



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

July 16, 2009

RE: LUBRIZOL
OHD 004 172 565
LQG AND TSD
NOV/RTC

Gregory Taylor
The Lubrizol Corporation
29400 Lakeland Blvd.
Wickliffe, OH 44092

Dear Mr. Taylor:

Julia Zhang and I of the Ohio EPA, Division of Hazardous Waste Management, conducted an inspection of Lubrizol located at 29400 Lakeland Blvd. in Wickliffe, Ohio, on June 24, 2009. The purpose was to determine if Lubrizol was in compliance with Ohio's hazardous waste and used oil laws as found in Chapter 3734 of the Ohio Revised Code (ORC) and Chapter 3745 of the Ohio Administrative Code (OAC). Please see the enclosed Process and Waste Summary chart for my understanding of this facility's operations. Personnel training records and the contingency plan were not specifically reviewed during this inspection. Both have been reviewed during past inspections and will be during future inspections.

The following violation was found:

1. OAC rule 3745-273-14 (E) - Universal waste lamp labeling.
This rule requires that containers of universal waste lamps be labeled as Universal Waste - Lamps, Waste Lamps, or Used Lamps.

Lubrizol violated this rule by not having three of its 29 boxes of waste lamps labeled as required. This was corrected during the inspection. You have since submitted data and information to document your claim that two of these three boxes held waste lamps that were not hazardous waste and, therefore, not subject to universal waste rules. It is beyond the scope of this inspection to review and comment on that data. The Division of Hazardous Waste Management's Central Office staff may be able to review such data, if needed.

Other information and suggestions:

- Ohio EPA's Office of Compliance Assistance and Pollution Prevention (OCAPP) provides compliance and pollution prevention assistance on environmental issues related to air, land, and water. They can be contacted at (800) 329-7518, or <http://www.epa.state.oh.us/ocapp/ocapp.html>.
- Entrepreneurs for Sustainability is a group that seeks to "build a sustainable regional economy in Northeast Ohio that will create prosperity and total community health." They offer workshops, conferences, a business to business directory and more. Their website is at <http://www.e4s.org/content/index.asp>.

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- ENERGY STAR is a government-backed program helping businesses and individuals protect the environment through superior energy efficiency. Their website is at <http://www.energystar.gov/>.
- There are various grants, loans, and tax incentives available for environmental projects in Ohio. A good place to start looking for these is at: <http://www.epa.state.oh.us/ocapp/funding.html> and <http://www1.eere.energy.gov/financing/business.html>.
- The Clean Air Resource Center offers help in understanding EPA air quality requirements. In addition, if your business is required to purchase new equipment, they can offer better-cost financing with special tax incentives. Their phone number is (800) 225-5051 and website is <http://www.ohioairquality.org/>.
- The Division of Hazardous Waste Management has created an electronic news service to provide you with updates related to hazardous waste activities in Ohio. You can find more information and sign up at http://ohioepa.custhelp.com/cgi-bin/ohioepa.cfg/php/enduser/doc_serve.php?2=subscriptionpage.

You can find copies of the regulations and other information on the Division of Hazardous Waste Management web page at <http://www.epa.state.oh.us/dhwm/>.

If you have any questions, please contact me at (330) 963-1217, or robert.almquist@epa.state.oh.us.

Sincerely,



Robert Almquist
Division of Hazardous Waste Management

RA:cl
Enclosures

ec: Frank Popotnik, DHWM, NEDO Harry Sarvis, DHWM, CO
 Julia Zhang, DHWM, CO

cc: Natalie Oryshkewych, DHWM

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.

Process and Waste Summary for: Lubrizol, OHD004172565, LQG, TSD, 6-24-09 inspection

This summary does not include each waste group listed on the 2008 annual report. It only includes hazardous waste streams that generated more than 20,000 pounds (P) during 2008. This covers 98% of the total weight of hazardous waste generated in 2008. If waste codes and source codes are the same then different wastes are combined together for purposes of the annual report. This leads to many of the categories in this chart having multiple waste profile #s. Other nonhazardous wastes are also included.

#	Process generating the waste	Waste description and haz. codes	Profile # (Most of these waste categories include multiple waste profiles.)	Date of last analysis	Date of last LDR	Amount generated per 2008 annual report in pounds	On-site management	Off-site management
1	Pilot plant operations	R&D waste, D001, D002				34835	Collected in drums which when full go to either building 21 or the blue storage box near building 51. From here the drums go to building 64 from which they are shipped out.	Veolia ES Technical Solutions, West Carrollton, OH for transfer off-site to other TSD's for further treatment and for fuel blending and then to Systech.
2	Pilot plant operations	R&D waste, D001, D005, D018, F003 including barium solvent				31301	Collected in drums which when full go to either building 21 or the blue	Veolia for transfer off-site to other TSD's for further treatment and for fuel blending.

							storage box near building 51. From here the drums go to building 64 from which they are shipped out.	Also shipped to RINECO, Benton, AR for fuel blending.
3	Pilot plant operations	R&D waste, D001, D002, D005, D018, F003, F005 including TTC acid				21723	Collected in drums which when full go to either the blue storage box near building 51 or directly to building 64 from which they are shipped out.	Veolia for transfer off-site to other TSD's for further treatment and for fuel blending. RINECO for fuel blending.
4	Pilot plant operations	R&D waste, D005	41952 – barium filter cake (diatomaceous earth) ends up at EQ, Michigan for disposal. 41948 – barium solvent, waste profile says BTU/lb is 5000 or			21163	Collected in drums which when full go to either building 21 or the blue storage box near building 51. From here the drums go to building 64 from which they are shipped out.	Veolia for transfer off-site (then to Stabilex, Canada or EQ, Michigan) and for fuel blending.

			greater					
5	Pilot plant operations	R&D waste, D001, D002, D003, D018 includes CSL and sulfides				21651	Collected in drums which when full go to either building 21 or the blue storage box near building 51. From here the drums go to building 64 from which they are shipped out.	Veolia for transfer off-site to other TSD's for further treatment. RINECO for fuel blending.
6	Pilot plant operations and Research Departments	R&D lab pack, many codes – see annual report				13683		Von Roll America, East Liverpool, OH for incineration.
7	One time generation of waste from Pilot Plant Development operations.	R&D process waste, D001, D018, D035, F003, F005				1339556 (about ½ of total weight of waste generated)	Pumped via two pump stations to tank S-1. Sometimes pumped directly out of S-1 for offsite shipment. Sometimes aqueous phase is pumped from S-1 to S-2 and then pumped out of S-2 for offsite shipment.	Clean Harbors, Baltimore, MD for other treatment. (They only like to take up to 8 or 10 percent organics.) Supercritical extraction using carbon dioxide. The organics are stripped off and sent to a cement kiln. The water is further treated and

								then discharged to Chesapeake Bay after the City of Baltimore checks it.
8	This includes waste from two laboratory glassware cleaning machine that uses Stoddard solvent and water. Also Includes aqueous wastes from Research laboratories and the cleaning of reactor vessels in the Pilot Plant.	Aqueous waste from R&D, D001, D018, D035, F003, F005	U31795B		4-29-09	254095	Pumped via two pump stations to tank S-1. Phase separation of aqueous and organics in S-1. Pumped to S-2 and then offsite from S-2.	Clean Harbors, Baltimore, MD for other treatment. Supercritical extraction using carbon dioxide. The organics are stripped off and sent to a cement kiln. The water is further treated and then discharged to Chesapeake Bay after the City of Baltimore checks it.
9	Pilot plant operations and Research Departments	Liquid organic waste from R&D, D001, D018, D035, F003, F005				333341	Pumped via two pump stations to tank S-1. Phase separation of aqueous and organics in S-1. Pumped to S-4 and then offsite from S-4.	Veolia for fuel blending.
10	Cleaning of engine parts	Non-hazardous waste Stoddard			NA		Stored in tank S-5, a 12,000	Sent to Safety-Kleen for recycling.

	from the Mechanical Engineering and Testing Department	solvent					gallon tank.	
11	Mechanical Engineering and Testing also from Research Department	Waste gasoline, not a waste by 3745-51-02(C)(2)(b)			NA		Stored in tank S-6, a 5,000 gallon underground tank at south plant.	Sent either to Veolia for fuels blending or directly to Systech as a fuel.
12	Mechanical Engineering and Testing also from Research Department	Used oil			NA		Stored in tanks S-7 (12,000 gallons) and H-16 (24,940 gallons)	Sent to Safety-Kleen for recycling.
13	Mechanical Engineering and Testing	Used glycol			NA		Stored in tank H-20 (24,300 gallons)	
14	Cleaning of reactor vessels	Nonhazardous aqueous waste			NA		Stored in tank H-21 (70,756 gallons)	Sent to Clean Harbors Cleveland

15	Lighting	Waste fluorescent lamps			NA	Last shipped out on 4-7-09	Stored in boxes in building 64	Environmental Recycling, Bowling Green, Ohio
16	Outside secondary containment for tanks S-1, 2, 4, 5, and 7	Rainwater collected in trench					If clear it is pumped to process wastewater. If not it is pumped to S-1 tank.	

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

For Ohio EPA use only

E-mail this completed form to kristina.durnell@epa.state.oh.us
 or mail it to Kristina Durnell, Central Office

Site EPA ID No.	EPA ID Number: OHD 004 172 565	
Site Name	Name: The Lubrizol Corporation	Website: (Optional)
Site Location Information	Street Address: 29400 Lakeland Blvd.	State: OH
	City, Town, or Village: Wickliffe	Zip Code: 44092
	County Name: Lake	Private <input checked="" type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other <input type="checkbox"/>
Site Land Type (check only one)		
NAICS code(s) www.census.gov/epcd/www/naics.html	325199	
Facility Representative	First Name: Gregory MI: A Last Name: Taylor	Phone Number Extension:
Additional names can be recorded in number 12	Phone Number: 440-347-2810	Fax Number Extension:
Only provide address information if it is different than the site address	E-Mail Address: greg.a.taylor@lubrizol.com	
	Fax Number: 440-347-2267	
	Street or P.O. Box:	
	City, Town or Village:	Zip Code:
	State:	
Legal Owner And Operator of the Site. List Additional Owners and/or Operators in the Comment Section or on another copy of this form page	Name of Site's Legal Owner: The Lubrizol Corporation	Date Became Owner (mm/dd/yyyy): 08/28/1931
	Owner Type: Private <input checked="" type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other <input type="checkbox"/>	Owner Phone #: 440-943-1200
	Street or P.O. Box: 29400 Lakeland Blvd.	Country: USA Zip Code: 44092
	City, Town or Village: Wickliffe	Date Became Operator (mm/dd/yyyy):
	State: OH	Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other <input type="checkbox"/>
	Name of Site's Operator: same	Operator Phone #:
	Operator Type: Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other <input type="checkbox"/>	United States Zip Code:
	Street or P.O. Box:	
	City, Town or Village:	
	State:	

VIOLATIONS CITED? Yes No

TYPE OF HANDLER— A MINIMUM OF ONE BOX MUST BE CHECKED

<input type="checkbox"/> Not a HW Generator	<input type="checkbox"/> UNKNOWN: Cited for violation of 3745-52-11	<input checked="" type="checkbox"/> Large Quantity Generator (LQG)
		<input type="checkbox"/> Small Quantity Generator (SQG)
		<input type="checkbox"/> Conditionally Exempt Small Quantity Generator
		<input type="checkbox"/> U.S. Importer of Hazardous Waste
		<input type="checkbox"/> Mixed Waste (Hazardous and Radioactive) Generator

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

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

UNIVERSAL WASTE ACTIVITIES (INDICATE TYPES OF UNIVERSAL WASTE MANAGED (CHECK ALL BOXES THAT APPLY))

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

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

<input checked="" type="checkbox"/> Batteries
<input type="checkbox"/> Pesticides
<input type="checkbox"/> Mercury containing equipment
<input checked="" type="checkbox"/> Lamps

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

<input checked="" type="checkbox"/> Used Oil Generator
<input type="checkbox"/> Used Oil Transporter
<input type="checkbox"/> Used Oil Transfer Facility
<input type="checkbox"/> Used Oil Processor
<input type="checkbox"/> Used Oil Re-refiner
<input type="checkbox"/> Off-Specification Used Oil Burner
<input type="checkbox"/> Used Oil Fuel Marketer Who Directs Shipment of Off-Spec. Oil
<input type="checkbox"/> Used Oil Fuel Marketer to Off-Specification Used Oil Burner

Waste Codes for Federally Regulated Hazardous Wastes. Please list the codes for the federally regulated hazardous waste handled at the site. List them in the order they are presented in the regulations (e.g., D001, P003, F007, U112). Use an additional page if more space is needed. If there are more than 7 waste codes and they are the same as listed in the most recent RCRAInfo source record, you do not need to list them all. Instead just indicate the date of the most recent source record.

same as annual report

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

Announced	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Additional Facility Representatives:	Sue Skrab, Walt Vilk, Steve Mason
Tanks	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Other Comments:	
Containers	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		

Name of Inspector(s) Robert Almquist	Name of Inspector(s) Julia Zhang	Date of Inspection/Time (mm/dd/yyyy) (hh:mm) 6/24/2009
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OPTIONAL CERTIFICATION. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature of Owner, Operator, or an Authorized Representative	Name and Title (Print)	Date (mm/dd/yyyy)

LQG TANK SYSTEM REQUIREMENTS (OAC rule 3745-52-34(A) and OAC rules 3745-66-90 through 3745-66-100)

(Please refer to the rules before or while completing this checklist.)

1.	Is each tank clearly labeled/marked with the words "Hazardous Waste?" [3745-52-34(A)(3)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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TANK SYSTEM – GENERAL OPERATING REQUIREMENTS

2.	Does the o/o follow the general operating requirements below:	
a.	Does the o/o prevent placement of hazardous waste or treatment reagents in tank or secondary containment if such placement can cause the system to leak, rupture, corrode, or otherwise fail? [3745-66-94(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Does the o/o use appropriate controls to prevent spills or overflows from the system (e.g., check valves, dry disconnect couplings, high level alarms, etc.)? [3745-66-94(B)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	If a leak or spill has occurred in the tank system, has the o/o complied with 3745-66-96? [3745-66-94(C)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

TANK SYSTEM – INSPECTION REQUIREMENTS

3.	Has the o/o documented the inspections required in 3745-66-95, in the operating record, including inspection of the following:	
a.	Spill control equipment each operating day? [3745-66-95(A)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Above ground portion of tank each operating day? [3745-66-95(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Data from leak detection equipment each operating day? [3745-66-95(A)(3)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
d.	Construction materials and area immediately surrounding the tanks for signs of erosion or release of hazardous waste each operating day? [3745-66-95(A)(4)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

NOTE: "Each operating day" is each day that the tank system is being used to manage (store or treat) hazardous waste.

4.	Where applicable, the cathodic protection system to confirm proper operation within six months of initial installation and annually thereafter? [3745-66-95(B)(1)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
5.	Where applicable, all sources of impressed current at least bi-monthly? [3745-66-95(B)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

TANK SYSTEM CLOSURE REQUIREMENTS

6.	If the generator has closed a <90 day tank, was closure completed in accordance with OAC 3745-66-97 (except for paragraph C)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
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TANK SYSTEMS STORING IGNITABLE OR REACTIVE WASTES

7.	For tanks used to treat or store ignitable or reactive wastes, has the o/o complied with one of the following: [3745-66-98(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	Is the waste treated immediately after placement in the tank so that the resultant mixture is no longer ignitable or reactive and the o/o has conducted such activities in compliance with 3745-66-17(B)? [3745-66-98(A)]; or	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Is the waste stored or treated to protect it from materials or conditions which may cause ignition or reaction? [3745-66-98(A)]; or	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	The tank is used solely for emergencies? [3745-66-98(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
8.	If ignitable or reactive waste is stored or treated, are protective distances maintained between waste management areas and any public streets, alleys or adjoining property lines as required by the NFPA Flammable and Combustible Liquids Code (1996)? [3745-66-98(B)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

9.	Has the o/o 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? [3745-66-99(A) and/or (B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	If so, have the requirements of 3745-65-17(B) been met? [3745-66-99(A) and/or (B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
TANK SYSTEM – WASTE ANALYSIS REQUIREMENTS not evaluated		
10.	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 o/o done one of the following: [3745-66-100]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	Conducted waste analysis and trial treatment or storage tests? [3745-66-100(A)]; OR	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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? [3745-66-100(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Assessment and Installation – not evaluated		
11.	Is there a written assessment attesting that the design, installation and structural integrity of the system is adequate for the management of hazardous waste(s)? [3745-66-92(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<i>NOTE: You should review the file to see if the written assessment has been previously reviewed and what the results were.</i>		
12.	Does the written assessment include the following: [3745-66-92(A)]	
a.	Certification by an independent registered, professional engineer? [3745-66-92(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Consideration of the design standards of the system? [3745-66-92(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Consideration of the hazardous characteristics of the waste(s)? [3745-66-92(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
d.	An evaluation by a corrosion expert (only if the external system/components are metal and in contact with soil or water)? [3745-66-92(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
e.	A determination of design and operational measures that will be needed to protect the tank system from potential damage (only for underground tank components)? [3745-66-92(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
f.	Design considerations to ensure that the tank foundations will maintain the load of a full tank? [3745-66-92(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
g.	Design considerations for anchoring the unit to prevent floatation (only for tanks situated in a seismic fault zone or saturated zone)? [3745-66-92(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
h.	Design considerations to ensure that the tank system will withstand the effects of frost heave(only for underground tank systems)? [3745-66-92(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<i>NOTE: CO-DHWM Engineering staff are available to assist you with evaluation of the written assessment.</i>		
13.	Are there written statements by those persons who supervised installation or certified design of the new tank system, that the tank system was properly installed and designed and that required repairs were performed? [3745-66-92(G)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Do the written statements address all of the following:		
a.	Inspection for damage and/or inadequate construction and installation was conducted? [3745-66-92(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Statement that deficiencies were corrected before the tank system was covered or put into use? [3745-66-92(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

	c.	Proper backfilling? [3745-66-92(C)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d.	Tightness test; if the tank system was found not to be tight, does the statement indicate that proper repairs were made? [3745-66-92(D)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	e.	Proper support and protection of ancillary equipment? [3745-66-92(E)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	f.	Supervision of the installation of field fabricated corrosion protection? [3745-66-92(F)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
SECONDARY CONTAINMENT			
14.	Has secondary containment been provided?		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
NOTE: All tank systems must have secondary containment at this point, except for tank systems that store/treat materials that become hazardous waste after January 12, 1987, must have secondary containment required within the time intervals in 3745-66-92(A)(1) to (A)(4). The date the material became a hazardous waste must be used in place of January 12, 1987. [3745-66-92(A)(5)]			
15.	Is secondary containment one of the following:		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	a.	An External Liner ? [3745-66-93(E)(1)] If so,	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	i.	Is liner designed or operated to contain 100% of the capacity of the largest tank?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	ii.	Is liner designed and operated to prevent run-on and infiltration or the collection system has <u>excess</u> capacity to contain run-on and infiltration from a 25-year, 24-hour storm?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	iii.	Is liner free of cracks and gaps?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	iv.	Does liner completely surround the tank and cover all earth likely to be contacted by waste during a release?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	v.	Are chemically resistant water stops in place at all points? (concrete liners only)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	vi.	Is there a compatible interior coating or lining to prevent migration of waste into the concrete? (concrete liners only)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b.	Vault System ? [3745-66-93(E)(2)] If so,	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	i.	Is vault system designed to contain 100% of the capacity in the largest tank?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	ii.	Is liner designed and operated to prevent run-on and infiltration or the collection system has <u>excess</u> capacity to contain run-on and infiltration from a 25-year, 24-hour storm?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	iii.	Are chemically resistant water stops in place at all points?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	iv.	Is there a compatible interior coating to prevent migration into the concrete?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	v.	For ignitable or reactive waste : Is the vault system provided with means to prevent (or alternatively "protect against") the formation or ignition of vapors?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	vi.	Is vault system provided with an exterior moisture barrier?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c.	Double-Walled Tank ? [3745-66-93(E)(3)] If so,	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	i.	Is double-walled tank designed as an integral structure to contain any release from the inner tank?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

	ii.	If metal, are the primary tank interior and outer shell exterior surfaces protected from corrosion?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	iii.	Is double-walled tank provided with a continuous leak detection system able to detect a release within 24 hours or at the earliest practicable time?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d.	An Equivalent Device? As described in 3745-66-93(D)(4) which has been approved by the director? [3745-66-93(D&E)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
SECONDARY CONTAINMENT DESIGN/OPERATION/INSTALLATION			
16.	Has each secondary containment system been designed, installed and operated to prevent any migration of wastes or liquid to the soil, groundwater, or surface water and is it capable of detecting and collecting releases and accumulated liquids? [3745-66-93(B)(1) and (2)]		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
17.	Does the secondary containment system meet the following minimum requirements of [3745-66-93(C)]:		
	a.	Constructed or lined with compatible materials of sufficient strength to prevent failure? [3745-66-93(C)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b.	Placed on a foundation or base capable of providing support? [3745-66-93(C)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c.	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? [3745-66-93(C)(3)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d.	Sloped or designed to drain and remove liquid resulting from leaks, spills or precipitation? [3745-66-93(C)(4)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	e.	Any liquid which accumulates in the containment unit resulting from spills, leaks or precipitation removed within 24 hours or in a timely manner? [3745-66-93(C)(4)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
ANCILLARY EQUIPMENT REQUIREMENTS			
18.	Is ancillary equipment provided with secondary containment (such as double-walled piping, jacketing or a trench)?		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	If not, is the ancillary equipment one of the following: [3745-66-93(F)]		
	a.	Above ground piping (exclusive of flanges, joints, valves and connections) that is inspected daily?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b.	Welded flanges, welded joints and/or welded connections that is inspected daily?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c.	Sealless or magnetic coupling pumps and/or sealless valves that is inspected daily?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d.	Pressurized above ground piping systems with automatic shut-off devices (e.g., excess flow check valves, flow metering shutdown and/or loss of pressure-actuated shut-off devices) that is inspected daily?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
TANK SYSTEMS FOUND TO BE LEAKING OR UNFIT FOR USE			
19.	Has there been a leak or spill from any tank system or has any tank system been found unfit for use? If so, did the o/o:		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
<i>NOTE: If the tank is found to be unfit for use, inspector should explain why.</i>			
	a.	Immediately cease flow of material into tank and investigate the cause of the release? [3745-66-96(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b.	Remove waste from tank system to prevent further release within 24 hours of detection or earliest practicable time? [3745-66-96(B)(1)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c.	Remove all material released into secondary containment system within 24 hours or as timely as possible to prevent harm to human health and the environment? [3745-66-96(B)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d.	For a visible release to the environment, immediately conduct a	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

	visual inspection of the release? [3745-66-96(C)]	
e.	For a visible release to the environment, prevent further migration of the leak or spill to soils or surface waters? [3745-66-96(C)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
f.	For a visible release to the environment, properly dispose of any visibly contaminated soil or surface water? [3745-66-96(C)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
g.	Report any release to the environment to the director within 24 hours unless it was less than one pound and was cleaned up immediately? [3745-66-96(D)(1)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
h.	For a release to the environment, submit a written report of the incident to the director within 30 days of the release? [3745-66-96(D)(3)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
i.	Remediate the spill and repair the unit prior to returning it to service? [3745-66-96(E)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
j.	For a release from a tank system without secondary containment, did the o/o provide secondary containment meeting the requirements of 3745-66-93 for the unit prior to putting it back into service? [3745-66-96(E)(4)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<p><i>NOTE: The requirements noted in 20.j. do not apply if the release was from an above ground component of the tank which can be inspected visually after being put back into service.</i></p>		
20.	In the event that the repairs to the tank system were major (e.g., replacement of liner, repair of ruptured primary or secondary containment structure), did the o/o obtain a certification from an independent, registered P.E. attesting that the repaired unit is capable of handling hazardous waste? [3745-66-96(F)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
21.	Was a copy of the certification submitted to the director within seven days after returning the system to use? [3745-66-96(F)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
22.	If the o/o was unable to repair and return the unit to service as described in 20.a through 20.e, was the tank system closed in accordance with 3745-66-97? [3745-66-96(E)(1)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
23.	Does the o/o have a tank system with a variance from secondary containment from which a release has occurred but <u>has not</u> migrated beyond the zone of engineering control? If so,	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
a.	Has the o/o complied with 3745-66-96(A) through (F) and decontaminated soils? [3745-66-93(G)(3)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	If soils cannot be decontaminated/removed, has the o/o complied with 3745-66-97(B)? [3745-66-93(G)(3)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
24.	Does the o/o have a tank system with a variance from secondary containment from which a release occurred and <u>has</u> migrated from the zone of engineering control? If so,	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
a.	Has the o/o complied with 3745-66-96(A) through (D), prevented migration, and decontaminated soil? [3745-66-93(G)(4)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	If soils cannot be decontaminated/removed, or if the groundwater has been contaminated, has the o/o complied with 3745-66-97(B)? [3745-66-93(G)(4)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

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

FACILITY	The Lubrizol Corporation	OHIO PERMIT #	02-43-0177
STREET ADDRESS	29400 Lakeland Blvd.	US EPA ID#	OHD 004 172 565
CITY, STATE AND ZIP CODE	Wickliffe, OH 44092	PHONE NUMBER	440-347-2810
COUNTY	Lake	INSPECTION DATE	6-24-09

Was Advance Notice of Inspection Given? Yes No N/A

If So, How Far In Advance?

	NAME	AGENCY/TITLE	PHONE
INSPECTORS	Robert Almquist, Julia Zhang	Ohio EPA, DHWM	330-963-1217
FACILITY REPS			

Is facility operating as a generator? Yes

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

PERMIT STATUS

Permit Issued:	3-6-02	LDR Checklist Attached:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Permit Effective Date:	3-6-02	Used Oil Checklist Attached:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Permit Expiration Date:	3-6-12	Generator Checklist Attached:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Permit Renewal Date:			
Permit Modification Date(s):	12-17-08		

AUTHORIZED ACTIVITIES

STORAGE		TREATMENT		DISPOSAL	
<input checked="" type="checkbox"/>	Containers	<input checked="" type="checkbox"/>	Tanks		Injection Well
<input checked="" type="checkbox"/>	Tanks		Incinerator		Landfill
	Waste Pile		Thermal Treatment		Land Application
	Surface Impoundment		Post-Closure		Surface Impoundment

Post-Closure Care Corrective Action

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GENERAL PERMIT COMPLIANCE AND ACTIVITIES

1.	Has the expiration date of the permit passed? If so:		Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
	a.	Is the permittee continuing any activity regulated by the permit after the expiration date of the permit?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	b.	Has the facility submitted an application for a permit renewal to the director no later than 180 days prior to the expiration date of the permit? [Condition A.6]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
2.	Has the permittee submitted the annual permit fee, payable to "Treasurer, State of Ohio," to Ohio EPA on or before the anniversary of the date of issuance during the term of the permit? [Condition A.25]		Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
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 <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
4.	Have any provisions of the permit been identified as invalid? [Condition A.4]		Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
5.	Has the permittee 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 <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
	a.	Did the permittee immediately report the following to Ohio EPA's Emergency Response Unit? [Condition A.20]			
	i.	Information concerning a release of any hazardous waste that may cause an endangerment to public drinking water supplies; and	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	ii.	Information concerning a release of hazardous waste, fire or explosion at the facility which could threaten human health or the environment outside the facility including a description of:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
		A. Name, address and telephone number of the owner/operator?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
		B. Name, address and telephone number of the facility?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
		C. Name and quantity of material(s) involved?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
		D. The extent of injuries, if any?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
		E. An assessment of the actual or potential hazard to the environment and human health outside the facility?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
		F. Estimated quantity and disposition of recovered material that resulted from the incident?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
6.	Did the permittee provide a written report to Ohio EPA's Emergency Response Unit and DHWM within 5 days of becoming aware of the circumstances reported in Questions No. 5? If so, did the report contain: [Condition A.21]		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
	a.	A description of the noncompliance and its cause (including exact dates and times)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	b.	Whether the noncompliance has been corrected and if not, the anticipated time noncompliance is expected to continue? and	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	c.	Steps taken or planned to minimize the impact on the environment and to reduce, eliminate and prevent recurrence of the noncompliance?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

NOTE: The permittee need not comply with the five day written report requirement if the director, upon good cause shown by the permittee, waives that requirement and the permittee submits a written report within 15 days of the time the permittee became aware of the circumstances. [Condition A.21].

7.	Has the permittee identified other instances of noncompliance not provided for in Condition A.22? If so:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
a.	Did the permittee report these instances to Ohio EPA, DHWM? [Condition A.22]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Do the reports provided contain the information set forth in Condition A.20? [Condition A.20]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Has the permittee taken all steps necessary to minimize releases to the environment or prevent any adverse impact on human health or the environment? [Condition A.8]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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 <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
a.	If so, has the permittee provided Ohio EPA with advance notice of such changes? [Condition A.17]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<i>NOTE: Such notification does not waive the permittee's duty to comply with the permit. [Condition A.17]</i>		
9.	Has the permittee become aware that it failed to submit any relevant facts in the permit or issuance proceedings or that it submitted incorrect or incomplete information in permit issuance proceedings or other submissions to Ohio EPA? If so:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
a.	Has the permittee properly submitted such facts or corrected information to the appropriate entity? [Condition A.24]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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 <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
11.	Has the permit, been transferred to a new owner/operator? If so:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
a.	Has the transfer been conducted in accordance with ORC Chapter 3734. and the rules adopted thereunder which includes the permittee notifying the new owner in writing of the requirements of ORC Chapter 3734. and the rules adopted thereunder and the applicable Ohio hazardous waste rules before transferring ownership? [Condition A.18]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
12.	Has the permittee submitted reports in any compliance schedule of the permit to Ohio EPA no later than 14 days following each scheduled date, unless otherwise specified? [Condition A.19]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
13.	Has the permittee furnished relevant information which Ohio EPA has requested to determine whether cause exists for modifying, revising, revoking or suspending the permit, to determine compliance with the permit? [Condition A.10]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
14.	Has the facility furnished Ohio EPA, upon request, with copies of records required to be kept by the permit? [Condition A.10]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
15.	Is the permittee maintaining records of all data used to complete the application and any amendments, revisions or modifications to the application? [Condition A.14c]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
16.	Is the permittee retaining a complete copy of the approved application on-site? [Condition A.14c]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
17.	Is the permittee planning any physical alterations or additions to any permitted portions of the facility? If so:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
a.	Has the permittee given notice to the director of such alterations/additions? [Condition A.15]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

SITE ENTRY - AVAILABILITY OF RECORDS

18.	As specified in Condition A.11, has the permittee allowed the director or an authorized representative, upon proper identification to:	
a.	Enter at reasonable times upon the premises where a regulated activity is located or where records are kept under the conditions of the permit?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Have access to and copy, at reasonable times, any records required to be kept under the conditions of the permit?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Inspect, at any time, facilities, equipment (including control and monitoring equipment), practices or other operations regulated under the conditions of the permit?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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 <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

RECORDKEEPING/OPERATING REQUIREMENTS

OPERATING RECORD

19.	In accordance with OAC rules 3745-54-73 and 3745-54-74 and Condition B.22 of the permit, does the permittee maintain an Operating Record which contains the following information:	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	A description of the quantity of each hazardous waste and the method(s) and date(s) of its treatment or storage?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	The location of each hazardous waste and quantity at each location including cross-reference to specific manifest numbers?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Records and results of required waste analysis?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
d.	Summary reports and details of all incidents that required implementation of the contingency plan?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
e.	Records and results of required inspections?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
f.	Documents required to be maintained by LDR requirements of OAC Chapter 3745-270?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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 <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
h.	For disposal facilities , location and quantity of each hazardous waste record on a facility map and cross-references to manifest document numbers? [3745-54-73(B)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

DOCUMENTS TO BE MAINTAINED AT FACILITY

20.	In accordance with Condition A.27 of the permit, is the permittee maintaining the following documents at the facility:	Only f and g evaluated
a.	Waste analysis plan in accordance with OAC rule 3745-54-13?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Contingency plan in accordance with OAC rule 3745-54-53?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

	c.	Closure plan in accordance with OAC rule 3745-55-12?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	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 <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	e.	Personnel training plan and records required by OAC rule 3745-54-16(C)? [Condition B.6]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	f.	Inspection schedules developed in accordance with OAC rules 3745-54-15, 3745-55-74 and 3745-55-95? [Condition B.5]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	g.	Operating record in accordance with OAC rule 3745-54-73? [Condition B.22]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	h.	Post-closure plan, as required by OAC rule 3745-55-18(A)? [Condition A.28(a)(viii)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	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 <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
21.		Is the permittee maintaining copies of all inspection logs at the facility for a period of at least 3 years from date of inspection? [Condition B.5]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
22.		Have any of the documents in Question No. 20 been revised? [Condition A.15] If so:	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	a.	Has the permittee submitted the revisions to Ohio EPA in accordance with OAC rule 3745-50-51?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b.	Have all requirements of OAC rule 3745-50-51 been met, including, where required, Ohio EPA approval?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
ANNUAL REPORT REQUIREMENT			
23.		Is the permittee complying with annual report requirements set forth in OAC rule 3745-54-75 and the additional report requirements set forth in OAC rule 3745-54-77? [Condition B.23]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
SAMPLING/MONITORING RECORDKEEPING REQUIREMENTS			
24.		In compliance with Condition 12(b) of the permit, do the permittee's records of monitoring information specify the:	Not evaluated
	a.	Date(s), exact place(s), time(s) and method(s) of sampling or measurement?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b.	Individual(s) who performed the sampling or measurement?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c.	Date(s) analyses were performed?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d.	Individual(s) who performed the analyses?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	e.	Analytical technique(s) or method(s) used?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	f.	Results of such analyses?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
25.		Have the methods used to obtain a representative sample of the waste to be analyzed included the appropriate SW-846 method or an equivalent method specified in the approved waste analysis plan? [Condition 12(a)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Not evaluated
26.		In accordance with Condition A.14 of the permit, is the permittee retaining records of monitoring information as required by the permit for at least 3 years from the date of sampling, including:	Not evaluated

	a.	All calibration and maintenance records?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
27.		Has Ohio EPA requested submittal of any reports or other information from the permittee? If so:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	a.	Have the submittals been signed and certified according to OAC rule 3745-50-42? [Condition A.13(c)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

WASTE MINIMIZATION REQUIREMENTS

28.		Does the permittee certify at least once every year that a program is in place to reduce the volume and toxicity of hazardous waste generated in accordance with Condition A.28(a) and OAC rule 3745-54-73?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
29.		Did the permittee submit the waste minimization report to Ohio EPA, Office of Compliance Assistance & Pollution Prevention and North East District Office within 180 days of journalization of this permit and updates biennially thereafter? [Condition A.28(c)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Aug. 2008
30.		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 <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
		If so, what amount of waste has the permittee reduced this year?	Less amount needed for sampling, 1000 gallon reduction I think
31.		Has the permittee's company saved much money this year by implementing pollution prevention (reducing raw material usage, disposal fees, energy savings, etc.)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
		If so, how much money has the permittee's company saved this year?	

GROUND WATER MONITORING not evaluated

32.		Has the permittee conducted semi-annual sampling of their monitoring wells?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
33.		Have they reported the results in the Annual Report to the director by March 1 st as required by Condition B.25?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

34.			
35.			
36.			

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.

OFF-SITE SHIPMENTS/MANIFEST REQUIREMENTS

37.		Is the permittee complying with the following 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.22]	
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	waste has changed, or at least annually? [Condition B.2]	

GENERAL INSPECTION REQUIREMENTS

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

53.	Is the permittee following the inspection procedures and schedules as set forth in the permit (<u>Section F</u> of the approved Part B permit application) and the requirements of OAC rules 3745-54-15(A),(C) and (D)?[Condition B.4]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
54.	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 OAC rule 3745-54-15(B)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	Is the schedule kept at the facility? [OAC rule 3745-54-15(B)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
55.	Does the permittee remedy deterioration or any malfunctions discovered by an inspection as required by OAC rule 3745-54-15(C)? [Condition B.5]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
56.	In accordance with OAC rule 3745-54-15(D) and Condition B.5 of the permit, do inspection records contain the following information:	
a.	Date and time of inspection?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Name of inspector?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Notation of observations made?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
d.	Date and nature of any repairs or other remedial actions?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

SECURITY REQUIREMENTS

57.	Is the permittee complying with the following security provisions of OAC rule 3745-54-14 and Condition B.3 of the permit: [<u>Section F</u> of the Part B permit application]?	Not evaluated
a.	Does the permittee have a 24-hour surveillance system which continuously monitors and controls entry onto the active portion of the facility?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	An artificial or natural barrier (in good repair) which completely surrounds the active portion of the facility?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

	c.	A means to control entry, at all times, through gates or other entrances, to the active portion of the facility?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
58.		In accordance with OAC rule 3745-54-14(C), does the permittee have signs reading "Danger - Unauthorized Personnel Keep Out" posted at entrances of the hazardous waste container storage building number _____?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> not evaluated <input type="checkbox"/>
FACILITY OPERATIONS			
59.		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? [OAC rule 3745-54-31; Condition B.1]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
60.		Does the permittee properly maintain and operate the facility to achieve compliance with the terms and conditions of the permit including: [Condition A.9]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	a.	Effective management practices?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b.	Adequate funding?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c.	Adequate operator staffing and training?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d.	Adequate laboratory and process controls?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
PERSONNEL TRAINING did not evaluate			
61.		Is the permittee conducting personnel training in accordance with the conditions of the permit and with the following requirements of OAC rule 3745-54-16? [Condition B.5]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	a.	Does the permittee provide 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 <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b.	Does the permittee provide personnel training to new employees within six months after their date of employment as required by OAC rule 3745-54-16(B)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c.	Does the permittee provide an annual refresher training course as required by OAC rule 3745-54-16(C)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
62.		Is the permittee maintaining personnel training records as required by OAC rule 3745-54-16(D) and of the approved application, including: written job titles, job descriptions and documented employee training records? [Condition B.6]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
REQUIRED EQUIPMENT			
<i>NOTE: Inspector may attach a list of emergency equipment. If so, the attachment document is referenced as Appendix ____.</i>			
63.		Has the permittee equipped the facility with the following emergency equipment as required by OAC rule 3745-54-32 and Condition B.7 of the permit:	
	a.	An internal communications or alarm system?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

	b.	A device such as a telephone which is capable of summoning emergency assistance from local emergency authorities?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c.	Portable fire extinguishes and/or fire control equipment, spill control and decontamination equipment?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d.	Water in adequate volume and pressure to supply water hose streams, foam producing equipment, automatic sprinklers or water spray systems?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
64.		Is the permittee inspecting, testing and maintaining the equipment specified in Question No. 60 to ensure its proper operating in accordance with OAC rule 3745-54-33 and Condition B.8 of the permit?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
65.		Whenever hazardous waste is being managed at the facility, has the permittee provided all personnel involved in the operation with immediate access to an internal alarm or emergency communication device as required by OAC rule 3745-54-34 and Condition B.9 of the permit?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

CONTINGENCY PLAN - EMERGENCY PROCEDURES not evaluated

66.		In compliance with Condition B.11 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 <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b.	Inform such agencies of safety equipment, supplies, proper emergency safety procedures that are applicable to the facility?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	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 <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
67.		Has a state or local agency declined to enter into the arrangements set forth in OAC rule 3745-54-37(A)? If so:	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	a.	Has the permittee documented the refusal in the operating record as required by OAC rule 3745-54-37(B)? [Condition B.11(b)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
68.		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.16(b)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
69.		Has the permittee notified all parties identified in the contingency plan in writing of amendments, modifications, or revisions to the plan within 10 days of the effective date of the change in the plan? [Condition B.16(b)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
70.		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.16(c)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
71.		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.15]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

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 not evaluated

72.		In accordance with OAC rule 3745-54-55 and Condition B.17 of the permit, is an emergency coordinator on premises or on call at all times?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
73.		In accordance with OAC rule 3745-54-55 and Condition B.17 of the permit,	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

	is/are the emergency coordinator(s) at the facility familiar with the following:	
a.	Contingency plan?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Facility operations/activities?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Waste characterization and location?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
d.	Location of all records in the facility?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
e.	Facility layout?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
74.	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.17]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
75.	Does the permittee have a contingency plan for the facility that: [Condition B.13]	
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 <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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 <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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 <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
d.	Includes a list of all emergency equipment, including fire extinguishing systems, spill control equipment, communications and alarm systems and decontamination equipment?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
e.	Includes the location and a physical description of each item on the list referenced in Question No. 72(d), and a brief outline of its capabilities?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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 <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
IMPLEMENTATION OF CONTINGENCY PLAN		
76.	Has there been a fire, explosion or release of hazardous waste or hazardous waste constituents at the facility including spill or release of hazardous waste or hazardous waste constituents greater than or equal to 55 gallons; any spill or release of hazardous waste or hazardous waste constituents less than 55 gallons may result in a fire or explosion hazard as determined by the Emergency Coordinator; or any spill on-site that may potentially cause on or off-site soil and/or ground or surface water contamination; any spill or release of hazardous waste or hazardous waste constituents that is reported to the National Response Center or local (city or county) emergency response center because the spill exceeded the "RQ" limits; any fire involving hazardous waste; any explosion involving hazardous waste; since the date of the last inspection? If so:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
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 <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

	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 <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	ii.	Name and address of the facility?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	iii.	Time and type of incident?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	iv.	Name and quantity of materials involved?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	v.	The extent of injuries?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	vi.	The possible hazards to human health or the environment outside the facility?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	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 <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d.	Within 15 days of the incident did the permittee submit to the director a written report of the incident? If so:	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	i.	Did the report contain the elements set forth in OAC rule 3745-54-56(J)? [Condition B.23]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	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 <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
CLOSURE REQUIREMENTS not evaluated			
77.		Does the permittee maintain the approved closure plan at the facility? [Condition B.29]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
78.		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.32]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
79.		Has the permittee amended the closure plan? If so:	
	a.	Has the plan been amended in accordance with OAC rule 3745-55-18(D)? [Condition B.28]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<i>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.</i>			
80.		Has the permittee closed the facility? If so:	no
	a.	Did the permittee complete closure of the facility 180 days after receiving the final volume of hazardous waste, as required by Condition B.29 of the permit?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b.	Was closure conducted in accordance with the closure performance standard of OAC rule 3745-55-11? [Condition B.24]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c.	Did the permittee carry out the approved closure plan as set found in Section _____ of the approved permit application? [Condition B.27]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d.	After receiving the final volume of hazardous waste, did the permittee remove all hazardous waste and complete closure	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

		activities in accordance with the schedule specified in the approved closure plan and as required by OAC rule 3745-55-13? [Condition B.29]	
	e.	Has the permittee decontaminated and/or disposed of all facility equipment, structures and soils as required by OAC rule 3745-55-14 and the approved closure plan? [Condition B.30]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	f.	Has the permittee certified that the facility has been closed in accordance with the specifications in the approved closure plan as required by OAC rule 3745-55-15? [Condition B.31]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	g.	Has the permittee submitted a survey plat to the director and local zoning authority no later than the submission of certification of closure of each hazardous waste disposal unit? [Condition B.34]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

POST-CLOSURE MAINTENANCE

NOTE: Inspector may attach a post-closure maintenance inspection schedule. If so, the attached document is referenced as Appendix ____.

81.		Has the permittee inspected the components, structures, and equipment at the site in accordance with the inspection schedule in §____ of the permit application on a quarterly basis? [OAC rule 3745-55-17(A)(1)(b)] [Condition B.35]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
82.		Has the permittee conducted and recorded an inspection of at least the following? [Condition B.35]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	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.	
83.		Is the permittee using the inspection forms found in the approved Part B permit application? [§____ of the approved permit application]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
84.		Have suitable repairs been made within a reasonable amount of time? [Condition B.35]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
85.		Have repairs been indicated on the Notification Repair Form? [Condition B.35]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
86.		Was the Notification of Repair Form submitted to Ohio EPA within one week after determining that repairs are necessary? [Condition B.35]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

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

87.		Are containers holding hazardous wastes in good condition as required by OAC 3745-55-71? [Condition C.3] If not:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	a.	Did the permittee transfer the hazardous waste from such a container to one that is in good condition or otherwise manage the	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

	waste in a manner that complies with the conditions of the permit? [Condition C.4]	
88.	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.4]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
89.	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.5(b)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
90.	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.6]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

INSPECTIONS

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

91.	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.8]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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 <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

CONTAINMENT SYSTEM

92.	Does the permittee maintain the containment system as described in the approved permit application, Section D, including: [Condition C.6]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	Sufficient capacity to hold 10% of the total volume of containers or the volume of the largest container, whichever is greater.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> unkno wn
b.	A system which is free of gaps and sufficiently impervious to contain leaks and spills?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
93.	Has the permittee had a spill or leak of wastes? If so: unknown	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	Was spilled or leaked waste removed in a timely manner? [Condition C.6(c)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

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

AISLE SPACE

94.	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.10 of the permit?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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LAND DISPOSAL RESTRICTION REQUIREMENTS see generator LDR checklist

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

95.	Does the permittee comply with all applicable regulations regarding land disposal prohibitions and restrictions as required by OAC Chapter 3745-270?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
96.	Does the permittee comply with the notification and certification	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

	requirements of OAC rule 3745-270-07(A)?	
97.	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 <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
98.	Does the permittee retain supporting data used to determine if wastes managed at the facility are restricted from land disposal in the facility files as required by OAC rule 3745-270-07(A)(5)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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 3 years as required by OAC rule 3745-270-07(A)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
99.	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 <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
CORRECTIVE ACTION not evaluated		
100.	Has the permittee submitted the monthly progress report for all corrective action activities? (This report is due by the 15 th of the month following the reporting period.) [Condition _____]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
101.	Has the permittee identified any new WMUs or releases at the facility? [Condition E.10]? If so:	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	Did the permittee follow the steps indicated in Conditions E.10(a) and (b) and E.11?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

SMALL QUANTITY UNIVERSAL WASTE HANDLER REQUIREMENTS – BATTERIES AND LAMPS

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

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

PROHIBITIONS

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

WASTE MANAGEMENT AND LABELING/MARKING

UNIVERSAL WASTE BATTERIES

3.	Are batteries that show evidence of leakage, spillage or damage that could cause leaks contained? [3745-273-13(A)(1)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
4.	If batteries are contained, are the containers closed and structurally sound, compatible with the contents of the battery and lack evidence of leakage, spillage or damage that could cause leakage? [3745-273-13(A)(1)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
5.	Are the casings of the batteries breached, not intact, or open (except to remove the electrolyte)? [3745-273-13(A)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
6.	If the electrolyte is removed or other wastes generated, has it been determined whether the electrolyte or other wastes exhibit a characteristic of hazardous waste? [3745-273-13(A)(3)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
a.	If the electrolyte or other waste is characteristic, is it managed in compliance with OAC Chapters 3745-50 through 3745-69? [3745-273-13(A)(3)(a)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	If the electrolyte or other waste is not hazardous, is it managed in compliance with applicable law? [3745-273-13(A)(3)(b)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
7.	Are the batteries or containers of batteries labeled with the words "Universal Waste - Batteries" or "Waste Battery(ies)" or "Used Battery(ies)"? [3745-273-14(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

UNIVERSAL WASTE LAMPS

8.	Does the SQUWH 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? [3745-273-13(D)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
9.	Are lamps that show evidence of breakage, leakage or damage that could cause a release of mercury or hazardous constituents into the environment immediately cleaned up? Are they placed into a container that is closed, structurally sound, compatible with the contents of the lamps, and lack evidence of leakage, spillage or damage that could cause leakage or releases of mercury or hazardous waste constituents to the environment? [3745-273-13(D)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

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.

10.	Are the lamps or containers or packages of lamps labeled with the words "Universal Waste - Lamp(s)" or "Waste Lamp(s)" or "Used Lamp(s)"? [3745-273-14(E)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
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ACCUMULATION TIME		
11.	Is the waste accumulated for less than one year? [3745-273-15(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) [3745-273-15(B)] (this change makes it like the LQUWH checklist)	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>		
12.	Is the handler able to demonstrate the length of time the universal waste has been accumulated? [3745-273-15(C)] If yes, describe below: All are shipped when shipments are done and records of shipments are kept.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
EMPLOYEE TRAINING		
13.	Are employees who handle or have the responsibility for managing universal waste informed of waste handling/emergency procedures, relative to their responsibilities? [3745-273-16]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
RESPONSE TO RELEASES		
14.	Are releases of universal waste and other residues immediately contained? [3745-273-17(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
15.	Is the material released characterized? [3745-273-17(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
16.	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) [3745-273-17(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
OFF-SITE SHIPMENTS		
<i>NOTE: If a SQUWH self-transport waste, then the handler must comply with the Universal Waste transporter requirements.</i>		
17.	Are universal wastes sent to either another handler, destination facility or foreign destination? [3745-273-18(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
18.	Is the handler aware of DOT requirements for packaging and shipping? If no, make aware of 49 CFR 171-180.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
19.	Prior to shipping universal waste off-site, does the originating handler ensure that the receiver agrees to receive the shipment? [3745-273-18(D)] (this change makes it like the LQUWH checklist)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
20.	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 the shipment was sent? [3745-273-18(E)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
21.	If a handler rejects a partial or full load from another handler, does the receiving handler contact the originating handler and discuss and do <u>one of the following</u> :	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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)? [3745-273-18(F)(2)] (this change makes it like the LQUWH checklist)	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

22.	If the handler received a shipment of hazardous waste that was not a universal waste, did the SQUWH immediately notify Ohio EPA? [3745-273-18(G)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
EXPORTS		
23.	Is waste being sent to a foreign destination? If so:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
a.	Does the small quantity handler comply with primary exporter requirements in OAC rules 3745-52-53, 3745-52-56, and 3745-52-57? [3745-273-20(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input 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? [3745-273-20(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? [3745-273-20(C)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

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

GENERAL REQUIREMENTS

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|----|--|--|
| 1. | If LDRs do not apply, does the generator have a statement that lists how the HW was generated, why LDRs don't apply and where the HW went? [3745-270-07 (A)(7)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| 2. | Did the generator determine if the HW/soil must be treated to meet the LDR treatment standard prior to disposal? Generator knowledge or testing may be used. [3745-270-07(A)(1)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |

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

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| 3. | Does the generator have documentation of how he determined whether the HW/soil meets or does not meet the LDR treatment standard in 2, above? [3745-270-07(A)(6)(a) or 3745-270-07(A)(6)(b)] | Yes <input 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.

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|----|---|--|
| 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"/> |
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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.

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| 7. | Did the generator treat his HW /soil on-site <u>to meet</u> the LDR treatment standard? | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> |
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NOTE If "Yes" see question #16.

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

NOTIFICATION FORM

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

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

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

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

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

PROHIBITED DILUTION

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

13.	Is the HW a metal-bearing HW?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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NOTE: Generally, metal-bearing HWs contain heavy metals above TCLP levels or were listed due to the presence of metals. A list of the restricted metal-bearing HWs are given in the Appendix to 3745-270-03.

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

	b.	Does the waste carry the D001 code and contain ≥10% TOC?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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	c.	Does the wastewater treatment process include a process to separate/recover the organic phase of the waste?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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NOTE: If the answers to b & c are Ayes@ and Ano@, respectively, waste is improperly being treated by dilution and generator is in violation of [3745-270-03(B) and 3745-270-40(A)(3)].

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

GENERATOR TREATMENT			
16.	Does the generator treat to meet LDRs on-site [3745-270-40(A)]?		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	Did the generator treat his hazardous waste/soil on-site in a tank, container, drip pad or containment building to meet the LDR treatment standard?		Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input 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 type="checkbox"/>
b.	Did the generator use a detailed chemical and physical analysis of the HW/soil in order to develop the WAP? [3745-270-07(A)(5)(a)]		Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<i>NOTE: This is a laboratory analysis but it does not have to be kept by the generator.</i>			
c.	Does the WAP contain all information necessary to treat the HW/soil to the LDR treatment standard? [3745-270-07(A)(5)(a)]		Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
d.	Does the WAP include the testing frequency of the treated HW/soil to demonstrate that the LDR treatment standard is being met? [3745-270-07(A)(5)(a)]		Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
e.	Does the generator keep the WAP on-site? [3745-270-07(A)(5)(b)]		Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
f.	Is the WAP available for the inspector's review during the inspection? [3745-270-07(A)(5)(b)]		Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
NOTIFICATION FORM FOR GENERATOR TREATMENT			
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 through knowledge of the waste, to support this certification that the waste complies with the treatment standards 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 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 type="checkbox"/>
	2.	Description of HW when generated?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	3.	HW code when generated?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	4.	Treatability group when generated?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	5.	Underlying hazardous constituents present when generated?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	iv.	Contain the certification statement as required by 3745-70-07(B)(4)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

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

CESQG: ≤100Kg. (Approximately 25-30 gallons) of waste in a calendar month or < 1 Kg. of acutely hazardous waste.
 SQG: Between 100 and 1,000 Kg. (About 25 to under 300 gallons) of waste in a calendar month.
 LQG: ≥ 1,000 Kg. (~300 gallons) of waste in a calendar month or ≥1 Kg. of acutely hazardous waste in a calendar month.
 NOTE: To convert from gallons to pounds: Amount in gallons x Specific Gravity x 8.345 = Amounts in pounds.

Safety Equipment Used:

GENERAL REQUIREMENTS

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

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

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

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

NOTE: Complete appropriate checklist for each unit.

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

11.	Does the generator export hazardous waste? If so:	Yes <input 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 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 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 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 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 type="checkbox"/>
MANIFEST REQUIREMENTS		
12.	Have all hazardous wastes shipped off-site been accompanied by a manifest? (U.S. EPA Form 8700-22) [3745-52-20(A)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
13.	Have items (1) through (20) of each manifest been completed? [3745-52-20(A)(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)]		
14.	Does each manifest designate at least one facility which is permitted to handle the waste? [3745-52-20(B)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
NOTE: The generator may designate on the manifest one alternate facility to handle the waste in the event of an emergency which prevents the delivery of waste to the primary designated facility. [3745-52-20(C)].		
15.	If the transporter was unable to deliver a shipment of hazardous waste to the designated facility did the generator designate an alternate TSD facility or give the transporter instructions to return the waste? [3745-52-20(D)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
16.	Have the manifests been signed by the generator and initial transporter? [3745-52-23(A)(1) & (2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
NOTE: Remind the generator that the certification statement they signed indicates: 1) they have properly prepared the shipment for transportation and 2) they have a program in place to reduce the volume and toxicity waste they generate.		
17.	If the generator did not receive a return copy of each completed manifest within 35 days of the waste being accepted by the transporter did the generator contact the transporter and/or TSD facility to check on the status of the waste? [3745-52-42(A)(1)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
18.	If the generator has not received the manifest within 45 days, did the generator file an exception report with Ohio EPA? [3745-52-42(A)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
19.	Are signed copies of all manifests and any exception reports being retained for at least three years? [3745-52-40]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
NOTE: Waste generated at one location and transported along a publicly accessible road for temporary consolidated storage or treatment on a contiguous property also owned by the same person is not considered "on-site" and manifesting and transporter requirements must be met. To transport "along" a public right-of-way the destination facility has to act as a transfer facility or have a permit because this is considered to be "off-site." For additional information see the definition of "on-site" in OAC rule 3745-50-10.		
PERSONNEL TRAINING did not review this		
20.	Does the generator have a training program which teaches facility personnel hazardous waste management procedures (including contingency plan implementation) relevant to their positions? [3745-65-16(A)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
21.	Does the personnel training program, at a minimum, include instructions to ensure that facility personnel are able to respond effectively to emergencies involving hazardous waste by familiarizing them with emergency procedures, emergency equipment and emergency systems (where applicable)? [3745-65-16(A)(3)(a-f)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
22.	Is the personnel training program directed by a person trained in hazardous waste management procedures? [3745-65-16(A)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
23.	Do new employees receive training within six months after the date of hire (or assignment to a new position)? [3745-65-16(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
24.	Does the generator provide annual refresher training to employees? [3745-65-16(C)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
25.	Does the generator keep records and documentation of:	
a.	Job titles? [3745-65-16D(1)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Job descriptions? [3745-65-16D(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

	c.	Type and amount of training given to each person? [3745-65-16D(3)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d.	Completed training or job experience required? [3745-65-16D(4)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
26.		Are training records for current personnel kept until closure of the facility and are training records for former employees kept for at least three years from the date the employee last worked at the facility? [3745-65-16(E)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

NOTE: The following section can be used by the inspector to document that all personnel who are involved with hazardous waste management have been trained. The employees who need training (written and/or on-the-job) may include the following: environmental coordinators, drum handlers, emergency coordinators, personnel who conduct hazardous waste inspections, emergency response teams, personnel who prepare manifest, etc.

Job Performed	Name of Employee	Date Trained

CONTINGENCY PLAN did not review this

27.		Does the owner/operator have a contingency plan to minimize hazards to human health or the environment from fires, explosions or any unplanned release of hazardous waste? [3745-65-51(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
28.		Does the plan describe the following:	
	a.	Actions to be taken in response to fires, explosions or any unplanned release of hazardous waste? [3745-65-52(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b.	Arrangements with emergency authorities? [3745-65-52(C)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c.	A current list of names, addresses and telephone numbers (office and home) of all persons qualified to act as emergency coordinator? [3745-65-52(D)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d.	A list of all emergency equipment, including: location, a physical description and brief outline of capabilities? [3745-65-52(E)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	e.	An evacuation plan for facility personnel where there is possibility that evacuation may be necessary? [3745-65-52(F)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

NOTE: If the facility already has a "Spill Prevention, Control and Countermeasures Plan" under CFR Part 112 or 40 CFR Part 1510, or some other emergency plan, the facility can amend that plan to incorporate hazardous waste management provisions that are sufficient to comply with OAC requirements. [3745-65-52(B)]

29.		Is a copy of the plan (plus revisions) kept on-site and been given to all emergency authorities that may be requested to provide emergency services? [3745-65-53 (A) & (B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
30.		Has the generator revised the plan in response to rule changes, facility, equipment and personnel changes, or failure of the plan? [3745-65-54]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
31.		Is an emergency coordinator available at all times (on-site or on-call)? [3745-65-55]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

NOTE: The emergency coordinator shall be thoroughly familiar with: (a) all aspects of the facility's contingency plan; (b) all operations and activities at the facility; (c) the location and characteristics of waste handled; (d) the location of all records within the facility; (e) facility layout; and (f) shall have the authority to commit the resources needed to implement provisions of the contingency plan.

EMERGENCY PROCEDURES

32.		Has there been a fire, explosion or release of hazardous waste or hazardous waste constituents since the last inspection? If so:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	a.	Was the contingency plan implemented? [3745-65-51(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b.	Did the facility follow the emergency procedures in 3745-65-56(A) through (H)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c.	Did the facility submit a report to the Director within 15 days of the incident as required by 3745-65-56(J)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

NOTE: OAC 3745-65-51(b) requires that the contingency plan be implemented immediately whenever there is a fire, explosion, or release of hazardous waste or hazardous waste constituents, which could threaten human health and the environment.

PREPAREDNESS AND PREVENTION

33.	Is the facility operated to minimize the possibility of fire, explosion, or any unplanned release of hazardous waste? [3745-65-31]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
34.	Does the generator have the following equipment at the facility, if it is required due to actual hazards associated with the waste:	
a.	Internal communications or alarm system? [3745-65-32(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Emergency communication device? [3745-65-32(B)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Portable fire control, spill control and decon equipment? [3745-65-32(C)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
d.	Water of adequate volume/pressure per documentation or facility rep? [3745-65-32(D)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

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

35.	Is emergency equipment tested (inspected) as necessary to ensure its proper operation in time of emergency? [3745-65-33]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
36.	Are emergency equipment tests (inspections) recorded in a log or summary? [3745-65-33]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
37.	Do personnel have immediate access to an internal alarm or emergency communication device when handling hazardous waste (unless the device is not required under 3745-65-32)? [3745-65-34(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
38.	If there is only one employee on the premises, is there immediate access to a device (eg., phone, hand held two-way radio) capable of summoning external emergency assistance (unless not required under 3745-65-32)? [3745-65-34(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
39.	Is adequate aisle space provided for unobstructed movement of emergency or spill control equipment? [3745-65-35]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
40.	Has the generator attempted to familiarize emergency authorities with possible hazards and facility layouts? [3745-65-37(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
41.	Where authorities have declined to enter into arrangements or agreements, has the generator documented such a refusal? [3745-65-37(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

SATELLITE ACCUMULATION AREA REQUIREMENTS

42.	Does the generator ensure that satellite accumulation area(s):	
a.	Are at or near a point of generation? [3745-52-34(C)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Are under the control of the operator of the process generating the waste? [3745-52-34(C)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Do not exceed a total of 55 gallons of hazardous waste per waste stream? [3745-52-34(C)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
d.	Do not exceed one quart of acutely hazardous waste at any one time? [3745-52-34(C)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
e.	Containers are closed, in good condition and compatible with wastes stored in them? [3745-52-34(C)(1)(a)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
f.	Containers are marked with words "Hazardous Waste" or other words identifying the contents? [3745-52-34(C)(1)(b)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
43.	Is the generator accumulating hazardous waste(s) in excess of the amounts listed in the preceding question? If so:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
a.	Did the generator comply with 3745-52-34(A)(1) through (4) or other applicable generator requirements within three days? [3745-52-34(C)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input 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 type="checkbox"/>
<p><i>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.</i></p>			
USE AND MANAGEMENT OF CONTAINERS IN <90 DAY ACCUMULATION AREAS			
44.		Has the generator marked containers with the words "Hazardous Waste?" [3745-52-34(A)(3)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
45.		Is the accumulation date on each container? [3745-52-34(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
46.		Are hazardous wastes stored in containers which are:	
	a.	Closed (except when adding/removing wastes)? [3745-66-73(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b.	In good condition? [3745-66-71]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c.	Compatible with wastes stored in them? [3745-66-72]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d.	Handled in a manner which prevents rupture/leakage? [3745-66-73(B)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<p><i>NOTE: Record location on process summary sheets, photograph the area, and record on facility map.</i></p>			
47.		Is the container accumulation areas(s) inspected weekly? [3745-66-74] Per ORC§1.44(A) "Week" means 7 consecutive days.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	a.	Are inspections recorded in a log or summary? [3745-66-74]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
48.		Are containers of ignitable or reactive wastes located at least 50 feet (15 meters) from the facility's property line? [3745-66-76]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
49.		Are containers of incompatible wastes stored separately from each other by means of a dike, berm, wall or other device? [3745-66-77(C)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
50.		If the generator places incompatible wastes, or incompatible wastes and materials in the same container, is it done in accordance with 3745-65-17(B)? [3745-66-77(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
51.		If the generator places hazardous waste in an unwashed container that previously held an incompatible waste, is it done in accordance with 3745-65-17(B)? [3745-66-77(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<p><i>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.</i></p>			
52.		If the generator has closed a <90 day accumulation area does the closure appear to have met the closure performance standard of 3745- 66-11? [3745-52-34(A)(1)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
<p><i>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]</i></p>			
PRE-TRANSPORT REQUIREMENTS			
53.		Does the generator package/label its hazardous waste in accordance with the applicable DOT regulations? [3745-52-30, 3745-52-31 and 3745-52-32(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
54.		Does each container ≤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"/>
55.		Before off-site transportation, does the generator placard or offer the appropriate DOT placards to the initial transporter? [3745-52-33]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

**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 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 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).

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 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 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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input 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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input 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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input 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 type="checkbox"/>
b.	Contained the release?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input 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 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 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 type="checkbox"/> N/A <input type="checkbox"/>

	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 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 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#? [3745-279-24]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
12.		If the generator self-transported 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 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 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 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 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 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.