



State of Ohio Environmental Protection Agency

Northeast District Office

2110 East Aurora Rd.  
Twinsburg, Ohio 44087

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

September 23, 2009

RE: PAUL'S AUTO BODY, INC.  
OHD 982 061 616  
MAHONING COUNTY  
CESQG  
NOV

Joel Vallas  
Paul's Auto Body, Inc  
1100 Mathews Road  
Youngstown, OH 44514

Dear Mr. Vallas:

On September 15, 2009, this writer, representing the Ohio Environmental Protection Agency (Ohio EPA), Division of Hazardous Waste Management, conducted a compliance evaluation inspection (CEI) at Paul's Auto Body located at 1100 Mathews Road, Youngstown, Ohio. The facility was inspected to determine its compliance with Ohio's hazardous waste laws as found in Chapter 3734 of the Ohio Revised Code (ORC), and the rules promulgated thereunder in Chapter 3745 of the Ohio Administrative Code (OAC).

The inspection included a review of the facility's operations, management of wastes, and records. The facility was inspected for the requirements of a conditionally exempt small quantity generator (CESQG) of hazardous waste.

Ohio EPA identified the following violation of Ohio's hazardous waste laws:

1. Waste Evaluation, OAC rule 3745-52-11:  
Any person who generates a waste, as defined in OAC rule 3745-51-02, must determine if that waste is a hazardous waste.

The facility failed to evaluate the contents of paint cups (ensuring they are empty prior to disposal). Cups with residual liquid paint/solvent in them were observed in a trash can. In order for the container to be empty, all waste that can be removed using common practices (pouring, pumping, aspirating, scrapping, etc) must be removed.

**In order to abate this violation, the facility must submit a written procedure and/or personnel training record that indicates how the facility will correct this violation.** A copy of OAC rule 3745-51-07 (empty container rule) is enclosed for your reference.

Comments:

2. Please submit an updated *RCRA Subtitle C Site Identification* form, specifically note the change to a CESQG and update the site contact information. This form was provided to you during the inspection.

3. The facility episodically generates spent lead acid batteries. While being stored on-site, the batteries should be stored in an area protected from the weather or in a container. In addition, any batteries that show evidence of damage (that could cause leakage under foreseeable conditions) must be contained.

The following technical assistance documents were provided to you during the inspection:

- Environmental Compliance Guide for Auto Repair Shops;
- Universal Waste Rules for Handlers of Lamps;
- Identifying Your Hazardous Waste;
- Regulation of Used Oil;
- CESQG and SQG checklists; and
- OCAPP Compliance assistance and pollution prevention brochure.

Ohio EPA's Office of Compliance Assistance and Pollution Prevention (OCAPP) provides free compliance and pollution prevention assistance on environmental issues related to air, land and water. As indicated during the inspection, please feel free to contact me or OCAPP should your facility be interested in these services. OCAPP may be contacted at: 800-329-7518 or <http://www.epa.state.oh.us/ocapp>.

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

Should you have any question, please feel free to call me at (330) 963-1278. You can find copies of the rules and other information on the DHWM's web page at <http://www.epa.state.oh.us/dhwm>

Sincerely,



Wade Balsler  
District Representative  
Division of Hazardous Waste Management

WB:dw  
Enclosure

ec: Nyall Mckenna, DHWM, NEDO

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

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

For Ohio EPA use only

E-mail this completed form to [kristina.durnell@epa.state.oh.us](mailto:kristina.durnell@epa.state.oh.us)  
or mail it to Kristina Durnell, Central Office

<b>Site EPA ID No.</b> <b>Site Name</b>	EPA ID Number: <b>OHD 982 061 616</b> Name: <b>Paul's Auto Body, Inc</b>	Website: (Optional)
<b>Site Location Information</b>	Street Address: <b>1100 Mathews Road</b> City, Town, or Village: <b>Youngstown</b> County Name: <b>Mahoning</b>	State: <b>OH</b> Zip Code: <b>44514</b>
<b>Site Land Type</b> (check only one) <b>NAICS code(s)</b> <a href="http://www.census.gov/eocd/www/naics.html">www.census.gov/eocd/www/naics.html</a>	Private <input checked="" type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other <input type="checkbox"/>	
<b>Facility Representative</b>  Additional names can be recorded in number 12  Only provide address information if it is different than the site address	First Name: <b>Joel</b> Phone Number: <b>330-782-5252</b> E-Mail Address: Fax Number: Street or P.O. Box: City, Town or Village: State:	MI: Last Name: <b>Vallas</b> Phone Number Extension:  Fax Number Extension:  Zip Code:
<b>Legal Owner And Operator of the Site.</b> List Additional Owners and/or Operators in the Comment Section or on another copy of this form page	Name of Site's Legal Owner:  Owner Type: Private <input checked="" type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other <input type="checkbox"/> Street or P.O. Box: City, Town or Village: State: Name of Site's Operator:  Operator Type: Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other <input type="checkbox"/> Street or P.O. Box: City, Town or Village: State:	Date Became Owner (mm/dd/yyyy):  Owner Phone #: Country: Zip Code: 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 type="checkbox"/> Large Quantity Generator (LQG)
		<input type="checkbox"/> Small Quantity Generator (SQG)
		<input checked="" type="checkbox"/> Conditionally Exempt Small Quantity Generator
		<input type="checkbox"/> U.S. Importer of Hazardous Waste
		<input type="checkbox"/> Mixed Waste (Hazardous and Radioactive) Generator

**TYPE OF REGULATED WASTE ACTIVITY (MARK "X" IN ALL OF THE APPROPRIATE BOXES)**

- |   |  |
|---|--|
| <input type="checkbox"/> Recycler of Hazardous Waste                    | <input type="checkbox"/> Exempt Boiler and/or Industrial Furnace       |
| <input type="checkbox"/> Underground Injection Control Facility         | <input type="checkbox"/> Small Quantity On-Site Burner Exemption       |
| <input type="checkbox"/> Hazardous Waste Transporter                    | <input type="checkbox"/> Smelting, Melting, Refining Furnace Exemption |
| <input type="checkbox"/> Treater, Storer or Disposer of Hazardous Waste |  |

**UNIVERSAL WASTE ACTIVITIES (INDICATE TYPES OF UNIVERSAL WASTE MANAGED)**

(CHECK ALL BOXES THAT APPLY)

- |   |   |
|---|---|
| <input type="checkbox"/> Small Quantity Handler of Universal Waste                                    | <input type="checkbox"/> Destination Facility for Universal Waste |
| <input type="checkbox"/> Large Quantity Handler of Universal Waste<br>(accumulates 5,000 kg. or more) |   |

**CHECK ALL BOXES BELOW THAT APPLY FOR THE TYPES OF UNIVERSAL WASTE THE FACILITY MANAGES**

- Batteries
- Pesticides
- Mercury containing equipment
- Lamps

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

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

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

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

- |            |   |  |                                      |
|------------|---|--|--------------------------------------|
| Announced  | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No | Additional Facility Representatives: |
| Tanks      | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No | Other Comments:                      |
| Containers | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No            |                                      |

Name of Inspector(s)	Name of Inspector(s)	Date of Inspection/Time (mm/dd/yyyy) (hh:mm)
Wade Balsler		9/15/2009 1330-1445

**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)

**CONDITIONALLY EXEMPT SMALL QUANTITY GENERATOR REQUIREMENTS  
COMPLETE AND ATTACH A PROCESS, WASTE, P2 SUMMARY SHEET**

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:

**WASTE EVALUATION**

1.	Have all wastes generated at the facility been laboratory evaluated? [3745-52-11]	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
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**GENERATOR CLASSIFICATION**

2.	Is the generator operating as a conditionally exempt small quantity generator? [conditionally exempt small quantity generator (CESQG)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
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NOTE: If quantities of hazardous waste generated in any one time exceed 1,000 Kg. - or the generator produces between 100 and 1,000 Kg. of hazardous waste per month, it is operating as a Small Quantity Generator ("SQG"). If so, complete the Small Quantity Generator Requirements checklist.

**OFF-SITE SHIPMENT OF HAZARDOUS WASTE**

3.	Does the CESQG ensure delivery of hazardous waste(s) to an off-site permitted TSD? [3734.02(F)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
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**TREATMENT OF HAZARDOUS WASTE**

4.	Does the generator treat hazardous waste in a:			
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 3745-65-90 to 3745-65-101 except 3745-65-97(C)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
c.	Drip pans 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 3745-250-100 to 3745-250-102?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

NOTE: Complete appropriate checklist for each unit.

NOTE: If the CESQG conducts treatment they are subject to the LQG requirements.

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