



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

October 27, 2009

RE: ROSS INCINERATION SERVICES, INC.
OHD 048 415 665
OHIO ID# 02-47-0295
TSDF/LQG – CEI

Ms. Patricia Lawson, Director
Corporate EHS, Security & Risk Management
Ross Incineration Services, Inc.
36790 Giles Road
Grafton, OH 44044

Dear Ms. Lawson:

On October 14 and 15, 2009, Ohio EPA conducted a Compliance Evaluation Inspection (CEI) of Ross Incineration Services Inc. (RIS). RIS is located in Eaton Township at 36790 Giles Road in Grafton, Ohio. The purpose of the inspection was to determine RIS's compliance with Ohio's hazardous waste laws as found in Chapter 3734 of the Ohio Revised Code (ORC), Chapter 3745 of the Ohio Administrative Code (OAC), and with RIS's Ohio Hazardous Waste Facility Installation and Operation Permit effective September 30, 2003. Ohio EPA was represented by Suzanne Prusnek, Kris Coder, Neil Wasilk and myself. RIS was represented by you, Jeff Lenchak, Debbie Bishop and Chad Colman.

Ohio EPA's inspection report includes findings from the walk-through of the facility on October 14, 2009, and issues noted during the review of facility records and interviews with facility personnel. Written documentation reviewed for compliance with Ohio's hazardous waste laws and regulations included: contingency plan implementation reports, operating record retention system, training records, manifests, inspection logs, work orders, incinerator operating logs, LDR's and inventory records.

The following violations of Ohio's hazardous waste rules and RIS's permit conditions were identified.

1. *OAC 3745-55-73 Management of Containers and Permit Condition C.5(b).*

One tote on the East Pad had a torn plastic cover. The violation was abated at the time of the inspection by replacing the plastic cover. No further action is needed at this time.

2. *OAC 3745-54-73(B)(11) Operating Record and Permit Condition A 28(a)(vi).*

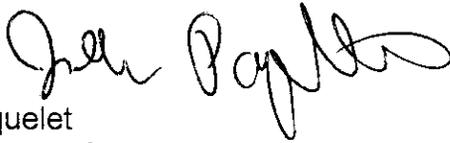
One manifest didn't have a LDR notification form for the shipment. Ross was able to obtain the form from the generator prior to the conclusion of the inspection to abate the violation. No further action is needed at this time.

MS. PATRICIA LAWSON, DIRECTOR
ROSS INCINERATION SERVICES, INC.
OCTOBER 27, 2009
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Enclosed you will find a copy of the checklists that we completed during the inspection.

Should you have any questions regarding this letter, please contact me at (330) 963-1246.

Sincerely,



John Paquelet
Environmental Specialist II
Division of Hazardous Waste Management

JP:ddw

Enclosure

cc: Sheila Burrus, U.S. EPA, Region V (with enclosure)
William Damico, U.S. EPA, Region V
Neil Wasilk, Ohio EPA, DHWM, NEDO
Natalie Oryshkewych, Ohio EPA, Manager DHWM, NEDO
ec: Nyall McKenna, Ohio EPA, DHWM, NEDO
Pam McCoy, Ohio EPA, DHWM, CO

NOTICE:

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

**OHIO PART B PERMITTED FACILITY
RCRA INSPECTION CHECKLIST**

Facility: Ross Incineration Services Ohio Permit: 02-47-0295
 Address: 36790 Giles Road U.S. EPA ID: OHD 048 415 665
Grafton, Ohio 44044 Phone: _____
 County: Lorain
 Inspection Date: 10, 14, 09 Time: 8:00 AM
 Was advance notice of the inspection given? _____ YES X NO
 If so, how far in advance? _____

	<u>Name</u>	<u>Agency/Title</u>	<u>Phone</u>
Inspectors:	<u>John Paquelet / Neil Wasilk / Suzanne Prusnek / Kris Coder</u>		
Facility Reps:	<u>Pat Lawson / Debbie Bishop / Jeff Lenczak / Chad Colman</u>		
Is facility operating as a generator?	<u>X</u> YES	_____ NO	

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

PERMIT STATUS

Permit Issued: 9/ 30/ 03 LDR Checklist Attached: Yes No
 Permit Effective Date: 9/ 30/ 03 Used Oil Checklist Attached: Yes No
 Permit Expiration Date: 9/ 30/ 13 Generator Checklist Attached: Yes No
 Permit Renewal Date: _____
 Permit Modification Date(s): _____

AUTHORIZED ACTIVITIES

STORAGE		TREATMENT		DISPOSAL	
<u>X</u>	Containers	<u>X</u>	Tanks		Injection Well
<u>X</u>	Tanks	<u>X</u>	Incinerator		Landfill
	Waste Pile		Thermal Treatment		Land Application
	Surface Impoundment	<u>X</u>	Post-Closure		Surface Impoundment

X Post-Closure Care X Corrective Action

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GENERAL PERMIT COMPLIANCE AND ACTIVITIES

1. Has the expiration date of the permit passed? If so: Yes ___ No N/A ___ RMK# ___
- a. Is the permittee continuing any activity regulated by the permit? Yes ___ No ___ N/A RMK# ___
- b. Was a permit renewal application submitted to OEPA no later than 180 days prior to the expiration date? [Condition A.6] Yes ___ No N/A RMK# ___
2. Was the annual permit fee submitted to Ohio EPA on or before the anniversary of the date of the permit? [Condition A.26] 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? [Conditions A.1(b) and A.5] Yes No N/A ___ RMK# ___
5. Has the facility identified any instances of noncompliance with the permit, ORC Chapter 3734. or the rules adopted thereunder, which may endanger human health or the environment? If so: Yes No N/A ___ RMK# ___
- a. Did the facility immediately report the information as specified in Condition A.20? [Condition A.20] Yes ___ No N/A RMK# ___
- Did the facility submit a written report as specified in Condition A.21 within five days of becoming aware of the circumstances reported above? Yes ___ No N/A RMK# ___
7. Has the permittee identified instances of noncompliance not provided for in Condition A.20, if so: Yes No N/A ___ RMK# ___ 9/24/2009
- a. Did the permittee report these instances to Ohio EPA, DHWM? [Condition A.22]? Yes No N/A ___ RMK# ___
- b. Do the reports contain the information set forth in Condition A.20? [Condition A.20] Yes No N/A ___ RMK# ___
- c. Were all reasonable steps necessary to minimize any adverse impact on human health or the environment? [Condition A.8] Yes No N/A ___ RMK# ___
8. Has the permittee planned any changes in the permitted facility or activity which may result in noncompliance with the conditions of the permit?: Yes ___ No N/A ___ RMK# ___
- a. If so, has the facility provided Ohio EPA with advance notice of such changes? [Condition A.17] Yes ___ No N/A RMK# ___

NOTE: Such notification does not waive the permittee's duty to comply with the permit. [Condition A.17]

9. Has the permittee become aware that it failed to submit any relevant facts or that it submitted incorrect or incomplete information in permit issuance proceedings or other submissions to Ohio EPA? If so: Yes ___ No N/A ___ RMK# ___
- a. Has the permittee properly submitted such facts or corrected information to the appropriate entity? [Condition A.24] Yes ___ No ___ N/A RMK# ___

PERMIT MODIFICATION, REVISION, REVOCATION

10. Has the permittee filed a request for a permit modification, revision or revocation since permit issuance? [Condition A.2] Yes No ___ N/A ___ RMK# ___
- a. Were all such requests made in accordance with OAC Rule 3745-50-51 (i.e., followed PMR requirements)? [Condition A.15] YES
11. Has the permit, been transferred to a new owner/operator? If so, have the requirements of Condition A.18 been met? Yes ___ No N/A ___ RMK# ___
12. Has the permittee submitted reports for each compliance schedule in the permit by the scheduled date? [Condition A.19] Yes No ___ N/A ___ RMK# ___
13. Has the permittee furnished to Ohio EPA, upon request, relevant information 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# ___
14. Has the facility furnished to Ohio EPA, upon request, copies of records required to be kept by the permit? [Condition A.10] Yes No ___ N/A ___ RMK# ___
15. Has the permittee maintained records of all data used to complete the application and any amendments, revisions or modifications to the application for at least three years? [Condition A.14(a)] Yes No ___ N/A ___ RMK# ___
16. Has the permittee retained a complete copy of the approved application for at least five years from the effective date of the permit? [Condition A.14(c)] Yes No ___ N/A ___ RMK# ___

17. Has the permittee given notice to the director as soon as possible of any physical alterations or additions to the permitted facility? If so:

Yes No ___ N/A ___ RMK# ___

- a. Were all such changes made in accordance with OAC Rule 3745-50-51 (i.e., followed PMR requirements)? [Condition A.15]

Yes No ___ N/A ___ RMK# ___

SITE ENTRY - AVAILABILITY OF RECORDS

18. Has the permittee allowed Ohio EPA, pursuant to Condition A.11, upon proper identification to:

- a. Enter at reasonable times upon the premises where a regulated activity is located or where records must be kept under the conditions of the permit?

Yes No ___ N/A ___ RMK# ___

- b. Have access to and copy, at reasonable times, any records must be kept under the conditions of the permit?

Yes No ___ N/A ___ RMK# ___

- c. Inspect, at any time, facilities, equipment (including control and monitoring equipment), practices or other operations regulated under the conditions of the permit?

Yes No ___ N/A ___ RMK# ___

- d. Sample, document, photograph or monitor, at reasonable times, any substances or parameter at the location of the facility to assure compliance with the permit or as otherwise authorized by ORC Chapter 3734. and the rules adopted thereunder?

Yes No ___ N/A ___ RMK# ___

INSPECTION ITEMS FROM PART B APPLICATION

Note: The inspector or permit writer may add questions pertaining to the permittee's application, as appropriate.

REMARKS

RECORDKEEPING/OPERATING REQUIREMENTS

OPERATING RECORD

1. Does the permittee maintain an Operating Record, as required by OAC rules 3745-54-73 and 3745-54-74 and Condition B.22 of the permit, which contains the following information:
- a. A description of the quantity of each hazardous waste and the method(s) and date(s) of its treatment or storage? Yes No N/A RMK#
 - b. The location of each hazardous waste and quantity at each location including cross-reference to specific manifest numbers? Yes No N/A RMK#
 - c. Records and results of required waste analysis? Yes No N/A RMK#
 - d. Summary reports and details of all incidents that required implementation of the contingency plan? Yes No N/A RMK#
 - e. Records and results of required inspections? Yes No N/A RMK#
 - f. Documents required to be maintained by LDR requirements of OAC Chapter 3745-270? Yes No N/A RMK#
 - g. Monitoring, testing, or analytical data, and corrective action where required, from groundwater monitoring and required monitoring of surface impoundments, landfills, waste piles and land treatment units? [3745-54-73(B)(6)] Yes No N/A RMK#
 - h. Notices to generators pursuant to 3745-54-12 that facility has appropriate permits to accept waste and agrees to accept it. Yes No N/A RMK#

2. In accordance with Condition A.28 of the permit, is the permittee maintaining the following documents at the facility or at an off-site location pursuant to Condition B.22:
- a. Waste analysis plan in accordance with OAC rule 3745-54-13 and the permit terms and conditions? Yes No ___ N/A ___ RMK# ___
 - b. Contingency plan in accordance with OAC rule 3745-54-53 and the permit terms and conditions? Yes No ___ N/A ___ RMK# ___
 - c. Closure plan in accordance with OAC rule 3745-55-12? Yes No ___ N/A ___ RMK# ___
 - d. Cost estimate for facility closure in accordance with OAC rule 3745-55-42? (Estimate only - adequacy will be evaluated by CO financial assurance personnel) [Condition B.36] Yes No ___ N/A ___ RMK# ___
 - e. Personnel training plan and records required by OAC rule 3745-54-16? [Condition B.6] Yes No ___ N/A ___ RMK# ___
 - f. Inspection schedules developed in accordance with OAC rules 3745-54-15, 3745-55-74 and 3745-55-95? [Condition B.5] Yes No ___ N/A ___ RMK# ___
 - g. Operating record in accordance with OAC rule 3745-54-73? [Condition B.22] Yes No ___ N/A ___ RMK# ___
 - h. Post-closure plan, as required by OAC rule 3745-55-18(A)? [Condition A.28(a)(viii)] Yes No ___ N/A ___ RMK# ___
 - i. Annually-adjusted cost estimate for facility closure and post-closure, as required by OAC rules 3745-55-42 and 3745-55-44? [Condition A.28(a)(ix)] Yes No ___ N/A ___ RMK# ___
3. 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 B.5] Yes No ___ N/A ___ RMK# ___
4. Have any of the documents in Question No. 2 been revised? [Condition A.15] If so:
- a. Has the permittee submitted the revisions to Ohio EPA in accordance with OAC rule 3745-50-51? Yes No ___ N/A ___ RMK# ___
 - b. Have all requirements of OAC rule 3745-50-51 been met, including where required, Ohio EPA approval? Yes No ___ N/A ___ RMK# ___

ANNUAL REPORT REQUIREMENT

5. Has the permittee submitted:
 -an annual report as required by OAC rule 3745-54-75?
 -any additional reports required by OAC rule 3745-54-77?
 [Condition B.25]

Yes No N/A RMK#
 Yes No N/A RMK#

SAMPLING/MONITORING RECORDKEEPING REQUIREMENTS

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

- a. Date(s), exact place(s), time(s) and method(s) of sampling or measurement?
- b. Individual(s) who performed the sampling or measurement?
- c. Date(s) analyses were performed?
- d. Individual(s) who performed the analyses?
- e. Analytical technique(s) or method(s) used?
- f. Results of such analyses?

Yes No N/A RMK#
 Yes No N/A RMK#

7. Are monitoring samples and measurements a representative sample of the waste or parameter to be analyzed? [Condition A.12(a)]

Yes No N/A RMK#

8. Does the permittee retain:

- records of monitoring information required by the permit, including all calibration and maintenance records, for at least three years from the date of sampling, measurement, report, certification or application?
- Copy of permit application for at least 5 years from the effective date of the permit?
- Ground water monitoring records for the active life of the facility and during the post closure care period?[Condition A.14]

Yes No N/A RMK#
 Yes No N/A RMK#
 Yes No N/A RMK#

9. Has Ohio EPA requested submittal of any reports or other information from the permittee? If so:

Yes No N/A RMK#

- a. Have all applications, reports or information submitted been signed and certified according to OAC rule 3745-50-42? [Condition A.13]

Yes No N/A RMK#

INSPECTION ITEMS FROM THE PART B APPLICATION

NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.

REMARKS

WASTE MINIMIZATION REQUIREMENTS

1. Does the permittee certify at least annually that a program is in place to reduce the volume and toxicity of hazardous waste generated? [Condition A.29(a), OAC rule 3745-54-73] Yes No N/A RMK#

2. Did the permittee submit a waste minimization report to the Office of Pollution Prevention and NEDO:
- within 180 days of journalization of this permit?
- and submit updates biennially thereafter? [Condition A.29(b)] Yes No N/A RMK#

3. Has the permittee reduced the amount of waste (hazardous waste, solid waste, air emission, waste water discharges, etc.) this year generated at their facility by implementing pollution prevention/waste minimization? Yes No N/A RMK#

If so, what amount of waste has the permittee reduced this year?

RECYCLE STEEL # FOR 2008 - 1,181 TONS

HAVE, NOT SURE,

4. Has the permittee's company saved much money this year by implementing pollution prevention (reducing raw material usage, disposal fees, energy savings, etc.)? Yes No N/A RMK#

If so, how much money has the permittee's company saved this year? _____

NOTE: If this facility is inspected two times a year, the information obtained in questions 3 & 4 only needs to be collected one time for the calendar year.

REMARKS

RECYCLE STEEL; RECYCLE PAPER & CARDBOARD
& HAVE UW FOR USE.

GROUND WATER MONITORING

- 1. Has the permittee conducted annual sampling of its monitoring wells? Yes No N/A RMK#

- 2. Has the permittee submitted:
 - the ground water Annual Report by March 1? [Condition J.8.(c)] Yes No N/A RMK#
 - any other reports required by Condition J.10 within the designated timelines? [Condition J.8.(d)] Yes No N/A RMK#

INSPECTION ITEMS FROM THE PART B APPLICATION

NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.

REMARKS

WASTE ACCEPTANCE AND GENERATION

- 1. Has the permittee notified the director at least four weeks prior to the date the permittee expects to receive hazardous waste from a foreign source?[Condition B.2(a)] Yes No N/A RMK#

OFF-SITE SHIPMENTS/MANIFEST REQUIREMENTS for Permittee as Generator

1. Is the permittee complying with the manifest requirements set forth in OAC Chapter 3745-52 and OAC rules 3745-54-70, 3745-54-71, 3745-54-72 and 3745-54-76: [Condition B.24]

a. Are all hazardous wastes shipped off-site accompanied by a completed hazardous waste manifest? [OAC rule 3745-52-20(A)]

Yes No N/A RMK#

b. Does the manifest form contain all information required by OAC rule 3745-52-20 and the minimum number of copies required by OAC rule 3745-52-22?

Yes No N/A RMK#

c. Has the permittee designated at least one permitted disposal facility on the manifest?

Yes No N/A RMK#

Has the permittee designated an alternate facility, or instructions to return waste, if required by OAC rule 3745-52-20(C),(D)?

Yes No N/A RMK# RETURN

d. Have manifests have been signed by the permittee and initial transporter? [OAC rule 3745-52-23]?

IF problem
Yes No N/A RMK#

2. Are signed copies of all hazardous waste manifests from the designated facility, and any documentation required for exception reports, retained for at least three years? [OAC rule 3745-52-40]

Yes No N/A RMK#

NOTE: If the permittee is generating hazardous waste, remember to attach a complete generator checklist.

3. Does the permittee use only properly registered transporters when removing hazardous wastes? [Condition A.16]

Yes No N/A RMK#

Transporters:

MANIFEST REQUIREMENTS for Permittee as TSDF receiving hazardous waste

4. Does the permittee sign and date each manifest and give one copy to the transporter, send one copy to the generator within 30 days, and keep one copy for at least three years? [3745-54-71(A)] Yes No N/A RMK#
- a. Are significant discrepancies in the manifest, as defined in 3745-54-72(A) noted in writing on each copy of the manifest? Yes No N/A RMK#
5. Have any significant manifest discrepancies been reconciled within 15 days as required by 3745-54-72(B)? If not: Yes No N/A RMK#
- a. Has the owner/operator submitted the required information to the director? Yes No N/A RMK#
6. Has the facility has accepted any unmanifested hazardous wastes from off-site sources for treatment, storage, or disposal? Yes No N/A RMK#
- If so, has an unmanifested waste report containing all the information required by 3745-54-76(A) been submitted within 15 days? Yes No N/A RMK#
7. Does the permittee send a hazardous waste shipment to a consignment state (i.e., the state in which the hazardous waste shipment will be transported and subsequently manage)? If so: Yes No N/A RMK#
- a. Has the permittee determined whether the consignment state for a shipment regulates any additional wastes (beyond those regulated federally) as hazardous wastes under its state hazardous waste program? [3745-54-71(E)] Yes No N/A RMK#
- b. Has the permittee determined whether the consignment state requires the permittee to submit any copies of the manifest to the state? [3745-54-71(E)] Yes No N/A RMK#

8. Has the permittee rejected any hazardous waste load or identified a container residue that exceeds the quantity limits for "empty" containers? If so:

a. Did the permittee consult with the generator prior to forwarding the rejected waste to an alternate facility? [3745-54-72(D)(1)]

Yes No ___ N/A ___ RMK# ___

Both

b. Did the permittee send the rejected waste to an alternate facility or returned the rejected waste to the generator within 60 days after the rejection? [3745-54-72(D)(1)]

Yes No ___ N/A ___ RMK# ___

c. While the permittee is making arrangements for forwarding rejected waste to another facility, did the permittee ensure that either the delivering transporter retained custody of the waste or did the permittee provide for secure, temporary custody of the waste? [3745-54-72(D)(2)]

Yes No ___ N/A ___ RMK# ___

d. Did the permittee prepare a manifest in accordance with OAC 3745-54-71(E)(1) through (7) for rejected waste to be sent to an alternate facility? [3745-54-72(E)]

Yes No ___ N/A ___ RMK# ___

e. Did the permittee prepare a manifest in accordance with OAC 3745-54-72(F)(1) through (7) for rejected waste to be sent back to the generator? [3745-54-72(F)]

Yes No ___ N/A ___ RMK# ___

WASTE ANALYSIS/WASTE ANALYSIS PLAN

1. Does the permittee have a detailed chemical and physical analysis of all waste streams which contains all the information on the waste in accordance with OAC Chapters 3745-54 to 3745-57, 3745-218 and 3745-270 and the terms and conditions of the permit? [Condition B.3(a)]

Yes No ___ N/A ___ RMK# ___

2. Does the permittee follow the Waste Profile Survey preparation methods and procedures specified in the WAP to ensure that the Permittee has all the information to properly treat, store and dispose of each waste accepted? [3745-54-13(A)] [Condition B.3(ab)]

Yes No ___ N/A ___ RMK# ___

- | | | |
|-----|--|--|
| 3. | Does the permittee follow the waste prohibitions and restrictions in Table C1-1 of the WAP? [Condition B.3(a)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <input type="checkbox"/> |
| 4. | Does the permittee properly classify wastes as standard and special wastes as described in the WAP? [Condition B.3(a)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <input type="checkbox"/> |
| 5. | Does the permittee follow pre-acceptance review procedures for special wastes as described in the WAP? [Condition B.3(a)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <input type="checkbox"/> |
| 6. | Does the permittee follow the "fingerprinting" sampling methods and procedures specified in the WAP to ensure that each waste shipment matches the identification of the waste on the manifest and the WPS? [3745-54-13(C)] [Condition B.3(a)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <input type="checkbox"/> |
| 7. | Does the permittee conduct visual inspections in accordance with the procedures described in the WAP? [Condition B.3(a)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <input type="checkbox"/> |
| 8. | Does the permittee conduct metals and PCBs sampling and analyses in accordance with the procedures described in the WAP? [Condition B.3(a)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <input type="checkbox"/> |
| 9. | In accordance with OAC rule 3745-54-13(A)(3), does the permittee repeat the waste analysis when the process or operation generating the hazardous waste has changed, or at least annually? [Condition B.3] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <input type="checkbox"/> |
| 10. | Does the permittee conduct residuals sampling and analyses in accordance with Condition B.3(b) and the procedures in the WAP? [Condition B.3(b)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <input type="checkbox"/> |
| 11. | Does the permittee place the results of all waste analyses in the facility operating record? | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <input type="checkbox"/> |

INSPECTION ITEMS FROM THE PART B APPLICATION

NOTE: *The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.*

REMARKS

GENERAL INSPECTION REQUIREMENTS

NOTE: *Inspector may attach a copy of the inspection procedures and schedules. If so, the attached document is referenced as Appendix _____.*

- 1. Is the permittee following the inspection procedures and schedules as set forth in the permit (Sec. F of the application)? [Condition B.5] Yes No ___ N/A ___ RMK# ___

- 2. 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 Sec. F of the application?
 - a. Is the schedule kept at the facility? [OAC rule 3745-54-15(B)(2)] Yes No ___ N/A ___ RMK# ___

- 3. Does the permittee remedy deterioration or any malfunctions discovered by an inspection? [Condition B.5] Yes No ___ N/A ___ RMK# ___

- 4. Do inspection records contain the following information [OAC rule 3745-54-15(D) and Condition B.5]:
 - a. Date and time of inspection? Yes No ___ N/A ___ RMK# ___
 - b. Name of inspector? Yes No ___ N/A ___ RMK# ___
 - c. Notation of observations made? Yes No ___ N/A ___ RMK# ___
 - d. Date and nature of any repairs or other remedial actions? Yes No ___ N/A ___ RMK# ___

INSPECTION ITEMS FROM THE PART B APPLICATION###

NOTE: *The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.*

REMARKS

SECURITY REQUIREMENTS

1. Does the permittee comply with OAC rule 3745-54-14 and Condition B.4 of the permit: [Sec. F of the application]
Does the permittee have:

- a. A 24-hour surveillance system which continuously monitors and controls entry onto the active portion of the facility?
 - b. An artificial or natural barrier (in good repair) which completely surrounds the active portion of the facility?
 - c. A means to control entry, at all times, through gates or other entrances, to the active portion of the facility?
- Signs reading “Danger - Unauthorized Personnel Keep Out” posted at entrances to the active portion of the facility and other locations?

Yes No N/A RMK#

GUARD

Yes No N/A RMK#

Yes No N/A RMK#

Yes No N/A RMK#

FACILITY OPERATIONS

2. 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 or hazardous waste constituents to air, soil, ground or surface water?

Yes No N/A RMK#

Does the Permittee operate and maintain the facility in accordance with fire, explosion, or release prevention procedures, practices and design specifications provided in Sections D, F and G of the Part B permit application. [OAC rule 3745-54-31; Condition B.1]

Yes No N/A RMK#

3. Does the permittee properly maintain and operate the facility to achieve compliance with the terms and conditions of the permit including: [Condition A.9]

- a. Effective management practices?
- b. Adequate funding?
- c. Adequate operator staffing and training?
- d. Adequate laboratory and process controls?

Yes No N/A RMK#

Yes No N/A RMK#

Yes No N/A RMK#

Yes No N/A RMK#

INSPECTION ITEMS FROM THE PART B APPLICATION

NOTE: The inspector or permit writer may add inspection items based on the permittee’s application, as

appropriate.

REMARKS

PERSONNEL TRAINING

1. Is the permittee conducting personnel training in accordance with the conditions of the permit and Sec. H of the permit application?[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? [OAC rule 3745-54-16(A)(B)(C)]

Yes No N/A RMK#

MONTHLY TRAINING

b. The facility provides personnel training to new employees within six months after their date of employment as required by OAC rule 3745-54-16(B)?

Yes No N/A RMK#

c. The facility provides an annual refresher training course as required by OAC rule 3745-54-16(C)?

Yes No N/A RMK#

2. Is the permittee maintaining personnel training records as required by OAC rule 3745-54-16(D) and Sec. H of the application, including: written job titles, job descriptions and documented employee training records? [Condition B.6]

Yes No N/A RMK#

INSPECTION ITEMS FROM THE PART B APPLICATION

NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.

REMARKS

REQUIRED EQUIPMENT

NOTE: Inspector may attach a list of emergency equipment. If so, the attachment document is referenced as Appendix _____.

1. Has the permittee equipped the facility with the emergency equipment specified in Sec. G of the application, including [OAC rule 3745-54-32, Condition B.9]:
- a. An internal communications or alarm system? Yes No ___ N/A ___ RMK# ___
 - b. A device such as a telephone which is capable of summoning emergency assistance from local emergency authorities? Yes No ___ N/A ___ RMK# ___
 - c. Portable fire extinguishers and/or fire control equipment, spill control and decontamination equipment? Yes No ___ N/A ___ RMK# ___
 - d. Water in adequate volume and pressure to supply water hose streams, foam producing equipment, automatic sprinklers or water spray systems? Yes No ___ N/A ___ RMK# ___
To the best of my knowledge
2. Is the permittee inspecting, testing and maintaining the equipment specified in Question No. 1 to ensure its proper operating in accordance with Sec. F of the application? [OAC rule 3745-54-33, Condition B.10] Yes No ___ N/A ___ RMK# ___
3. Has the permittee provided all personnel involved in the hazardous waste operation with immediate access to an internal alarm or emergency communication device? [OAC rule 3745-54-34, Condition B.11, Sec. D, F & G of the permit application]? Yes No ___ N/A ___ RMK# ___

INSPECTION ITEMS FROM THE PART B APPLICATION

NOTE: *The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.*

REMARKS

CONTINGENCY PLAN - EMERGENCY PROCEDURES

1. In compliance with Condition B.13 of the permit and OAC rule 3745-54-37(A) and (B), does the permittee:
- a. Familiarize emergency response agencies with the layout of the facility, associated hazards, places where personnel will normally be working, entrances and possible evacuation routes? Yes No ___ N/A ___ RMK# ___
 - b. Inform such agencies of safety equipment, supplies, proper emergency safety procedures that are applicable to the facility? Yes No ___ N/A ___ RMK# ___
 - c. Familiarize the local hospital listed in the approved application with the properties of hazardous waste handled at the facility and the types of injuries or illness that could result from fires, explosions or releases at the facility? Yes No ___ N/A ___ RMK# ___
2. Has a state or local agency declined to enter into the arrangements set forth in OAC rule 3745-54-37(A)? If so:
- a. Has the permittee documented the refusal in the operating record as required by OAC rule 3745-54-37(B)? [Condition B.13(b)] Yes ___ No N/A ___ RMK# ___
3. Has the permittee, in accordance with OAC rule 3745-54-53 submitted a copy of the approved contingency plan (including amendments, revisions or changes) to all local authorities, agencies and response contractors designated in the approved contingency plan? [Condition B.18(b)] Yes No ___ N/A ___ RMK# ___
4. Has the permittee notified all parties identified in the contingency plan in writing of amendments, modifications, or revisions to the plan within ten days of the effective date of the change in the plan? [Condition B.18(b)] Yes No ___ N/A ___ RMK# ___
5. Has the permittee submitted a copy of the approved contingency plan and all revisions, amendments and modifications to the Ohio EPA, Division of Emergency and Remedial Response (DERR) in accordance with OAC rule 3745-54-53? [Condition B.18(c)] Yes No ___ N/A ___ RMK# ___
6. Is the permittee reviewing the approved contingency plan at least annually and amending the plan immediately if needed in compliance with OAC rule 3745-54-54? [Condition B.17] Yes No ___ N/A ___ RMK# ___

NOTE: Also see Question No. 4 of Recordkeeping Requirements to verify that any changes to the contingency plan were submitted in accordance with OAC rule 3745-50-51.

EMERGENCY COORDINATOR

7. In accordance with OAC rule 3745-54-55 and Condition B.19 of the permit, is an emergency coordinator on premises or on call at all times? Yes No ___ N/A ___ RMK# ___
8. In accordance with OAC rule 3745-54-55 and Condition B.19 of the permit, is/are the emergency coordinator(s) at the facility familiar with the following:
- a. Contingency plan? Yes No ___ N/A ___ RMK# ___
 - b. Facility operations/activities? Yes No ___ N/A ___ RMK# ___
 - c. Waste characterization and location? Yes No ___ N/A ___ RMK# ___
 - d. Location of all records in the facility? Yes No ___ N/A ___ RMK# ___
 - e. Facility layout? Yes No ___ N/A ___ RMK# ___
9. In accordance with OAC rule 3745-54-55, does/do the emergency coordinator(s) have the authority to commit the resources needed to carry out the contingency plan? [Condition B.19] Yes No ___ N/A ___ RMK# ___
10. Does the permittee have a contingency plan for the facility that: [Condition B.19]
- a. Describes the actions facility shall take to comply with OAC rules 3745-54-51 through 3745-54-56 in response to fires, explosions, or any unplanned sudden or nonsudden release of hazardous waste or hazardous waste constituents to air, soil or surface water at the facility? Yes No ___ N/A ___ RMK# ___

- b. Describes arrangements agreed to by local police, fire departments, hospitals, contractors and Ohio EPA and the local emergency response team to coordinate emergency services? Yes No ___ N/A ___ RMK# ___
- c. Includes an up-to-date list of names, addresses and phone numbers (office and home) for all persons qualified to act as emergency coordinator in the order that they will assume responsibility for coordination of emergency response? Yes No ___ N/A ___ RMK# ___
- d. Includes a list of all emergency equipment, including fire extinguishing systems, spill control equipment, communications and alarm systems and decontamination equipment? Yes No ___ N/A ___ RMK# ___
- e. Includes the location and a physical description of each item on the list referenced in Question No. 10(d), and a brief outline of its capabilities? Yes No ___ N/A ___ RMK# ___
- f. Includes an evaluation plan for facility personnel describing signals to be used to begin evacuation, evacuation routes, and alternate evacuation routes, in situations where the primary routes could be blocked by releases of hazardous waste? Yes No ___ N/A ___ RMK# ___

REMARKS

IMPLEMENTATION OF CONTINGENCY PLAN

- 11. Since the last inspection has there been a fire, explosion or release of hazardous waste or hazardous waste constituents at the facility which threatened or could have threatened human health and the environment including those situations identified in the facility contingency plan? If so: Yes ___ No N/A ___ RMK# ___
- a. Did the permittee immediately implement the approved contingency plan and follow the emergency procedures described in OAC rule 3745-54-56? [Conditions B.14 and B.20] Yes ___ No ___ N/A RMK# ___

- b. Did the permittee immediately notify Ohio EPA's emergency response team using the 24-hour toll free number (800)282-9378 providing the following information: [OAC rule 3745-54-56(D)(2)]
- i. Name and telephone number of the reporter? Yes ___ No N/A ___ RMK# ___
 - ii. Name and address of the facility? Yes ___ No ___ N/A RMK# ___
 - iii. Time and type of incident? Yes ___ No ___ N/A RMK# ___
 - iv. Name and quantity of materials involved? Yes ___ No ___ N/A RMK# ___
 - v. The extent of injuries? Yes ___ No ___ N/A RMK# ___
 - vi. The possible hazards to human health or the environment outside the facility? Yes ___ No ___ N/A RMK# ___
- c. Did the permittee collect and manage as hazardous waste all liquid or solid material resulting from fire, explosion, released material or emergency response materials until such time as the permittee can demonstrate to Ohio EPA that such waste are not hazardous wastes? [Condition B.16] Yes ___ No ___ N/A RMK# ___
- d. Within 15 days of the incident did the permittee submit to the director a written report of the incident? If so: Yes ___ No ___ N/A RMK# ___
- i. Did the report contain the elements set forth in OAC rule 3745-54-56(J)? [Condition B.23] Yes ___ No ___ N/A RMK# ___
- e. 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 as required by OAC rule 3745-54-56(J)? [Condition B.23] Yes ___ No ___ N/A RMK# ___

INSPECTION ITEMS FROM THE PART B APPLICATION

NOTE: *The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.*

REMARKS

CLOSURE REQUIREMENTS

- 1. Does the permittee maintain the approved closure plan at the facility? [Condition B.29] Yes No ___ N/A ___ RMK# ___

- 2. Is the permittee keeping at the facility and submitting annually to Ohio EPA, the latest closure cost estimate as required by OAC rule 3745-55-42(D) [Condition B.36] Yes No ___ N/A ___ RMK# ___

- 3. Has the permittee amended the closure plan? If so: Yes No ___ N/A ___ RMK# ___
 - a. Has the plan been amended in accordance with OAC rule 3745-55-18(D)? [Condition B.28] 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 OAC rule 3745-50-51.

4. Has the permittee closed a hazardous waste unit or the facility since the last inspection? If so:

Yes ___ No N/A ___ RMK# ___

a. Did the permittee complete closure of the unit or the facility in compliance with 180 days after receiving the final volume of hazardous waste, as required by Condition B.26, Condition B.27, Condition B.30, Condition B.31, Condition B.32, Condition B.33 and Condition B.34 Condition B.31 of the permit? (If such a closure has occurred, enter details on a separate page(s) and attach to the checklist.)

Yes ___ No ___ N/A RMK# ___

REMARKS

POST-CLOSURE MAINTENANCE

1. Has the permittee inspected the components, structures, and equipment at the site in accordance with the inspection schedule in Section I-4 of the permit application on a semi-annual basis? [OAC rule 3745-55-17(A)(1)(b)] [Condition B.35] Yes X No ___ N/A ___ RMK# ___
2. Has the permittee conducted and recorded an inspection of at least the following? [Condition B.35] Yes X No ___ N/A ___ RMK# ___
- a. Security control devices (gates, locks, fences and signs);
 - b. Erosion control;
 - c. Cover settlement, subsidence and displacement;
 - d. Vegetative cover conditions;
 - e. Integrity of run-on/run-off control measures;
 - f. Cover drainage system functioning;
 - g. Monitor well conditions; and
 - h. Benchmark integrity.
3. Is the permittee using the inspection forms found in the approved Part B permit application? [Table I-4 in Section I-4 of the approved permit application] Yes X No ___ N/A ___ RMK# ___
4. Have suitable repairs been made within a reasonable amount of time? [Condition B.35] *If needed.* Yes Y No ___ N/A ___ RMK# ___
5. Have repairs been indicated on the Notification Repair Form? [Condition B.35] Yes ___ No ___ N/A X RMK# ___
6. Was the Notification of Repair Form submitted to Ohio EPA within one week after determining that repairs are necessary? [Condition B.35] Yes ___ No ___ N/A X RMK# ___

INSPECTION ITEMS FROM THE PART B APPLICATION

NOTE: *The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.*

REMARKS

STORAGE OF HAZARDOUS WASTES IN CONTAINERS

NOTE: The requirements of Condition C do not apply to the permittee's activities as a generator accumulating hazardous waste for <90 days per OAC 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.

CONDITION OF CONTAINERS

- 1. Are containers holding hazardous wastes in good condition as required by OAC 3745-55-71? [Condition C.4] Yes ___ No N/A ___ RMK# ___
 If not: *The cover ~~is~~ ^{was} torn.*
 a. Did the permittee transfer the hazardous waste from such a container to one that is in good condition or otherwise manage the waste in a manner that complies with the conditions of the permit? [Condition C.4] Yes No ___ N/A ___ RMK# ___
A new cover was placed on the container.
- 2. 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 OAC rule 3745-55-72? [Condition C.5] Yes No ___ N/A ___ RMK# ___
- 3. Does the permittee keep all containers closed during storage except when it is necessary to add or remove waste as required by OAC rule 3745-55-73? [Condition C.6(a)] Yes ___ No N/A ___ RMK# ___
One tote cover was torn.
- 4. Does the permittee store all containerized hazardous waste on the container storage containment system as described in Condition C.7 of the permit? [Condition C.7] Yes No ___ N/A ___ RMK# ___

INSPECTIONS

NOTE: Inspector may attach a container inspection checklist. If so, the attached document is referenced as Appendix _____.

- 5. Is the permittee inspecting the container area weekly in accordance with OAC rule 3745-55-74 and the approved inspection schedule in Section F of the Part B permit application to detect leaking containers and deterioration of containers and the containment system? [Condition C.9] 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 as required by OAC rule 3745-54-15(D)? Yes No ___ N/A ___ RMK# ___

CONTAINMENT SYSTEM

- 6. Does the permittee maintain the containment system as described in the approved permit application, Section D, including: [Condition C.7]
 - a. Sufficient capacity to hold 10% of the total volume of containers or the volume of the largest container, whichever is greater. Yes No ___ N/A ___ RMK# ___
 - b. A system which is free of gaps and sufficiently impervious to contain leaks and spills? Yes No ___ N/A ___ RMK# ___
- 7. Has the permittee had a spill or leak of wastes? If so:
 - a. Was spilled or leaked waste removed in a timely manner? [Condition C.7(e)] Yes No ___ N/A ___ RMK# ___

NOTE: *This time period is not to exceed 24 hours. [Condition C.7(e)]*

AISLE SPACE

- 8. Is the permittee maintaining adequate aisle space to allow unobstructed movement of personnel and equipment in the event of an emergency as required by OAC rule 3745-54-35 and Condition B.12 of the permit? Yes No ___ N/A ___ RMK# ___

INSPECTION ITEMS FROM THE PART B APPLICATION

NOTE: *The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.*

REMARKS

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)?
 - 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# ___

INSPECTION ITEMS FROM THE PART B APPLICATION

NOTE: *The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.*

REMARKS

CORRECTIVE ACTION

1. Has the permittee submitted the monthly progress report for all corrective action activities (or quarterly when workplan is not being implemented)? [Condition E.5.] Yes No ___ N/A ___ RMK# ___
2. Has the permittee identified any new WMUs or releases at the facility? [Condition E.10]? If so: Yes ___ No N/A ___ RMK# ___
- a. Did the permittee follow the steps indicated in Conditions E.10(a) and (b) and E.11? Yes ___ No ___ N/A RMK# ___

INSPECTION ITEMS FROM THE PART B APPLICATION

NOTE: *The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.*

REMARKS

Tank storage, Treatment and Management

1. Is secondary containment, in the form of an external liner, being provided for all permitted hazardous waste tanks? [3745-66-93(A)(1) to (A)(5)] Yes No ___ N/A ___ RMK# ___
2. Has the permittee operated the secondary containment systems in accordance with the design plans and descriptions in Sections D and F of the application? [Condition D.3] Yes No ___ N/A ___ RMK# ___
3. Is the liner in the tank secondary containment compatible with the wastes stored? Yes No ___ N/A ___ RMK# ___
4. Is the liner free of cracks and gaps? Yes No ___ N/A ___ RMK# ___
5. Are chemically resistant water stops in place at all joints of the liner? Yes No ___ N/A ___ RMK# ___
6. Is the liner provided with a leak detection system designed/operated to detect failure to primary or secondary containment or any release of hazardous waste within 24 hours or at earliest practicable time? Yes No ___ N/A ___ RMK# VISUAL INSPECTION
7. Is any liquid which accumulates in the containment unit resulting from spills, leaks or precipitation removed within 24 hours or in a timely manner? Yes No ___ N/A ___ RMK# ___
8. Is ancillary equipment to the tank systems provided with secondary containment (such as double-walled piping, jacketing or a trench)? Yes No ___ N/A ___ RMK# ___
If not, is the ancillary equipment:
 Inspected daily? **AND**;
 Is ancillary equipment one of the following:
 Above ground piping (exclusive of flanges, joints, valves and connections)? [e.g., piping from process dock to Tankfarms 1, 2 & 3.] Yes No ___ N/A ___ RMK# ___
 Welded flanges, welded joints and/or welded connections? Yes No ___ N/A ___ RMK# ___
9. Has the permittee stored or treated wastes in tanks consistent with the restrictions and prohibitions in Table C1-1 of Section C of the application? [Condition D.1(c)] Yes No ___ N/A ___ RMK# ___
10. Does the permittee prevent placement of hazardous waste or treatment reagents in tanks or secondary containment if such placement can cause the system to leak, rupture, corrode, or otherwise fail? [3745-66-94(A)] Yes No ___ N/A ___ RMK# ___
11. Does the permittee use appropriate controls to prevent spills or overflows from the system (e.g., check valves, dry Yes No ___ N/A ___ RMK# ___

disconnect couplings, high level alarms, etc.)? [3745-66-94(B)]

- 12. Has the permittee conducted and documented inspections of the tank systems in accordance with the inspection schedules in Section F of the application? [Condition D.5] Yes No ___ N/A ___ RMK# ___
- 13. Has the permittee documented these inspections in the operating record, including inspection of the following:
 - a. Spill control equipment (daily)? Yes No ___ N/A ___ RMK# ___
 - b. Above ground portion of tank (daily)? Yes No ___ N/A ___ RMK# ___
 - c. Data from leak detection equipment (daily)? Yes No ___ N/A ___ RMK# ___
 - d. Construction materials and area immediately surrounding the tanks for signs of erosion or release of hazardous waste (daily)? Yes No ___ N/A ___ RMK# ___
- 14. Has the permittee monitored and tested the tank systems in accordance with the Tank Corrosion Monitoring Plan? [Condition D.5(e)] Yes No ___ N/A ___ RMK# ___
- 15. Does any tank have a wall thickness that is less than the minimum design wall thickness? If so, has it been removed from service? [Condition D.5(f)] Yes ___ No N/A RMK# ___
Yes ___ No ___ N/A RMK# ___
- 16. Has the permittee had any leaks, spills or releases from the tank systems?
If so, has the permittee responded to the leaks, spills or releases in accordance with Condition D.6?
*1) ONE VALVE ON MST WAS LEAKING AT THE CONNECTION...
2) BLACK SPOT TANK #ARM #3 ?* Yes No ___ N/A ___ RMK# ___
- 17. Were all releases from the tank system to the environment (other than those into secondary containment) reported to Ohio EPA within 24 hours of detection? Yes ___ No N/A RMK# ___
- 18. Was a written report submitted within 30 days of detecting the release that addressed the elements in Condition D.7(b) Yes ___ No ___ N/A RMK# ___
- 19. If major repairs to a tank system were required, was a certification submitted to Ohio EPA within 7 days of returning the tank system to use? [Condition D.7(c)] Yes ___ No ___ N/A RMK# ___
- 20. If the Permittee was unable to repair and return the tank to service, was the tank system closed in accordance with 3745-66-97? [Condition D.6(b)] Yes ___ No ___ N/A RMK# ___
- 21. Does the permittee have on file at the facility written statements by those persons required to certify the design Yes No ___ N/A ___ RMK# ___

and installation of the tank system? [Condition D.7(d)]

22. Is the permittee following the special provisions for ignitable and reactive wastes specified in Condition D.9? Yes No ___ N/A ___ RMK# ___
23. For tanks used to treat or store ignitable or reactive wastes, is the waste stored or treated to protect it from materials or conditions which may cause ignition or reaction? Yes No ___ N/A ___ RMK# ___
24. Is the permittee following the special provisions for incompatible wastes specified in Condition D.10? Yes No ___ N/A ___ RMK# ___
25. Has the Permittee placed incompatible wastes or materials into the same tank system, or into a tank system that has not been decontaminated and which previously held an incompatible waste or material?
a. **If so**, have the requirements of 3745-65-17(B) been met? Yes ___ No N/A ___ RMK# ___
26. In addition to conducting the waste analysis required by 3745-65-13, when the tank system is used to store or treat a waste which is substantially different or uses a substantially different process than previously used, has the Permittee done one of the following: [3745-66-991
a. Conducted waste analysis and trial treatment or storage tests? [3745-66-991(A)]; OR
b. Obtained written documentation on similar waste under similar operating conditions to show that the proposed storage/treatment will meet the requirements of OAC 3745-66-94? [3745-66-991(B)]
Yes No ___ N/A ___ RMK# ___
Yes No ___ N/A ___ RMK# ___

Miscellaneous Unit

1. Is only scrubber water and scrubber water sludges from blow-down operations of the closed loop scrubber water system treated in the filter press? [Condition F.3] Yes No ___ N/A ___ RMK# ___

2. Is a written statement by a qualified, registered professional engineer that attests that the filter press system was properly designed and installed kept on file at the facility? [Condition F.4] Yes No ___ N/A ___ RMK# ___

General Operating Requirements

3. (a) Were any hazardous wastes or treatment reagents placed in the filter press system that could cause the filter press, its ancillary equipment, or the secondary containment system to rupture, leak, corrode or otherwise fail?. [Condition F.6(a)] Yes ___ No N/A ___ RMK# ___

(b) Does the Permittee use appropriate controls and practices to prevent spills or overflows from the filter press or containment system? [Condition F.6(b)] Yes No ___ N/A ___ RMK# ___

(c) Was the filter press operated in accordance with the procedures and practices in Section D of the Part B permit application, manufacturer's instructions and accepted industry practice. [Condition F.6(c)] Yes No ___ N/A ___ RMK# ___

(d) Was the filter press maintained in accordance with manufacturer's recommendations and accepted industry practices? [Condition F.6(d)] Yes No ___ N/A ___ RMK# ___

4. Has there been a leak or spill from the filter press system? If so, Yes ___ No N/A ___ RMK# ___

5. Did the Permittee comply with the requirements of OAC Rule 3745-55-96 if a leak or spill occurs in the filter press system? [Condition F.6(e)] Yes ___ No ___ N/A RMK# ___

6. Did the Permittee comply with the requirements of condition F.8? Yes ___ No ___ N/A RMK# ___

7. Has the Permittee inspected the filter press system daily in accordance with Pages 21 and 22 of 45 of Appendix F-2 of Section F of the permit application? Yes No ___ N/A ___ RMK# ___

[Condition F.7]

8. Has the permittee ensured that no ignitable or incompatible wastes were placed in the filter press system? [Condition F.9]

Yes No N/A RMK#

INSPECTION ITEMS FROM THE PART B APPLICATION

REMARKS

INCINERATION SECTION INSPECTION ITEMS ARE ON ATTACHED PAGES

KAG. 10/15/05
w/ JEFF L.

**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)] LDRs APPLY | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| 2. | Did the generator determine if the HW/soil must be treated to meet the LDR treatment standard prior to disposal? Generator knowledge or testing may be used. [3745-270-07(A)(1)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |

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).

- | | | |
|----|--|--|
| 3. | Does the generator have documentation of how he determined whether the HW/soil meets or does not meet the LDR treatment standard in 2, above? [3745-270-07(A)(6)(a) or 3745-270-07(A)(6)(b)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| 4. | Does the generator keep the documentation required in #2, above, on-site for at least three years from the last date the HW/soil was sent on-site/off-site for treatment/disposal? [3745-270-07(A)(8)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| 5. | Does the generator generate a listed HW that exhibits a characteristic? If yes, | Yes <input 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 checked="" type="checkbox"/> N/A <input type="checkbox"/> |
|----|--|--|

NOTE If "Yes" see question #16.

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

NOTIFICATION FORM

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

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

e.	Designation of the waste subcategory when applicable? [3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
----	--	--

NOTE: Subcategories are found on the LDR treatment standards table under the applicable waste code. Not all HWs have subcategories

f.	A listing of the underlying hazardous constituents for which a characteristic waste must be treated? [3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
----	--	--

NOTE: Not required if the waste is high TOC D001 or the TSD tests its treatment residues for all underlying hazardous constituents.

g.	If the HW is F001-F005 or F039, did the generator note on the LDR form what solvents or constituents, respectively, the waste contains and must be treated for?[3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
----	--	--

NOTE: Not required if the TSD tests its treatment residues for all underlying hazardous constituents.

PROHIBITED DILUTION

12.	Is the HW treated by burning? If "No" go to #15.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
13.	Is the HW a metal-bearing HW?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

NOTE: Generally, metal-bearing HWs contain heavy metals above TCLP levels or were listed due to the presence of metals. A list of the restricted metal-bearing HWs are given in the Appendix to 3745-270-03.

14.	a.	Metal-bearing HWs cannot be incinerated, combusted or, blended and burned for fuel unless one of the following conditions apply. [3745-270-03(c)]	
	i.	Contains > 1% TOC?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	ii.	Contains organic constituents or cyanide at levels greater than the UST levels?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	iii.	Is made up of combustible material e.g., paper, wood, plastic?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	iv.	Has a reasonable heating value (e.g., > 5000 Btu)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	v.	Co-generated with a HW that must be combusted?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b.	If all responses to 14 a.i. through 14 a.v. are "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 checked="" type="checkbox"/> N/A <input type="checkbox"/>
15.		Was the HW treated by wastewater treatment?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	a.	Is a LDR treatment method, other than DEACT or a numerical value, specified for the waste? [3745-270-03(B) and 3745-270-40(A)(3)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

NOTE: If Yes, HW is improperly being treated by dilution.

	b.	Does the waste carry the D001 code and contain ≥10% TOC?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	c.	Does the wastewater treatment process include a process to separate/recover the organic phase of the waste?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

NOTE: If the answers to b & c are "yes" and "no", 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 <u>to meet</u> 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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	b.	If the treated HW/soil is listed.....notification contains the following certification statement: " 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"/>

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"/>
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 waste is treated to meet LDRs, use LDR checklist.

10.	Does the generator export hazardous waste? If so:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
a.	Has the generator notified U.S. EPA of export activity? [3745-52-53(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
b.	Has the generator complied with special manifest requirements? [3745-52-54]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
c.	For manifests that have not been returned to the generator: has an exception report been filed? [3745-52-55]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
d.	Has an annual report been submitted to U.S. EPA? [3745-52-56]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
e.	Are export related documents being maintained on-site? [3745-52-57(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

MANIFEST REQUIREMENTS

11.	Have all hazardous wastes shipped off-site been accompanied by a manifest? (U.S. EPA Form 8700-22) [3745-52-20(A)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> J.P.
12.	Have items (1) through (20) of each manifest been completed? [3745-52-20(A)(1)]&[3745-52-27(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)(1)]

13.	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"/>
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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)]

14.	If the transporter was unable to deliver a shipment of hazardous waste to the	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> J.P.
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If it happens

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	designated facility did the generator designate an alternate TSD facility or give the transporter instructions to return the waste? [3745-52-20(D)]	
15.	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"/>
16.	If the generator received a rejected load or residue and accumulated the waste on-site, did the generator sign item 18c or 20 of the manifest? [3745-52-34(M)]	Yes <input 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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input 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 (Addressed in TSD Checklist)

CONTINGENCY PLAN (Addressed in TSD Checklist)

PREPAREDNESS AND PREVENTION (Addressed in TSD Checklist)

SATELLITE ACCUMULATION AREA REQUIREMENTS

20.	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"/>
21.	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

22.	Has the generator marked containers with the words "Hazardous Waste?"	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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[3745-52-34(A)(3)]		
23.	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"/>
24.	Are hazardous wastes stored in containers which are:	
a.	Closed (except when adding/removing wastes)? [3745-66-73(A)] <i>Photo covering one tote was taken</i>	Yes <input type="checkbox"/> No <input checked="" 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.

25.	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"/>
26.	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"/>
27.	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"/>
28.	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)] <i>If done.</i>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
29.	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)] <i>Yes, done.</i>	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.

30.	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"/>
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NOTE: Please provide a description of the unit and documentation provided by the generator for the file to demonstrate that closure was completed in accordance with the closure performance standards. If the generator has closed a <90 day tank, closure must also be completed in accordance with OAC 3745-66-97 (except for paragraph C of this rule). [3745-52-34]

PRE-TRANSPORT REQUIREMENTS		
31.	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"/>
32.	Does each container ≤119 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"/>
33.	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"/>

LARGE QUANTITY UNIVERSAL WASTE HANDLER REQUIREMENTS

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

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

GENERAL REQUIREMENTS

1. Has the LQUWH obtained a U.S. EPA Identification number before exceeding 5,000 kg limit? [3745-273-32(A)(1)] Yes No N/A

PROHIBITIONS

2. Did the LQUWH dispose of universal waste? [3745-273-31(A)] Yes No N/A

3. Did the LQUWH dilute or treat universal waste, except when responding to releases as provided in OAC rule 3745-273-37 or managing specific wastes as provided in OAC rule 3745-273-33? [3745-273-31(B)] Yes No N/A

WASTE MANAGEMENT AND LABELING/MARKING

UNIVERSAL WASTE BATTERIES

4. Are batteries that show evidence of leakage, spillage or damage that could cause leaks contained? [3745-273-33(A)(1)] *It so, none reported.* Yes No N/A

5. If the batteries are contained, are the containers closed, structurally sound, compatible with the contents of the battery and lack evidence of leakage, spillage or damage that could cause leakage? [3745-273-33(A)(1)] Yes No N/A *B*

6. Are the casings of the batteries breached, not intact, or open (except to remove the electrolyte)? [3745-273-33(A)] Yes No N/A

7. If the electrolyte is removed or other wastes generated, has it been determined whether the electrolyte or other wastes exhibit a characteristic of a hazardous waste? [3745-273-33(A)(3)] *It to happen* Yes No N/A

a. If the electrolyte or other waste is characteristic, is it managed in compliance with OAC Chapters 3745-50 through 3745-69? [3745-273-33(A)(3)] Yes No N/A

b. If the electrolyte or other waste is not hazardous, is it managed in compliance with applicable law? [3745-273-33(A)(3)(b)] Yes No N/A

8. Are the batteries or containers of batteries labeled with the words "Universal Waste - Batteries" or "Waste Battery(ies)" or "Used Battery(ies)"? [3745-273-34(A)] Yes No N/A

UNIVERSAL WASTE PESTICIDES

9. Does the LQUWH prevent releases to the environment by managing pesticides in containers that are closed, structurally sound, compatible with the pesticides, and lack evidence of leakage, spillage, or damage? [3745-273-33(B)(1)] Yes No N/A *not yet They plan to do.*

10. If the original pesticide container is in poor condition, was it over-packed into an acceptable container? [3745-273-33(B)(2)] Yes No N/A

11. If the pesticide is stored in a tank, are the requirements of rules 3745-66-90 through 3745-66-101, except for paragraph (C) of 3745-66-97, of the OAC met? [3745-273-33(B)(3)] Yes No N/A

12. If pesticides are stored in a transport vehicle, is it closed, structurally sound, compatible with the pesticide(s), and does it lack evidence of leakage, spillage, or damage that could cause leakage? [3745-273-33(B)(4)] Yes No N/A

13. Are recalled universal waste pesticides that are in containers, tanks, or transport vehicles labeled with the label that was on or accompanied the product as sold or distributed and labeled with the words "Universal Waste Pesticides" or "Waste Pesticides"? [3745-273-34(B)(1)&(2)] Yes No N/A

14. Are unused pesticide products that are in containers, tanks, or transport vehicles labeled with either the label that was on the product when purchased (if still legible), the appropriate DOT label, or the designated label prescribed by the pesticide collection program and labeled with the words "Universal Waste Pesticides" or "Waste Pesticides"? [3745-273-34(C)(1)&(2)] Yes No N/A

UNIVERSAL WASTE THERMOSTATS		
15.	Have thermostats that show evidence of leakage, spillage or damage that could cause leaks been contained in a container that is closed, structurally sound, compatible with contents of the thermostats and lacks evidence of leakage, spillage or damage that could cause leakage? [3745-273-33(C)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
16.	If the mercury-containing ampules are removed, does the LQUWH: [3745-273-33(C)(2)] <i>They are not removed!</i>	
a.	Remove the ampules in a manner to prevent breakage and is the removal done over or in a containment device? [3745-273-33(C)(2)(a)&(b)] <i>It is</i>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
b.	Have a clean-up system readily available to transfer spilled mercury to another container that meets the requirements of OAC rule 3745-52-34 and is the spilled mercury transferred immediately? [3745-273-33(C)(2)(c)&(d)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
c.	Ensure that the area where ampules are removed is well ventilated and monitored in compliance with applicable OSHA exposure levels for mercury? [3745-273-33(C)(2)(e)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
d.	Ensure that employees are thoroughly familiar with proper waste handling and emergency procedures? [3745-273-33(C)(2)(f)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
e.	Ensure removed ampules are stored in closed, non-leaking containers that are in good condition? [3745-273-33(C)(2)(g)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
f.	Pack removed ampules in containers with packing material to prevent breakage during storage, handling and transportation? [3745-273-33(C)(2)(h)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
17.	When removing mercury containing ampules from thermostats if there are mercury or clean-up residues resulting from spills or leaks, and/or other waste generated (e.g., remaining thermostat units), has it been determined whether those exhibit a characteristic of hazardous waste identified in OAC rules 3745-51-20 to 3745-51-24? [3745-273-33(C)(3)(a)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
a.	If the residues, and/or wastes are characteristic, are they managed in compliance with Chapters 3745-50 through 3745-69, 3745-205, 3745-256, 3745-266, and 3745-270 of the Administrative Code? (The handler is considered the generator of the mercury, residues, and/or other waste and is subject to OAC Chapter 3745-52) [3745-273-33(C)(3)(b)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
18.	Are the thermostats or containers of thermostats labeled either "Universal Waste-Mercury Thermostat(s)" or "Waste Mercury Thermostat(s)" or "Used Mercury Thermostat(s)"? [3745-273-34(D)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
UNIVERSAL WASTE LAMPS		
19.	Does the LQUHW contain lamps in containers or packages that are structurally sound, adequate to prevent breakage, and 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? [3745-273-33(D)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
20.	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 releases of mercury or hazardous constituents to the environment? [3745-273-33(D)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> <i>If it happens</i>
<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 rule 3745-52-34). Crushed lamps must be transported by a registered hazardous waste transporter to a permitted hazardous waste facility using a hazardous waste manifest.</p>		

21.	Are the lamps or containers or packages of lamps labeled with the words "Universal Waste - Lamp(s)" or "Waste Lamp(s)" or "Used Lamps?" [3745-273-34(E)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
ACCUMULATION TIME		
22.	Is the waste accumulated for less than one year? [3745-273-35(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	a. If not, is the waste accumulated over one year in order to facilitate proper recovery, treatment or disposal? (Burden of proof is on the handler to demonstrate.) [3745-273-35(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<i>NOTE: Accumulation is defined as date generated or date received from another handler.</i>		
23.	Is the handler able to demonstrate the length of time the universal waste has been accumulated? [3745-273-35(C)] If yes, describe below:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
EMPLOYEE TRAINING		
24.	Are employees thoroughly familiar with universal waste handling/emergency procedures, relative to their responsibilities? [3745-273-36]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
RESPONSE TO RELEASES		
25.	Are releases of universal waste and other residues immediately contained? [3745-273-37(A)] <i>If to happen.</i>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
26.	Is the material released characterized? [3745-273-37(B)] <i>has not happened</i>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
27.	If the material released is a hazardous waste, was 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 OAC Chapter 3745-52) [3745-273-37(C)] <i>If happened</i>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
OFF-SITE SHIPMENTS		
<i>NOTE: If a LQUWH self-transportes wastes, then the handler must comply with the Universal Waste transporter requirements.</i>		
28.	Are universal wastes sent to either another handler, destination facility or foreign destination? [3745-273-38(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
29.	Is the handler aware of DOT requirements for packaging and shipping? If not, make aware of 40 CFR 171-180.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
30.	Prior to shipping universal waste off-site, does the originating handler ensure that the receiver agrees to receive the shipment? [3745-273-38(D)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
31.	Has the originating handler ever had an off-site shipment rejected by another handler or destination facility?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	a. If yes, did the originating handler receive the waste back or agree to where shipment was sent? [3745-273-38(E)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
32.	If a handler rejects a partial or full load from another handler, does the receiving handler contact the originating handler to discuss and do <u>one of the following</u> :	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	a. Send the waste back to the originating handler or send the shipment to a destination facility (If both the originating and receiving handler agree)? [3745-273-38(F)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

33.	If the handler received a shipment of hazardous waste that was not a universal waste, did the LQUWH immediately notify Ohio EPA? [3745-273-38(G)] <i>Have not, but would if happened.</i>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
TRACKING UNIVERSAL WASTE SHIPMENTS		
34.	Are universal wastes received from another handler? If so:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	a. Is a record (log, invoice, manifest, bill of lading, or other shipping document) of each shipment kept? [3745-273-39(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
35.	Does the record include the following:	
	a. Name and address of the originating handler or foreign shipper? [3745-273-39(A)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b. Quantity of each type of universal waste? [3745-273-39(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c. Date received? [3745-273-39(A)(3)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
36.	Is universal waste shipped to another handler? If so:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	a. Is a record of each shipment kept? [3745-273-39(B)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
37.	Does the record include the following?	
	a. Name and address of universal waste handler, destination facility, or foreign destination? [3745-273-39(B)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b. Quantity of each type of universal waste? [3745-273-39(B)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c. Date shipped? [3745-273-39(B)(3)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
38.	Are records kept for three years? [3745-273-39(C)(1)&(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
EXPORTS		
39.	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 large quantity handler comply with primary exporter requirements in OAC rules 3745-52-53, 3745-52-56 and 3745-52-57? [3745-273-40(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b. Is waste exported only upon consent of the receiving country and in conformance with the U.S. EPA "Acknowledgment of Consent" as defined in OAC rules 3745-52-50 to 3745-52-57? [3745-273-40(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c. Is a copy of the U.S. EPA "Acknowledgment of Consent" provided to the transporter? [3745-273-40(C)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

**USED OIL INSPECTION CHECKLIST
GENERATORS, COLLECTION CENTERS AND AGGREGATION POINTS**

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 generator 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, used oil contaminated scrap metal stored in a pile.

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

GENERATOR STANDARDS

4.	Does the generator mix hazardous waste with used oil? If so,	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
a.	Is the mixture managed as specified in 3745-279-10(B)? [3745-279-21(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

NOTE: Used Oil mixed with listed (3745-51-30 to 3745-51-35) or characteristic (3745-51-20 to 3745-51-24) hazardous waste are subject to regulation as a hazardous waste, unless the listed hazardous waste is listed solely because it exhibits a hazardous characteristic, and the resultant mixtures do not exhibit a characteristic. Mixtures of used oil and CESQG hazardous waste are subject to OAC Chapter 3745-279.

5.	Does the generator of a used oil containing greater than 1,000 ppm total halogens manage the used oil as a hazardous waste unless the presumption is rebutted successfully? [3745-279-21(B)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/>
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NOTE: If used oil contains greater than 1000 ppm total halogens, it is presumed to be listed hazardous waste until the presumption is successfully rebutted.

6.	Does the generator store used oil in tanks; or containers; or a unit(s) subject to regulation as a hazardous waste management unit? [3745-279-22(A)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/>
7.	Are containers and aboveground tanks used to store used oil in good condition with no visible leaks? [3745-279-22(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
8.	Are containers, above ground tanks, and fill pipes used for underground tanks clearly labeled or marked "Used Oil?" [3745-279-22(C)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
9.	Has the generator, upon detection of a release of used oil, done the following: [3745-279-22(D)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
a.	Stopped the release?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
b.	Contained the release?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
c.	Cleaned up and properly managed the used oil and other materials?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
d.	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"/>

ON-SITE BURNING IN SPACE HEATER

10.	Does the generator burn used oil in used-oil fired space heaters? [3745-279-23] If so:	
a.	Does the heater burn only used oil that owner/operator generates or used oil received from household do-it-yourself (DIY) used oil generators?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/>

[Facility Name/Inspection Date]
[ID Number]

HAVE NOTIFIED
IS ON RCRA
NOTIFICATION
STILL IN
PROCESS.

b.	Is the heater designed to have a maximum capacity of not more than 0.5 million BTU per hour?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
c.	Are the combustion gases from heater vented to the ambient air?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

NOTE: Ash accumulated in a space heater must be managed in accordance with 3745-279-10(E).

GENERATOR TRANSPORTATION

11.	Does the generator have the used oil hauled only by transporters that have obtained a U.S. EPA ID#?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/>
12.	If the generator self-transport used oil to an approved collection site or to an aggregation point owned by the generator: [3745-279-24]	
a.	Does the generator transport used oil in a vehicle owned by the generator or an employee of the generator?[3745-279-24]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
b.	Does the generator transport more than 55 gallons of used oil at any time?[3745-279-24]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

NOTE: Used oil generators may arrange for used oil to be transported by a transporter without a U.S. EPA ID # if the used oil is reclaimed under a contractual agreement (i.e., tolling arrangement).

COLLECTION CENTERS AND AGGREGATION POINTS

13.	Is the DIY used oil collection center in compliance with the generator standards in 3745-279-20 to 3745-279-24? [3745-279-30]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
14.	Is the non-DIY used oil collection center registered with Ohio EPA? [3745-279-31]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
15.	Is the used oil aggregation point in compliance with the generator standards in 3745-279-20 to 3745-279-24? [3745-279-32]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

NOTE: Complete Used Oil Generator and any other applicable used oil handler checklist (e.g., marketer, burner, etc.) for used oil collection centers and aggregation points.

HAVE A HOUSEHOLD HW COLLECTION TWICE A YEAR
 WHERE HOUSEHOLD HW INCLUDING USED OIL
 IS COLLECTED.

KAC OCT. 15, 2009
 w/ JEFF LENCHAK.

**USED OIL INSPECTION CHECKLIST
BURNERS OF OFF-SPEC USED OIL**

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 burner manage used oil in a surface impoundment or waste pile? If yes:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input checked="" 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 checked="" 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.	Is off-spec used oil fuel burned for energy recovery in industrial furnaces identified in 3745-50-10, or boilers as defined in 3745-50-10 and identified in 3745-279-61(A)(2), or hazardous waste incinerators? [3745-279-61(A)]	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input checked="" type="checkbox"/>
5.	Does the used oil burner process used oil? [3745-279-61(B)]	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input checked="" type="checkbox"/>
	If so, have they complied with the requirements for processors in 3745-279-50 to 3745-279-59? [3745-279-61(B)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

6.	Has the used oil burner notified Ohio EPA or U.S. EPA and obtained a U.S. EPA ID#? [3745-279-62(A)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
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SEE NOTE

7.	Does the used oil burner determine whether the total halogen content of the used oil being managed at the facility is above or below 1000 ppm? [3745-279-63(A)] If yes, then;	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
a.	How did the burner determine halogen level content:			
i.	Testing (approved SW-846 method)? or	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
ii.	Applying knowledge of the halogen content of the used oil in light of the materials or processes used? or	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
iii.	Information provided by the processor/re-refiner?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

NOTE: If determination was not made by one of the three methods, then determination is not valid.

b.	If halogens are equal to/above 1000 ppm, did the burner successfully rebut the presumption the used oil was mixed with a listed hazardous waste?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
	If yes, what method did burner use to rebut the presumption (e.g, testing, exclusion, generator process information, etc.) (describe below)			
	If no, did the burner 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"/>

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.

8.	Does the used oil burner retain records of all analyses conducted or information used to comply with 3745-279-63 for at least three years? [3745-279-63(D)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
9.	Does the used oil burner:			
a.	Store used oil in tanks, containers; or a unit(s) subject to regulation as a hazardous waste management unit? [3745-279-64(A)]	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input checked="" type="checkbox"/>

[Facility Name/Inspection Date]

[ID Number]

b.	Stored used oil in containers and aboveground tanks that are in good condition, with no visible leaks? [3745-279-64(B)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/>
c.	Provided secondary containment for containers as required by 3745-279-64(C)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
d.	Provided secondary containment for existing aboveground tanks as required by 3745-279-64(D)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
e.	Provided secondary containment for new aboveground tanks as required by 3745-279-64(E)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
f.	Labeled all containers, aboveground tanks and fill pipes used for underground tanks with the words "Used Oil"? [3745-279-64(F)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
g.	Upon detection of a release of used oil, done the following in accordance with 3745-279-64(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"/>
10.	Does the used oil burner keep a record of each used oil shipment accepted for burning? [3745-279-65(A)]	
a.	Does each record include the name and address of the transporter who delivers the used oil to the burner? [3745-279-65(A)(1)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
b.	Does each record include the name and address of the generator or processor/re-refiner who sent the used oil to the burner? [3745-279-65(A)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
c.	Does each record include the U.S. EPA ID# of the transporter that delivers the used oil to the burner? [3745-279-65(A)(3)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
d.	Does each record include the U.S. EPA ID# (if applicable) of the generator or processor/re-refiner who sent the used oil to the burner? [3745-279-65(A)(4)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
e.	Does each record include the quantity of the used oil accepted? [3745-279-65(A)(5)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
f.	Does each record include the date of acceptance? [3745-279-65(A)(6)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
11.	Does the used oil burner generate residues from the storage or burning of used oil? [3745-279-67]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
a.	If yes, does burner manage residues in accordance with OAC rule 3745-279-10(E)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

HAVE REGISTERED TO RECEIVE OFF-SPEC USED OIL BUT DO NOT TAKE IN ANY USED OIL AS OFF-SPEC. WHAT COMES IN IN IS MANAGED AS A HW OR NON-HW.

KJC 10/15/09
W/3 EFF L.

TSD LDR CHECKLIST

TREATING FACILITIES WHICH TREAT WASTE TO MEET LDR STANDARDS

1. Does the treating facility test waste according to their waste analysis plan as required in 3745-54-13 or 3745-65-13? [3745-270-07(B)] Yes No N/A

2. Has a one-time notification been sent with the initial shipment of waste or contaminated soil to the land disposal facility? [3745 27 007(B)(3)] Yes No N/A

NOTE: No further notification is necessary until such time that the waste changes or the receiving facility changes.

3. Does the one-time notification and certification contain the information listed in Table 2 of 3745-270-07? [3745-270-07(B)(3)] Yes No N/A *Missing complete manifest # + incomplete waste codes*

4. Are wastes or treatment residues being sent to another TSD to be further managed? If so: Yes No N/A

a. Has the facility complied with the generator notification/certification requirements? [Table 1, 3745-270-07(B)(5)]

5. Are recyclable materials used in a manner constituting disposal and subsequently subject to 3745-266-20? If so: Yes No N/A

a. Has the treatment facility (recycler) sent to the director a notice (with information listed in 3745-270-07(B)(3) excluding the manifest number), with each shipment of waste? [3745-270-07(B)(6)]

Yes No N/A

b. Has the treatment facility (recycler) sent to the director a certification (as described in 3745-270-07(B)(4)), with each shipment of waste? [3745-270-07(B)(6)]

Yes No N/A

6. Does the recycling facility maintain records of the name and location of each entity receiving the hazardous waste-derived products? [3745-270-07(B)(6)] Yes No N/A

7. Does the owner or operator of any land disposal facility disposing of waste subject to regulation under 3745-270 have:

a. Copies of all notices and certifications required in 3745-270?

Yes No N/A

b. Test results indicating all waste, extracts of waste or treatment residue are in compliance with 3745-270-40 to 3745-270-49?

Yes No N/A

c. The testing frequency specified in the facility's WAP and have they followed the protocol?

Yes No N/A

HAZARDOUS DEBRIS

8. Does the material in question meet the definition of hazardous debris as defined in rule 3745-270-02(A)(3)? Yes No N/A

9. Is the hazardous debris being treated to the waste specific treatment standard in 3745-270-40 to 3745-270-49? Yes No N/A

10. Is the hazardous debris being treated by the alternative treatment standards in 3745-270-45? If so: Yes No N/A

a. Has the debris or mixtures of debris been treated for each contaminant subject to treatment (toxicity, listed waste and cyanide reactive debris) using one or more of the treatment technologies found in Table 1 in 3745-270-45? [3745-270-45(A)]

Yes No N/A

NOTE: If immobilization has been used in a treatment train, it must be the last treatment technology used.

11. Was the hazardous debris a listed waste treated by an immobilization technology in Table 1? [3745-270-45(A)(1)] If so: Yes No N/A

a. Was immobilization the last treatment technology used? [3745-270-45(A)(3)]

Yes No N/A

12. Is the waste a PCB waste under 40 CFR Part 761? If so: Yes No N/A

a. Has the waste been treated to the most stringent standard in 40 CFR 761 or 3745-270-45? [3745-270-45(A)(5)]

Yes No N/A

13. Has the residue from the treatment of hazardous debris been disposed of in Yes No N/A

	accordance with 3745-270-40 to 3745-270-49? [3745-270-45(D)]						
14.	Does the owner/operator of a treatment facility that claims the debris is excluded from regulation as a hazardous waste under 3745-51-03(F)(1) maintain the following information?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
	a. Records of all inspections, evaluations, and analyses of treated debris? [3745-270-07(D)(3)(a)]	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	b. Records of key operating parameters of the treatment unit? [3745-270-07(D)(3)(b)]	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	c. A certification statement for each shipment of treated debris? (See 270-07(D)(3)(c) for exact wording) [3745-270-07(D)(3)(c)]	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
15.	Does the notification of an owner/operator who first claims the debris is excluded under 3745-51-03(F)(1) have the following information: [3745-270-07(D)(3)]	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
	a. Name and address of licensed solid waste landfill receiving the treated debris? [3745-270-07(D)(1)(a)]	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	b. Description of hazardous debris as initially generated with applicable waste codes? [3745-270-07(D)(1)(b)]	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	c. Technology used from Table 1? [3745-270-07(D)(1)(c)]	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
16.	Has the above notification been sent to the director? [3745-270-07(D)(1)]	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>

<u>CEI Checklist for Incineration Module of Ross Incineration Services Ohio RCRA Permit</u>		
1.	Has the Permittee limited hazardous wastes incinerated to those meeting the following criteria: [Condition I(A).2]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <input type="checkbox"/>
2.	Did all organic hazardous constituents listed in the Appendix to OAC Rule 3745-51-11 and that were present in the waste have a thermal stability Class ranking equal to or less than Class 1? [Condition I(A).2(a)(i)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <input type="checkbox"/>
3.	Are all Ohio EPA hazardous waste code numbers carried by incinerated wastes listed in Part A of the permit application under the process code of T03? [Condition I(A).2(a)(ii)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> RMK# <input type="checkbox"/>
4.	Did the permittee ensure that incineration was not inconsistent with the restrictions and prohibitions in Table C1-1 of Section C of the permit application? [Condition I(A).2(a)(iii)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <input type="checkbox"/>
	Was the point of injection or feed point for all hazardous waste streams fed into the incinerator consistent with Table C1-1? [Condition I(A).2(d)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <input type="checkbox"/>
5.	Did permittee ensure that maximum concentration and annual volume limitations in Table XIV of Part A of the permit application were not exceeded? [Condition I(A).2(a)(iv)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> RMK# <input type="checkbox"/> <i>NO LONGER IN PERMIT</i>
6.	Was the ash content of waste fed to the incinerator less than or equal to: - 40% for liquid feed? - 100% for solid feed? or, - the limits in Table D5-6 of Section D of the permit application? [Condition I(A).2(a)(vi)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <input type="checkbox"/>
7.	Was the system total halogen daily average in waste feed not in excess of 2,000 lb./hr? [Condition I(A).2(a)(vii)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <input type="checkbox"/>
8.	Was the heating value of waste fed to the incinerator within the range of heating value limitations in Table D5-6 of Section D of the permit application? [Condition I(A).2(a)(viii)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <input type="checkbox"/>
9.	Was the viscosity of waste fed to the incinerator burners within the limits in Table D5-6 of Section D	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <input type="checkbox"/>

	of the Part B permit application? [Condition I(A).2(a)(ix)]	
10.	Did the Permittee conduct analyses of the incinerator waste feeds at least monthly in accordance with Section C-1e of the application? And, Were the results of these analyses within the physical and chemical limits in Table D5-6 of Section D of the permit application? [Condition I(A).2(b)] Are records of this activity kept at the facility?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A ___ RMK# ___ Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A ___ RMK# ___ Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A ___ RMK# ___
11.	Did all auxiliary fuel or bypass waste fuel used meet the conditions and criteria identified in Section D-5c (1)(f)(ii) of the permit application? [Condition I(A).2(c)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A ___ RMK# ___
12.	Were all waste streams fed to the incinerator within the characteristics in Table D5-6 of Section D of the permit application? [Condition I(A).2(e)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A ___ RMK# ___
13.	Were only waste feed systems specified in Section D-5 of the Part B permit application used to feed wastes to the incinerator? [Condition I(A).2(f)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A ___ RMK# ___
14.	Did the permittee ensure that the second main chamber (i.e., unmodified) aerosol can feeder was not used? [Condition I(A).2(g)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A ___ RMK# ___
15.	Were hazardous wastes fed to the incinerator only if the following permit conditions were met? [Condition I(A).3(a)]	
16.	Did the Permittee operate and maintain all components of the incineration system in accordance with the design plans, specifications and practices contained in Section D-5 of the permit application? [Condition I(A).3(a)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A ___ RMK# ___
17.	Did the Permittee install, test, operate and maintain all instrumentation, including all associated instrument loops, monitors, analyzers and the distributed control system, in accordance with the design plans, performance specifications and maintenance practices contained in Section D-5 of the permit application? [Condition I(A).3(b)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A ___ RMK# ___
	Did the Permittee maintain the incinerator so that	

18.	when operated in accordance with the operating requirements specified in this permit, it should meet all permit performance standards? [Condition I(A).3(c)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <input type="checkbox"/>
19.	Does the incinerator achieve a destruction and removal efficiency (DRE) of 99.99 percent for each of the following principal organic hazardous constituents (POHC), carbon tetrachloride and monochlorobenzene? [Condition I(A).3(d)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <input type="checkbox"/>
20.	Does the Permittee control hydrogen chloride (HCl) emissions to no greater than the larger of either 4 pounds/hour or one percent of the HCl in the stack gas prior to entering any pollution control equipment? [Condition I(A).3(e)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# (1)
21.	Were incinerator particulate matter emissions less than 180 milligrams per dry standard cubic meter (0.08 grains per dry standard cubic foot), when corrected for the amount of oxygen in the stack gas? [Condition I(A).3(f)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# (1)
22.	Was carbon monoxide concentration in the stack exhaust gas, corrected for the amount of oxygen in the stack gas, not in excess of 100 ppm based on a one hour rolling average? [Condition I(A).3(g)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# (1) <i>IF EXCEEDED, TRIGGERED AWPLO.</i>
23.	Were waste feed rates limited to not more than: -26,057 lb/hr for total system? -12, 852 lb/hr for liquid waste to the main chamber? -18,515 lb/hr for total waste to the main chamber? -19,848 lb/hr for total waste to the kiln? -5,685 lb/hr for liquids to the kiln? (includes weight of containers; rates are one hour rolling averages) [Condition I(A).3(h)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# (1)
24.	Was combustion temperature maintained within the limits of: - 1,700 - 2,400 F for both main chamber and kiln? [Condition I(A).3(i)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# (1)
25.	Was combustion gas volumetric flow less than or equal to 70,000 acfm at 140 F, saturated? [Condition I(A).3(j)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <input type="checkbox"/>
26.	Were the mass feed rates of toxic metals (on a 24 hour rolling average) to the incinerator less than or equal to the following limits? [Condition I(A).3(k)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <input type="checkbox"/>

29.	Was the draft in the kiln and main chamber maintained at 0.05 inches WC, min? [Condition I(A).3(n)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <u>(1)</u>
30.	Was bypass waste fuel meeting the conditions and criteria identified in Section D-5c (1)(f)(ii) of the permit application, the only waste fed into the incinerator until the minimum temperatures of 1,700 F were attained? [Condition I(A).3(o)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <u> </u>
31.	Were the procedures identified in Section D-5c (1)(f)(v) of the permit application followed for all shutdowns of the incinerator? [Condition I(A).3(p)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <u> </u>
32.	<p>Were 10 activations of the automatic waste feed cut-off system due to the exceedance of either minimum operating temperature or maximum carbon monoxide emissions limits experienced during any rolling 60-day block period? [Condition I(A).3(q)]</p> <p>If so did the permittee submit to the Director of Ohio EPA a written report within 5 calendar days of the 10th exceedance documenting the exceedances and results of the investigation and corrective measures taken?</p>	<p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <u> </u></p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <u> </u></p> <p><i>Letter 5-29-09</i></p>
33.	<p>Were the feed restrictions for the side door and direct feed locations in Condition I(A) 3(r) met, including? <i>ONE COMPATIBILITY MISSION. LETTER SUBMITTED</i></p> <p>Were procedures for determining the compatibility of waste materials fed through the side door and tanker and container direct feed mechanisms of the Main Chamber followed? [Condition I(A).3(r)]</p>	<p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <u> </u> ✓</p> <p>ONE DIRECT</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <u> </u> ✓</p>
34.	<p>Did changes in the waste feed, incinerator design or operating conditions cause any permit limits to be exceeded?</p> <p>If so, did the permittee cease operation of the incinerator? [Condition I(A).3(s)]</p>	<p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> RMK# <u> </u></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> RMK# <u> </u></p>
INSPECTIONS		
35.	Did the permittee thoroughly visually inspect the incinerator and associated equipment (including pumps, valves, conveyors, pipes, etc.) for leaks, spills, fugitive emissions, and signs of tampering, as specified in Pages 14 and 15 of 45 in Appendix F-2 of Section F of the permit application?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <u> </u>

	[Condition I(A).4(a)]	
36.	Did the Permittee continuously monitor the distributed control system for proper operation while the incinerator was in operation? [Condition I(A).4(b)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A ___ RMK# ___
37.	Did the permittee test the emergency waste feed cut-off system and associated alarms at least weekly to verify operability, and document the test as specified on Page 45 OF 49 in Appendix F-2 of Section F of the permit application? [Condition I(A).4(c)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A ___ RMK# ___
38.	Did the Permittee conduct all inspections applicable to the incineration unit as specified in Appendix F-2 of Section F of the permit application? [Condition I(A).4(d)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A ___ RMK# ___
	<u>Monitoring Requirements</u>	
39.	<p>While incinerating hazardous waste, did the Permittee:</p> <p>(i) Maintain and operate each monitoring system listed under "Monitoring System" in Attachment C of Module I(A) for each operating parameter listed under "Parameter and Monitoring Location"; and</p> <p>(ii) Monitor and record data for each operating parameter listed in Attachment C of Module I(A) under "Parameter and Monitoring Location" at the frequency specified under "Monitoring Frequency";</p> <p>(iii) Maintain and operate each backup monitoring system listed under "Backup Monitoring System" in Attachment C of Module I(A), and when utilized, record data from the backup monitoring system at the frequency specified under "Backup Monitoring Frequency".</p> <p>[Condition I(A).5(a)]</p>	<p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A ___ RMK# ___</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A ___ RMK# ___</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A ___ RMK# ___</p>
40.	Did the Permittee calibrate the monitoring equipment for each operating parameter listed in Attachment C of Module I(A) under "Parameter and Monitoring Location" at the frequency specified under "Calibration Frequency"? [Condition	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A ___ RMK# ___

<p>41.</p>	<p>I(A).5(b)]</p> <p>Did the Permittee maintain and calibrate daily the continuous CO monitoring equipment as specified in Section D of the Part B permit application? [Condition I(A).5(b)]</p> <p>Was the CO monitoring equipment examined by the equipment supplier's representative at least annually and certified by the supplier or an independent, properly trained and certified individual, that the equipment was calibrated in accordance with the manufacturer's recommended procedures and guaranteed accuracy to +/- 10 ppm or +/-2.5% of full scale readings, whichever is greater?</p> <p>Did the permittee document the results of all calibrations required by this permit condition I(A).5?</p>	<p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A ___ RMK# ___</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A ___ RMK# ___</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A ___ RMK# ___</p>
<p>42.</p>	<p><u>Waste Feed Cut-Off Requirements</u></p> <p>Were all monitoring systems listed under "Monitoring System" in Attachment C of Module I(A) and that have a monitoring frequency of "Continuous" or "Continuously" specified under "Monitoring Frequency" on-line, properly operating and continuously monitoring the specified parameters before hazardous wastes were fed to the incinerator? [Condition I(A).6(a)]</p> <p>In case of a malfunction of the automatic waste feed cut-off systems, did the Permittee perform manual shutdowns in accordance with the approved procedures in the permit application and not restart the incinerator until the problem causing the malfunction was located and corrected? [Condition I(A).6(b)]</p> <p>Were the waste feeds to the incinerator automatically cutoff whenever any operating limit identified as a waste feed cutoff limit in Attachment B of Module I(A) was exceeded or if both CO continuous emissions monitoring systems were off-line for any reason? [Condition I(A).6(c)]</p> <p>Did an alarm actuate whenever any operating limit</p>	<p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A ___ RMK# ___</p> <p>Yes ___ No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> RMK# ___</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A ___ RMK# ___</p>

	<p>identified as an "Alarm Only" limit in Attachment B of Module I(A) was exceeded? [Condition I(A).6(c)]</p>	<p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <input type="checkbox"/></p>
<p>43.</p>	<p>Did the Permittee test the automatic waste feed cut-off system weekly and document the test using pages 42 and 42.1 of 45 in Appendix F-2 of Section F of the permit application? [Condition I(A).6(c)]</p>	<p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <input type="checkbox"/></p>
<p>44.</p>	<p><u>Recordkeeping</u></p> <p>Did the Permittee record and maintain, in the operating record for this facility, all monitoring and inspection data compiled under the requirements of section I(A) of the permit? [Condition I(A).8(a)]</p> <p>Did the Permittee record in the operating record for this facility the date and time of all automatic waste feed shut-offs, including the triggering parameters, reason for the shut-off, and corrective actions taken? [Condition I(A).8(b)]</p> <p>Did the Permittee also record all failures of the automatic waste feed shut-off systems and corrective actions taken? [Condition I(A).8(c)]</p> <p>Were the daily visual inspections of the incinerator and associated equipment (pumps, valves, conveyors, piping, etc.) for leaks, spills, fugitive emissions and signs of tampering recorded in the daily inspection log and made part of the facility's operating log? [Condition I(A).8(c)]</p> <p>Did the Permittee document all emergency process termination (EPT) incidents at the facility and promptly report the occurrence of the EPT, cause of the EPT and associated emissions to Ohio EPA? [Condition I(A).8(d)]</p>	<p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> RMK# <input type="checkbox"/></p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <input type="checkbox"/></p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> RMK# <input type="checkbox"/></p>
<p>45.</p>	<p>Have all compliance schedule deadlines in Condition I(A).9 been achieved?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> RMK# <input type="checkbox"/></p>