? [Condition B.30.] Yes No N/A RMK#
- (c) Were all closure activities completed within (180) days, in accordance with O.A.C. Rule 3745-55-13? [Condition B.30.] Yes No N/A RMK#
- (d) Has the Permittee decontaminated and/or disposed of all facility equipment, structures and soils as required by O.A.C. Rule 3745-55-14 and the approved closure plan? [Condition B.31.(a)] Yes No N/A RMK#
- (e) Did the Permittee notify Ohio EPA's Northeast District Office, within five (5) working days prior to all rinseate and soil sampling? [Condition B.31.(b)] Yes No N/A RMK#

- (f) Has the Permittee and an independent, qualified, registered professional engineer certified that the facility has been closed in accordance with the specifications in the approved closure plan as required by O.A.C. Rule 3745-55-15? [Condition B.32.] Yes No N/A RMK#_

REQUIREMENTS FOR IGNITABLE, REACTIVE OR INCOMPATIBLE WASTES

1. Is the Permittee following the procedures as specified in O.A.C. Rules 3745-54-17, 3745-55-77 and Section F of the approved application when managing ignitable, reactive and/or incompatible wastes? [Condition B.7.(a) and Condition C.10.] Yes No N/A RMK#_
- (a) Is electrical grounding provided for all container and tanks, and transport vehicles during all operations involving the handling of ignitable or reactive wastes? [Condition B.7.(b)] Yes No N/A RMK#_
- (b) Are spark proof tools used during all operations involving the handling of all ignitable or reactive wastes? [Condition B.7.(c)] Yes No N/A RMK#_
- (c) Does the Permittee prohibit smoking and open flames in areas where hazardous wastes are managed and post appropriate signs? [Condition B.7.(d)] Yes No N/A RMK#_
- (d) Are hazardous wastes placed in unwashed containers that previously held an incompatible waste or material? [Condition C.10.(b)] Yes No N/A RMK#_
- (e) Are containers of incompatible wastes separated from one another? [Condition C.10.(c)] Yes No N/A RMK#_
2. As required by O.A.C. Rule 3745-55-76 does the Permittee store containers of ignitable or reactive wastes greater than 15 feet (50 feet) from the facility's property line? [Condition C.9.(a)] Yes No N/A RMK#_
3. Does the Permittee take precautions to prevent accidental ignition or reaction of ignitable or reactive waste and follow the storage procedures as specified in Section F of the approved permit application?

[Condition C.9.(b)]

Yes No N/A ___ RMK# ___

STORAGE OF HAZARDOUS WASTES IN CONTAINERS

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

1. Is the Permittee storing in containers, only those wastes as specified in Condition C.2. of the permit?

[Condition C.2.]

Yes No N/A ___ RMK# ___

2. Does the Permittee limit the total quantity of containerized waste in the container storage area to 71,500 gallons at any given time (maximum container storage inventory of (1300) 55-gallon drums)? [Condition C. and C.1.(a)]

Yes No N/A ___ RMK# ___

NOTE: For the purposes of compliance with the capacity limitation of the permit, each container will be considered to be storing an amount of hazardous waste equal to its capacity. For example, a fifty-five (55) gallon drum will be considered to be holding 55 gallons of waste, regardless of the actual quantity stored in the drum. [Condition C.1.(b)]

3. When accumulating waste within the permitted container storage area, does the Permittee ensure that the total amount of waste (both more than 90 day and less than 90 day) does not exceed the maximum container storage inventory established under Condition C.1.? [Condition C.1.(c)]

Yes No N/A ___ RMK# ___

4. Are hazardous wastes, subject to regulation by the permit, stored only at the designated container storage area described in the approved permit application?

[Condition C.1.(a)]

Yes No N/A ___ RMK# ___

5. Does the Permittee limit storage of hazardous waste to no more than one year? [O.A.C. Rule 3745-59-50(B)]

Yes No N/A ___ RMK# ___

6. Is each container stored clearly marked to identify its contents and the date each period of accumulation/storage begins? [O.A.C. Rule 3745-59-50(A)(2)(a)]

Yes No N/A ___ RMK# ___

7. Does the Permittee store hazardous waste in the types of

containers described in Section D-2b of the approved permit application? [Condition C.1.(a)]

Yes No N/A RMK#

CONDITION OF CONTAINERS

8. Are containers holding hazardous wastes in good condition? [Condition C.3.]

Yes No N/A RMK#

(a) **If not**, (e.g. severe rusting, structural defects) did the Permittee transfer the hazardous waste from such a container to a container that is in good condition or otherwise manage the waste in a manner that complies with the conditions of the permit or the hazardous waste facility chapters of the O.A.C.? [Condition C.3.]

Yes No N/A RMK#

9. Does the Permittee ensure that all containers used at the facility are compatible with the hazardous waste to be stored in them as required by O.A.C. Rule 3745-55-72? [Condition C.4.]

Yes No N/A RMK#

10. Is storage conducted in the container storage containment system as described in Condition C.1 of the permit and Section D of the approved permit application? [Condition C.5.(a)]

Yes No N/A RMK#

11. Does the Permittee keep all containers closed during storage except when it is necessary to add or remove waste as required by O.A.C. Rule 3745-55-73? [Condition C.5.(b)]

Yes No N/A RMK#

12. Are containers handled and stored in a manner which prevents ruptures and leaks? [Condition C.5.(b)]

Yes No N/A RMK#

13. Are lab-pack wastes handled in compliance with the applicable storage requirements? [Condition C.5.(c)]

Yes No N/A RMK#

14. Are lab pack wastes packaged in drums containing absorbent material that is compatible with the wastes? [Condition C.5.(d)]

Yes No N/A RMK#

15. Does the Permittee prevent stacking of drums more than 3 high as required by the Part B application?

Yes No N/A RMK#

INSPECTIONS

16. Is the Permittee inspecting the container area weekly in accordance with O.A.C. Rule 3745-55-74 and the approved inspection schedule (Section F) to detect leaking containers and deterioration of containers and the containment system? [Condition C.7.]

Yes No N/A RMK#

(a) Does the Permittee note the results of these inspections in the inspection log along with any remedial action taken? [Condition C.7.]

Yes No N/A RMK#

CONTAINMENT SYSTEM

17. Does the Permittee maintain the containment system as described in the approved permit application, including: [Condition C.6.]

Yes No N/A RMK#

(a) Sufficient design to contain ten percent of the total volume of the containers or the volume of the largest contained, whichever is greater?

Yes No N/A RMK#

(b) A system which is free of cracks and gaps and sufficiently impervious to contain leaks and spills and accumulated precipitation until the collected material is detected and removed?

Yes No N/A RMK#

(c) Equipped with a coating which is compatible with each waste stored in the area?

Yes No N/A RMK#

(d) *For those wastes which are deemed incompatible with liner material:* Has the Permittee installed a separate secondary containment structure within the existing structure which is equipped with a compatible liner?

Yes No N/A RMK#

18. Has the Permittee had a spill or leak of wastes or an accumulation of precipitation in the containment system?

Yes No N/A RMK#

(a) **If so**, are spilled or leaked wastes and accumulated precipitation removed from the sump or collection area in a timely manner? [Condition C.6.(c)]

Yes No N/A RMK#

(b) Does removal of spilled/leaked wastes and accumulated precipitation occur within (24) hours from the time the spilled or leak waste is discovered?

[Condition C.6.(c)]

Yes No N/A RMK#

REQUIRED AISLE SPACE

19. Is the Permittee maintaining aisle space to allow unobstructed movement of personnel, fire protection equipment, spill control equipment and decontamination equipment to any area of the facility operation in an emergency as required by O.A.C. Rule 3745-54-35? [Condition B.11.]

Yes No N/A RMK#

CLOSURE AND POST-CLOSURE

20. At closure of the container storage area, did the Permittee remove all hazardous waste and hazardous waste residues from the containment system, in accordance with the procedures set forth in the approved closure plan (Section 1 of the permit application)? [Condition C.11.(a)]
21. During closure, if the Permittee could not demonstrate that all contaminated soils could be removed or decontaminated, did the Permittee close the unit and perform post-closure care following a plan approved by the Director of the Ohio EPA? [Condition C.11.(b)]

Yes No N/A RMK#

Yes No N/A RMK#

HAZARDOUS WASTE TANK STORAGE

NOTE: Please see Condition D of the permit for a description of tank storage and management practices permitted at the facility. Existing tanks at the facility are: 101, 102, 103, 104, 105, 106, 107, 108 and 109. Total volume of waste permitted for management in tanks 101-109 is 84,000 gallons.

1. Does the Permittee store only those hazardous wastes in the tanks as specified in Condition D.1. of the permit?

Yes No N/A RMK#

2. Does the Permittee limit total volume of waste managed in tanks 101-109 to 84,000 gallons?
[Condition D.1.(a)]

Yes No N/A RMK#

3. Are only those hazardous waste codes as specified in the approved permit application and as summarized in Condition D.1.(c) managed in the hazardous waste tanks?
[Condition D.1.(c)]

Yes No N/A RMK#

SECONDARY CONTAINMENT

4. Was the secondary containment system constructed and being operated in accordance with the requirements of O.A.C. Rule 3745-55-93(B) through (F) and Section D of the Part B application? [Condition D.3.]

Yes No N/A ___ RMK#_

CERTIFICATION OF TANK SYSTEMS

5. Were tank systems constructed in accordance with Section D of the approved part B application, and prior to operation was the installation of the tank system certified in accordance with O.A.C. Rule 3745-55-92(B) to ensure that proper handling procedures were adhered to in order to prevent damage to the system during installation? [Condition D.2.]

Yes No N/A ___ RMK#_

OPERATING REQUIREMENTS

6. Does the Permittee prohibit the placement of hazardous waste in the tank systems if such placement would cause the tank or its ancillary equipment to rupture, leak, corrode, or otherwise fail? [Condition D.4.(a)]

Yes No N/A ___ RMK#_

7. Does the Permittee use the methods described in the Part B application to prevent spills and overflows from the tank systems? [Condition D.4.(b)]

Yes No N/A ___ RMK#_

RESPONSES TO LEAKS/SPILLS

8. Has there been a leak or spill from the hazardous waste tank system(s) or secondary containment, or has a tank system(s) become unfit for continued use since date of last inspection?

Yes ___ No N/A ___ RMK#_

(a) **If so**, did the Permittee follow the requirements of O.A.C. Rule 3745-55-96 and the procedures outlined in Condition D.6.(a) and D.6.(b) of the permit? [Condition D.6.]

Yes ___ No N/A RMK#_

(b) *If the emergency procedures specified in Permit Condition D.6.(b)(i) through D.6.(b)(iv) were not followed:* Did the Permittee close the system in accordance with the closure plan?

[Condition D.6.(b)]

Yes__ No N/A RMK#__

- (c) *For all major repairs to the system:* Did the Permittee obtain a certification by a independent, qualified, registered P.E. attesting that the repaired system was capable of handling hazardous waste?

[Condition D.6.(c)]

Yes__ No N/A RMK#__

- i. Did the Permittee submit certification of major repairs to the Director within 7 days from returning the tank system to use? [Condition D.7.(c)]

Yes__ No N/A RMK#__

NOTE: As specified in Condition D.6., examples of major repairs include: installation of an internal liner, repair of a ruptured tank or repair or replacement of a secondary containment vault.

- (d) Did the Permittee comply with the reporting requirements as specified in Condition D.7. of the permit?

Yes__ No N/A RMK#__

TANK SYSTEM INSPECTION REQUIREMENTS

9. Does the Permittee inspect the tank systems in accordance with the inspection schedule, including:

- (a) Inspection of overfill controls in accordance with the procedures specified in the permit application? [Condition D.5.(b)]

Yes No N/A__ RMK#__

- (b) Daily inspection of the above ground portion of the tank systems to detect corrosion or release of wastes? [Condition D.5.(c)(i)]

Yes No N/A__ RMK#__

- (c) Daily evaluation of data gathered from monitoring and leak detection equipment (e.g. pressure or temperature gauges, monitoring wells) to ensure that the tank system is being operated according to its design? [Condition D.6.(c)(ii)]

Yes No N/A__ RMK#__

- (d) Daily inspection of construction materials and area immediately surrounding the externally accessible portion of the tank system, including the secondary containment system, to detect erosion or signs of release of hazardous waste (e.g. wet spots, dead vegetation)? [Condition D.5.(c)(iii)]

Yes No N/A__ RMK#__

10. Does the Permittee document tank system inspections in the operating record of the facility in accordance with Condition D.5.(d) of the permit?

Yes No N/A ___ RMK# ___

SPECIAL PROVISIONS FOR IGNITABLE/REACTIVE/INCOMPATIBLE WASTES

11. Does the Permittee ensure that ignitable or reactive wastes are not placed in the tank or secondary containment system unless the procedures as specified in the Part B permit application have first been followed? [Condition D.9.(a)]

Yes No N/A ___ RMK# ___

(a) Did the Permittee document compliance with this condition in the operating record of the facility? [Condition D.9.(a)]

Yes No N/A ___ RMK# ___

12. Is the Permittee in compliance with the requirements for maintaining protective distances between the waste management areas and public areas as required in Tables 2-1 through 2-6 of the National Fire Protection Association's "Flammable and Combustible Liquids Code" (1991 or most recent edition) incorporated by reference in OAC Rule 3745-50-11? [Condition D.9.(b)]

Yes No N/A ___ RMK# ___

13. Does the Permittee ensure that no incompatible wastes are placed in the tank system or secondary containment system until the procedures as specified in the Part B permit application are first followed? [Condition D.10.(a)]

Yes No N/A ___ RMK# ___

(a) Has the Permittee documented compliance with this requirement in the facility's operating record? [Condition D.10.(a)]

Yes No N/A ___ RMK# ___

14. Does the Permittee ensure that incompatible wastes are not placed in the tank without first decontaminating the unit? [Condition D.10.(b)]

Yes No N/A ___ RMK# ___

TANK SYSTEM CLOSURE/POST-CLOSURE

15. At closure, did the Permittee follow the procedures as set forth in the approved closure plan? [Condition D.8.(a)]

Yes ___ No N/A RMK# ___

16. If the Permittee was unable to remove and/or decontaminate contaminated soils during closure, has the Permittee closed

the tank system and implemented post-closure care as specified by the contingent procedures of the closure plan and in the post-closure plan? [Condition D.8.(b)]

Yes__ No N/A RMK#__

RECORDKEEPING REQUIREMENTS

17. Does the Permittee maintain at the facility the written certification statements for the design and installation of the tank system? [Condition D.7.(d)]

Yes No N/A__ RMK#__

CORRECTIVE ACTIONS

1. Has the Permittee instituted corrective action as necessary to protect human health and the environment in accordance with O.A.C. Rule 3745-55-011? [Condition E.1.]

Yes No N/A__ RMK#__

(a) Has corrective action been implemented beyond the facility property boundary; where necessary to protect human health and the environment? [Condition E.2.]

Yes__ No N/A RMK#__

LAND DISPOSAL RESTRICTION REQUIREMENTS

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

1. Does the permittee comply with all applicable regulations regarding land disposal prohibitions and restrictions as required by OAC Chapter 3745-270?

Yes No N/A__ RMK#__

2. Does the permittee comply with the notification and certification requirements of OAC rule 3745-270-07(A)?

Yes No N/A__ RMK#__

3. Does the permittee comply with the requirements of OAC rule 3745-270-03 and does not in any way dilute a restricted waste or treatment residue as a substitute for adequate treatment?

Yes No N/A__ RMK#__

4. Does the permittee retain supporting data used to determine if wastes managed at the facility are restricted from land disposal in the facility files as required by OAC rule 3745-270-07(A)(5)?

Yes No N/A ___ RMK# ___

a. Are copies of all notices, certifications, demonstrations, waste analysis and other documentation produced pursuant to OAC Chapter 3745-270 retained for a period of three years as required by OAC rule 3745-270-07(A)?

Yes No N/A ___ RMK# ___

5. Is the permittee in compliance with the requirements of OAC rule 3745-270-50 regarding the storage of wastes restricted or prohibited from land disposal under OAC rule 3745-270-50?

Yes No N/A ___ RMK# ___

REMARKS

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

CESQG: #100Kg. (Approximately 25-30 gallons) of waste in a calendar month or < 1 Kg. of acutely hazardous waste.
 SQG: Between 100 and 1,000 Kg. (About 25 to under 300 gallons) of waste in a calendar month.

LQG: ≥1,000 Kg. (300 gallons) of waste in a calendar month or ≥1 Kg. of acutely hazardous waste in a calendar month.

NOTE: To convert from gallons to pounds: Amount in gallons x Specific Gravity x 8.345 = Amounts in pounds.

Safety Equipment Used:

GENERAL REQUIREMENTS

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

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

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

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

NOTE: Complete appropriate checklist for each unit.

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

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

e.	Are export related documents being maintained on-site? [3745-52-57(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
MANIFEST REQUIREMENTS		
12.	Have all hazardous wastes shipped off-site been accompanied by a manifest? (U.S. EPA Form 8700-22) [3745-52-20(A)]	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)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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)]		
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"/>
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)].		
15.	If the transporter was unable to deliver a shipment of hazardous waste to the designated facility did the generator designate an alternate TSD facility or give the transporter instructions to return the waste? [3745-52-20(D)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
16.	Have the manifests been signed by the generator and initial transporter? [3745-52-23(A)(1) & (2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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.		
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"/>
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.		
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 type="checkbox"/> No <input checked="" 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"/>

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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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input 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 checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
NOTE: OAC 3745-65-17(B) requires that the generator treat, store, or dispose of ignitable or reactive waste, and the mixture or commingling of incompatible wastes, or incompatible wastes and materials so that it does not create undesirable conditions or threaten human health or the environment.					
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)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
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					
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 checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
54.		Does each container <110 gallons have a completed hazardous waste label? [3745-52-32(B)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
55.		Before off-site transportation, does the generator placard or offer the appropriate DOT placards to the initial transporter? [3745-52-33]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

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SMALL QUANTITY UNIVERSAL WASTE HANDLER REQUIREMENTS - BATTERIES AND LAMPS

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

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

PROHIBITIONS

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

WASTE MANAGEMENT & LABELING/MARKING**UNIVERSAL WASTE BATTERIES**

3.	Are battery(ies) that show evidence of leakage, spillage or damage that could cause leaks contained? [3745-273-13(A)(1)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
4.	If batteries are contained, are the containers closed and structurally sound, compatible with the contents of the battery and lack evidence of leakage, spillage or damage that could cause leakage? [3745-273-13(A)(1)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
5.	Does the SQUWH conduct any of the following activities:			
	a. Sort batteries by type?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
	b. Mix battery types in one container?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
	c. Discharge batteries to remove the electric charge?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
	d. Regenerated used batteries?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
	e. Disassemble them into individual batteries or cells?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
	f. Remove batteries from consumer products?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
	g. Remove the electrolyte from the battery?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
	If so, are the casings of the batteries breached, not intact, or open (except to remove the electrolyte)? [3745-273-13(A)(2)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
6.	If the electrolyte is removed or other waste generated, has it been determined whether it is a hazardous waste? [3745-273-13(A)(3)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
	a. If the electrolyte or other waste is characteristic, is it managed in compliance with 3745-50 through 3745-69? [3745-273-13(A)(3)(a)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
	b. If the electrolyte or other waste is not hazardous, is it managed in compliance with applicable law? [3745-273-13(A)(3)(b)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
7.	Are the battery(ies) of container(s) of batteries labeled with the words "Universal Waste - Batteries" or "Waste Battery(ies)" or "Used Battery(ies)"? [3745-273-14(A)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

UNIVERSAL WASTE LAMPS

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

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	releases of mercury or hazardous waste constituents to the environment? [3745-273-13(D)(2)]	
10.	Are the lamps or containers or packages of lamps labeled with the words "Universal Waste - Lamp(s)" or "Waste Lamp(s)" or "Used Lamp(s)"? [3745-273-14(E)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<p>NOTE: Treatment (such as crushing) by a UWH is prohibited under this rule unless the facility is permitted for such activities [3745-273-31(B)]. A generator crushing lamps must manage lamps according to hazardous waste rules (OAC Chapter 3745-52). Lamp crushing is a form of generator treatment (OAC 3745-52-34). Crushed lamps must be transported by a registered hazardous waste transporter to a permitted hazardous waste facility under a hazardous waste manifest.</p>		
ACCUMULATION TIME		
11.	Is the waste accumulated for less than one year? [3745-273-15(A)] If not:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	a. Was the waste accumulated over one year in order to facilitate proper recovery, treatment or disposal? (Burden of proof is on the handler to demonstrate) [3745-273-15(B)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<p>NOTE: Accumulation is defined as date generated or date received from another handler.</p>		
12.	Is the length of time the universal waste is stored documented by <u>one</u> of the following: [3745-273-15(C)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	a. Marking or labeling the container with the earliest date when the universal waste became a waste or was received? [3745-273-15(C)(1)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	b. Marking or labeling individual item(s) of universal waste with the earliest date that it became a waste or was received? [3745-273-15(C)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	c. Maintaining an inventory system on-site that identifies the date the universal waste became a waste or was received? [3745-273-15(C)(3)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d. Maintaining an inventory system on-site that identifies the earliest date that any universal waste in a group of universal waste items or a group of containers became a universal waste or was received? [3745-273-15(C)(4)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	e. Placing the universal waste in a specific accumulation area and identifying the earliest start date or date received? [3745-273-15(C)(5)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	f. Any other method, which clearly demonstrates, the length of time the universal waste has been accumulated from the date it became a waste or was received? [3745-273-15(C)(6)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
EMPLOYEE TRAINING		
13.	Are employees who handle or have the responsibility for managing universal waste informed of waste handling/emergency procedures, relative to their responsibilities? [3745-273-16]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
RESPONSE TO RELEASES		
14.	Are releases of universal waste and other residues immediately contained? [3745-273-17(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
15.	Is the material released characterized? [3745-273-17(B)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
16.	If the material released is a hazardous waste, is it managed as required in OAC Chapters 3745-50 through 3745-69? (If the waste is hazardous, the handler is considered the generator of the waste and is subject to Chapter 3745-52) [3745-273-17 (B)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
OFF-SITE SHIPMENTS		
<p>NOTE: If a SQUWH self-transport waste, then they must comply with the Universal Waste transporter requirements.</p>		
17.	Are universal wastes sent to either another handler, destination facility or foreign destination? [3745-273-18(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

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[ID Number]

NOTE: SQUWHs are prohibited to send waste to any other facility.		
18.	If the universal waste meets the definition of hazardous material under 49 CFR 171-180, are DOT requirements met with regard to package, labels, placards and shipping papers? [3745-273-18(C)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
19.	Prior to shipping universal waste off-site, does the receiver agree to receive the shipment? [3745-273-18(D)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
20.	If the universal waste shipped off-site is rejected by another handler or destination facility does the originating handler do one of the following:	
a.	Receive the waste back? [3745-273-18(E)(1)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
b.	Agree to where the shipment will be sent? [3745-273-18(E)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
21.	If a handler rejects a partial or full load from another handler, does the receiving handler contact the originating handler and discuss one of the following:	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
a.	Sending the waste back to the originating handler? [3745-273-18(F)(1)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
b.	Sending the shipment to a destination facility? (If both the originating and receiving handler agree) [3745-273-18(F)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
22.	If the handler received a shipment of hazardous waste that was not universal waste, did the SQUWH immediately notify Ohio EPA? [3745-273-18(G)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
23.	If the handler received a shipment of nonhazardous, non-universal waste, was the waste managed in accordance with applicable law? [3745-273-18(H)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
EXPORTS		
24.	Is waste being sent to a foreign destination? If so:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
a.	Does the small quantity handler comply with primary exporter requirements in OAC 3745-52-53, 3745-52-56, and 3745-52-57? [3745-273-20(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
b.	Is waste exported only upon consent of the receiving country and in conformance with U.S. EPA's "Acknowledgment of Consent" as defined in 3745-52-50 to -52-57? [3745-273-20(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
c.	Is a copy of U.S. EPA's "Acknowledgment of Consent" provided to the transporter? [3745-273-20(C)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

[Facility Name/Inspection Date]

[ID Number]

**USED OIL INSPECTION CHECKLIST
PROCESSORS AND RE-REFINERS**

NOTE: A facility is subject to the federal SPCC regulations (40 CFR 112) if it is non-transportation related (e.g., fixed) and has an aggregate above ground storage capacity greater than 1,320 gallons or a total underground storage capacity greater than 42,000 gallons of oil (including used oil), and there is reasonable expectation of a discharge to navigable waters.

PROHIBITIONS

1.	Does the used oil processor or re-refiner manage used oil in a surface impoundment or waste pile? If yes:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
a.	Is the surface impoundment or waste pile regulated as a hazardous waste management unit? [3745-279-12(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

NOTE: For example, scrap metal contaminated with used oil or used oil managed in a surface impoundment (i.e., pond).

2.	Is used oil used as a dust suppressant? [3745-279-12(B)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
3.	Is off-specification used oil fuel burned for energy recovery in devices specified in 3745-279-12(C)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

NOTE: Multiple used oil checklists 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 checklists at a minimum).

4.	Has the used oil processor and/or re-refiner notified Ohio EPA or U.S. EPA and obtained a U.S. EPA ID#? [3745-279-51(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
5.	Does the owner/operator of a used oil processing or re-refining facility comply with the following:	
a.	Is the facility maintained and operated to minimize the possibility of fire, explosion, or release of used oil? [3745-279-52(A)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Is the facility equipped with the equipment in 3745-279-52(A)(2), if necessary?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Are all communication systems, alarm systems, fire protection equipment, spill control equipment, and decontamination equipment tested and maintained as required? [3745-279-52(A)(3)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
d.	Is there access to communication or alarm system(s)? [3745-279-52(A)(4)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
e.	Is the required aisle space being maintained? [3745-279-52(A)(5)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
f.	Are arrangements maintained with local authorities? [3745-279-52(A)(6)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

CONTINGENCY PLAN

6.	Does the owner/operator of a used oil processing and re-refining facility have a contingency plan to minimize hazards to human health or the environment from fires, explosions or any unplanned release of hazardous waste? [3745-279-52(B)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
7.	Does the plan describe the following:	
a.	Actions to be taken to response to fires, explosions or any unplanned release of used oil? [3745-279-52(B)(2)(a)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Arrangements with emergency authorities? [3745-279-52(B)(2)(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? [3745-279-52(B)(2)(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? [3745-279-52(B)(2)(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? [3745-279-52(B)(2)(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 used oil management provisions that are sufficient to comply with OAC requirements. [3745-279-52(B)(2)(b)]

8.	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? [3745-279-52(B)(3)(a) & (b)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
9.	Has the owner or operator revised the plan in response to rule changes, facility, equipment and personnel changes, or failure of the plan? [3745-279-52(B)(4)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
10.	Is an emergency coordinator available at all times (on-site or on-call)? [3745-279-52(B)(5)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<p><i>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.</i></p>		
11.	Does the used oil processor/re-refiner determine whether the total halogen content of the used oil being managed at the facility is above or below 1000 ppm? [3745-279-53(A)] If yes, then;	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	a. How did processor/re-refiner determine halogen level content:	
	i. Testing (approved SW-846 method)?; or	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	ii. Applying knowledge of the halogen content of the used oil in light of the materials or processes used?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
<p><i>NOTE: If determination was not made by one of the two methods, then determination is not valid.</i></p>		
	b. If halogens are equal to/above 1000 ppm, did the processor/re-refiner successfully rebut the presumption the used oil was mixed with a listed hazardous waste?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	If yes, what method did processor/re-refiner use to rebut the presumption (e.g., testing, exclusion, generator process information, etc.) (describe below).	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	If no, did the processor/re-refiner manage the material as a hazardous waste? [ORC 3734.02(E)(F)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
<p><i>NOTE: Once the facility has received the hazardous waste, they are in violation of ORC § 3734.02(E) and (F).</i></p>		
<p><i>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.</i></p>		
12.	Does/has the used oil processor/re-refiner:	
	a. Only store used oil in tanks, or containers; or a unit(s) subject to regulation as a hazardous waste management unit? [3745-279-54(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b. Only store used oil in containers and aboveground tanks that are in good condition, with no visible leaks? [3745-279-54(B)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c. Provide secondary containment for containers as required by 3745-279-54(C)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d. Provide secondary containment for existing aboveground tanks as required by 3745-279-54(D)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	e. Provide secondary containment for new aboveground tanks as required by 3745-279-54(E)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	f. Label all containers, aboveground tanks and fill pipes used for underground tanks with the words "Used Oil"? [3745-279-54(F)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	g. Upon detection of a release of used oil, done the following in accordance with 3745-279-54(G):	
	i. Stopped the release?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	ii. Contained the release?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	iii. Cleaned up and managed the used oil and other materials?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	iv. Repaired or replaced the containers or tanks prior to returning them to service, if necessary?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

	h.	Performed closure of aboveground tanks and containers in accordance with 3745-279-54(H)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
13.		Has the owner/operator of the used oil processing/re-refining facility developed, kept on-site, and followed a written waste analysis plan which meets the requirements in 3745-279-53 (how they will determine halogen content and rebut the presumption) and, if applicable 3745-279-72 (how they will determine if the used oil fuel is on-specification)? [3745-279-55(A) and/or (B)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	a.	Does the rebuttable presumption plan include whether samples or knowledge of the halogen content will be used?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
		If sampling is to be used, does the plan detail	
	i.	the method to be used?	
	ii.	the frequency of sampling and location of analysis?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	iii.	methods for analyzing used oil parameters (e.g., halogen constituents)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
		If knowledge is to be used, the type(s) of information that will be used determine halogen content of the used oil?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b.	Does the on-spec plan (if applicable) include whether samples or knowledge of the halogen content will be used?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
		If sampling is to be used, does the plan detail	
	i.	the sampling method used (must be either method in appendix I to rule 3745-51-20 or one equivalent under sections 40 CFR 260.20 and 260.21)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	ii.	if sampling will be done pre or post processing?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	iii.	the frequency of the sampling and the location of the analysis?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	iv.	methods for analyzing used oil parameters (e.g., arsenic, cadmium, chromium, lead)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
		If knowledge is to be used, does the plan contain the type(s) of information that will be used to make on specification determination?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
14.		Does the used oil processor/re-refiner keep a record of each shipment of used oil accepted for processing/re-refining? [3745-279-56(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	a.	Does each record include the name and address of the transporter who delivered the used oil to the processor? [3745-279-56(A)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b.	Does each record include the name and address of the generator or processor/re-refiner from whom the used oil was sent for processing/re-refining? [3745-279-56(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c.	Does each record include the U.S. EPA ID # of the transporter who delivered the used oil to the processor/re-refiner? [3745-279-56(A)(3)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d.	Does each record include the U.S. EPA ID # (if applicable) of the generator or processor/re-refiner from whom the used oil was sent for processing/re-refining? [3745-279-56(A)(4)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	e.	Does each record include the quantity of used oil accepted? [3745-279-56(A)(5)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	f.	Does each record include the date of acceptance? [3745-279-56(A)(6)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
15.		Does the used oil processor/re-refiner keep a record of each shipment of used oil that is shipped to a used oil burner, processor/re-refiner, or disposal facility? [3745-279-56(B)]	
	a.	Does each record include the name and address of the transporter who delivers the used oil to the burner, processor/re-refiner or disposal facility [3745-279-56(B)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

	b.	Does each record include the name and address of the burner, processor/re-refiner or disposal facility who receives the used oil? [3745-279-56(B)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c.	Does each record include the U.S. EPA ID# of the transporter that delivers the used oil to the burner, processor/re-refiner or disposal facility? [3745-279-56(B)(3)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d.	Does each record include the U.S. EPA ID# of the burner, processor/re-refiner or disposal facility who receives the used oil? [3745-279-56(B)(4)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	e.	Does each record include the quantity of used oil shipped? [3745-279-56-(B)(5)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	f.	Does each record include the date of shipment? [3745-279-56(B)(6)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
16.		Does the used oil processor/re-refiner retain all records required under 3745-279-56 for at least three years? [3745-279-56(C)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
17.		Does the owner/operator keep an operating record at the facility? [3745-279-57(A)(1)]	
	a.	Does the operating record include records and results of used oil analysis performed as described in the analysis plan required under 3745-279-55? [3745-279-57(A)(2)(a)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b.	Are summary reports and details of all incidents that require implementation of the contingency plan as specified in 3745-279-52(B) maintained in the operating record? [3745-279-57(A)(2)(b)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
18.		Does the used oil processor/re-refiner report to the director in the form of a letter, on a biennial basis by March 1, the following information:	
	a.	The U.S. EPA ID#, name and address of the processor/re-refiner? [3745-279-57(B)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b.	The calendar year covered by the report? [3745-279-57(B)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c.	The quantities of used oil accepted for processing/re-refining and the manner in which the used oil is processed/re-refined, including the specific processes employed? [3745-279-57(B)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
19.		Does the used oil processor/re-refiner, who initiates a shipment of used oil off-site, use a used oil transporter that has a U.S. EPA ID#? [3745-279-58]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
20.		Does the used oil processor/re-refiner generate residues from the storage, processing or re-refining of used oil? [3745-279-59]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
		If so, are the residues managed as specified in 3745-279-10(E)? [3745-279-59]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

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

GENERAL REQUIREMENTS

- | | | |
|----|--|--|
| 1. | If LDRs do not apply, does the generator have a statement that lists how the HW was generated, why LDRs don't apply and where the HW went? [3745-270-07 (A)(7)] | Yes <input 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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |

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

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|----|--|--|
| 3. | Does the generator have documentation of how he determined whether the HW/soil meets or does not meet the LDR treatment standard in 2, above? [3745-270-07(A)(6)(a) or 3745-270-07(A)(6)(b)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| 5. | Does the generator generate a listed HW that exhibits a characteristic? If yes, | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| a. | Did the generator determine if the listed HW exhibits a characteristic that is not treated under the LDR treatment standard for the listed HW? [3745-270-09(A)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |

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

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

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

NOTE: Written documentation of this determination is not required.

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

NOTE If a Yes@ see question #16.

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

NOTIFICATION FORM

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

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

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

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

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

PROHIBITED DILUTION

12.	Is the HW treated by burning? If <input type="checkbox"/> No, go to #15.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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13.	Is the HW a metal-bearing HW?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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NOTE: Generally, metal-bearing HWs contain heavy metals above TCLP levels or were listed due to the presence of metals. A list of the restricted metal-bearing HWs 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 one of the following conditions apply. [3745-270-03(c)]	
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	i.	Contains > 1% TOC?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
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	ii.	Contains organic constituents or cyanide at levels greater than the UST levels?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
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	iii.	Is made up of combustible material e.g., paper, wood, plastic?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
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	iv.	Has a reasonable heating value (e.g., > 5000 Btu)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
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	v.	Co-generated with a HW that must be combusted?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
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	b.	If all responses to 14 a.i. through 14 a.v. are <input type="checkbox"/> No, HW is being improperly treated by dilution, violation of 3745-270-03(C). Is HW being treated by dilution?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
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15.	Was the HW treated by wastewater treatment?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
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	a.	Is a LDR treatment method, other than DEACT or a numerical value, specified for the waste? [3745-270-03(B) and 3745-270-40(A)(3)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
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NOTE: If Yes, HW is improperly being treated by dilution.

	b.	Does the waste carry the D001 code and contain $\geq 10\%$ TOC?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
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	c.	Does the wastewater treatment process include a process to separate/recover the organic phase of the waste?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
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NOTE: If the answers to b & c are 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)].

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

GENERATOR TREATMENT		
16.	Does the generator treat to meet LDRs on-site [3745-270-40(A)]?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	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 Yes ...complete the rest of the checklist. If No ...stop...you are done.	
a.	Does the generator have a written waste analysis plan (WAP) that describes the procedures he will follow to treat the HW/soil to the LDR treatment standard? [3745-270-07(A)(5)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 checked="" type="checkbox"/>
NOTE: This is a laboratory analysis but it does not have to be kept by the generator.		
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 checked="" 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 checked="" 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 checked="" 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 checked="" 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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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"/>