



State of Ohio Environmental Protection Agency

Northeast District Office

2110 East Aurora Road  
Twinsburg, OH 44087-1924

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

Ted Strickland, Governor  
Lee Fisher, Lieutenant Governor  
Laura H. Powell, Acting Director

January 10, 2007

RE: 9150 GROUP FACILITY  
DARKO, INC. (CESQG)  
SUMMIT COUNTY  
OHD 050 387 802  
UNPERMITTED TSDF

Mr. Bob Rankin  
Darko, Inc.  
9150 Valley View Rd.  
Macedonia, OH 44056

**RE: DARKO CESQG, HAZARDOUS WASTE NOTICE OF VIOLATIONS**

Dear Mr. Bob Rankin:

The Ohio EPA Division of Hazardous Waste Management (DHWM) conducts an annual compliance inspection of the 9150 Group facility (Facility) located at 9150 Valley View Road in Macedonia. I conducted the recent inspection with Kris Coder of DHWM on December 15, 2006. Mr. Frank Libby represented the Facility. Chuck, the Darko, Inc. foreman, represented the Darko, Inc. portion of operations. Darko, Inc. was inspected as a conditionally exempt small quantity generator (CESQG).

This letter lists the current understanding of violations at the Facility that pertain to the Darko operations. The Facility inspection is conducted annually as a result of the Facility being subject to the closure and post-closure care requirements in rules 3745-55-10 to 3745-55-20 or 3745-66-10 to 3745-66-20 of the Ohio Administrative Code (OAC).

**VIOLATIONS**

- 1) **Waste Evaluation, OAC 3745-52-11:** Any person who generates a waste must evaluate the waste to determine if the waste is a hazardous waste in accordance with the criteria set forth in OAC Chapter 3745-51. Darko failed to evaluate the following waste streams:
  - a) **Spent Florescent lamps** - Darko reported that spent fluorescent lamps are disposed in the solid waste stream. The lamps generated at the time of the site visit appeared to be a hazardous waste due to mercury content.

**To abate this violation,** Darko must cease disposal of all lamp types to solid waste that could be considered hazardous waste. Darko must notify OhioEPA in writing how it intends to manage spent lamps and provide photographs demonstrating proper management. Lamps may be managed as a universal waste and recycled; characterized as nonhazardous through analytical testing or manufacturer's data; or managed as a hazardous waste.

Please refer to the enclosed Ohio EPA Fact Sheet "Universal Waste Rules for Handlers of Lamps":

[http://www.epa.state.oh.us/dhwm/pdf/Universal\\_Waste\\_Rules\\_for\\_Handlers\\_of\\_Lamps.pdf](http://www.epa.state.oh.us/dhwm/pdf/Universal_Waste_Rules_for_Handlers_of_Lamps.pdf),

Also enclosed is a list of lamp recyclers:

[http://www.cuyahogaswd.org/business/guide\\_lamps.shtml](http://www.cuyahogaswd.org/business/guide_lamps.shtml),

<http://www.cuyahogaswd.org/business/recdirectory.asp> and

[http://www.epa.state.oh.us/dhwm/pdf/fluorescent\\_bulb\\_list.pdf](http://www.epa.state.oh.us/dhwm/pdf/fluorescent_bulb_list.pdf).

- b) **Aerosol cans** - Darko reported that aerosol can wastes are disposed with solid wastes. Several aerosol cans used at Darko were observed to contain contents that would be considered characteristic and/or listed hazardous waste.

**To abate this violation**, provide a statement of procedure that indicates how aerosol cans and other small containers of fluid will be evaluated and managed. The following links can assist you in making a proper waste evaluation:

<http://www.epa.state.oh.us/ocapp/sb/publications/identifyingwaste.pdf>

<http://www.epa.state.oh.us/dhwm/pdf/NotifierWinter05.pdf>. These documents are also enclosed.

Aerosol cans and other small containers that are used completely and the container is empty per OAC 3745-51-07(B)(2) the container may be disposed as a solid waste. Empty metal containers may also be crushed and recycled with other scrap metal. To insure cans are empty prior to disposal you may obtain a can crushing system that attaches to and captures residuals for proper disposal. Fluids of any kind must not be disposed into solid waste containers. OhioEPA understands that recent Darko process changes has eliminated a portion of aerosol can use. OhioEPA requires that Darko provide this response to insure that all incidental spent small containers and aerosols are properly managed and disposed.

Please submit the requested documentation, to my attention, within **30 days** of receipt of this letter. Enclosed is a CESQG checklist that was completed for this inspection. Also enclosed is a Site Identification form. Please complete and return this form. Should you have any questions, please feel free to contact me at (330) 963-1146.

Sincerely,

*Ron Shadrach*

Ronald J. Shadrach  
Environmental Specialist  
Division of Hazardous Waste Management

RJS:ddw

Enclosure

ec: Frank Popotnik, DHWM, NEDO  
Frank Libby, site contact  
Larry Albright, Sr.  
cc: Ralph McGinnis, DHWM, CO  
Brian Ball, EES, AGO  
Isaac Wilder, DHWM, CO

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

E-mail this completed form to <a href="mailto:tammy.mcconnell@epa.state.oh.us">tammy.mcconnell@epa.state.oh.us</a> or mail it to Tammy McConnell, Central Office	<b>Of Environmental Protection Agency</b> <b>RCRA SUBTITLE C SITE IDENTIFICATION/VERIFICATION FORM</b>		For Ohio EPA use only																		
2. Site EPA ID No.	<b>EPA ID Number:</b> OHD 050 387 802																				
3. Site Name	<b>Name:</b> Darko Inc. (building tenant)		<b>Website (optional):</b>																		
4. Site Location Information	<b>Street Address:</b> 9150 Valley View Rd.																				
	<b>City, Town, or Village:</b> Macedonia	<b>State:</b> OH																			
	<b>County Name:</b> Summit	<b>Zip Code:</b> 44056																			
5. Site Land Type (check only one)	<table border="1" style="width: 100%; text-align: center;"> <tr> <td>Private</td> <td>County</td> <td>District</td> <td>Federal</td> <td>Indian</td> <td>Municipal</td> <td>State</td> <td>Other</td> </tr> <tr> <td>XX</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>			Private	County	District	Federal	Indian	Municipal	State	Other	XX									
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6. NAICS code(s) <a href="http://www.census.gov/epcd/www/naics.html">www.census.gov/epcd/www/naics.html</a>	<b>A.</b>		<b>B.</b>																		
<b>C.</b>		<b>D.</b>																			
7. Facility Representative:  Additional names can be recorded in number 12.  Only provide address information if it is different than the site address.	<b>First Name:</b> Bob		<b>MI:</b>	<b>Last Name:</b> Rankin																	
	<b>Phone Number:</b>		<b>Phone Number Extension:</b>																		
	<b>E-Mail Address:</b>																				
	<b>Fax Number:</b>		<b>Fax Number Extension:</b>																		
	<b>Street or P.O. Box:</b>																				
	<b>City, Town or Village:</b>																				
	<b>State:</b>		<b>Country:</b>		<b>Zip Code:</b>																
8. 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.	<b>A. Name of Site's Legal Owner:</b> 9150 Group L.P.		<b>Date Became Owner (mm/dd/yyyy):</b>																		
	<b>Owner Type:</b> Mark with an X		<table border="1" style="width: 100%; text-align: center;"> <tr> <td>Private</td> <td>County</td> <td>District</td> <td>Federal</td> <td>Indian</td> <td>Municipal</td> <td>State</td> <td>Other</td> </tr> <tr> <td>XX</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>			Private	County	District	Federal	Indian	Municipal	State	Other	XX							
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	<b>City, Town, or Village:</b>		<b>Owner Phone #:</b>																		
	<b>State:</b>		<b>Country:</b>		<b>Zip Code:</b>																
	<b>B. Name of Site's Operator:</b>		<b>Date Became Operator (mm/dd/yyyy):</b>																		
	<b>Operator Type:</b> Mark with an X		<table border="1" style="width: 100%; text-align: center;"> <tr> <td>Private</td> <td>County</td> <td>District</td> <td>Federal</td> <td>Indian</td> <td>Municipal</td> <td>State</td> <td>Other</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>			Private	County	District	Federal	Indian	Municipal	State	Other								
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<b>City, Town, or Village:</b>		<b>Operator Phone #:</b>																			
<b>State:</b>		<b>Country:</b>		<b>Zip Code:</b>																	
9. Violations Cited?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No																		
10. Type of Regulated Waste Activity (Mark "X" in all of the appropriate boxes.) <input type="checkbox"/> Not Regulated																					

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

<b>A. Hazardous Waste Activities</b>																	
(choose only one of the following categories)																	
<input type="checkbox"/>	<b>UNKNOWN:</b> Cited for violation of 3745-52-11	<input type="checkbox"/> 3. Treater, Storer or Disposer of Hazardous Waste															
<input type="checkbox"/>	a. Large Quantity Generator (LQG):	<input type="checkbox"/> 4. Recycler of Hazardous Waste															
<input type="checkbox"/>	b. Small Quantity Generator (SQG)	<input type="checkbox"/> 5. Exempt Boiler and/or Industrial Furnace															
<input checked="" type="checkbox"/>	c. Conditionally Exempt Small Quantity Generator	<input type="checkbox"/> a. Small Quantity On-site Burner Exemption															
<input type="checkbox"/>	d. United States Importer of Hazardous Waste	<input type="checkbox"/> b. Smelting, Melting, Refining Furnace Exemption															
<input type="checkbox"/>	e. Mixed Waste (hazardous and radioactive) Generator	<input type="checkbox"/> 6. Underground Injection Control Facility															
<b>B. Universal Waste Activities</b>		<b>C. Used Oil Activities</b>															
<input checked="" type="checkbox"/>	1. Small Quantity Handler of Universal Waste (Indicate types of universal waste generated and/or accumulated (check all boxes that apply):	<input type="checkbox"/> 1. Used Oil Generator															
<input type="checkbox"/>	2. Large Quantity Handler of Universal Waste (accumulates 5,000 kg or more).	<input type="checkbox"/> 2. Used Oil Transporter Indicate Type(s) of Activity(ies)															
<input type="checkbox"/>	3. Destination Facility for Universal Waste (Check all boxes below that apply for each of the three types of facilities above.)	<input type="checkbox"/> Transporter															
		<input type="checkbox"/> Transfer Facility															
		<input type="checkbox"/> 3. Used Oil Processor and/or Re-refiner Indicate Type(s) of Activity(ies)															
		<input type="checkbox"/> Processor															
		<input type="checkbox"/> Re-refiner															
		<input type="checkbox"/> 4. Off-Specification Used Oil Burner															
		<input type="checkbox"/> 5. Used Oil Fuel Marketer - Indicate Type(s) of Activity(ies)															
		<input type="checkbox"/> a. Marketer Who Directs Shipment of Off- Specification Oil															
		<input type="checkbox"/> b. Used Oil to Off-Specification Used Oil Burner															
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C. Thermostats	<input type="checkbox"/>	<input type="checkbox"/>															
D. Lamps	<input checked="" type="checkbox"/>	<input type="checkbox"/>															
<p>11. Waste Codes for Federally Regulated Hazardous Wastes. Please list the codes for the federally regulated hazardous waste handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more space is needed. If there are more than 7 waste codes and they are the same as listed in the most recent RCRAinfo source record, you do not need to list them all. Instead just indicate the date of the most recent source record.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>D001</td> <td>D008 (UW)?</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>			D001	D008 (UW)?													
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<p>12. Comments: Use this area to describe whether the inspection was announced, whether the waste is stored in tanks or containers, etc.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>N</td> <td>Announced ?</td> <td>Additional Facility Representatives:</td> <td>Chuck (Darko), Frank Libby (9150 Group)</td> </tr> <tr> <td>N</td> <td>Tanks?</td> <td colspan="2" rowspan="2">Other comments:</td> </tr> <tr> <td>N</td> <td>Containers?</td> </tr> </table>			N	Announced ?	Additional Facility Representatives:	Chuck (Darko), Frank Libby (9150 Group)	N	Tanks?	Other comments:		N	Containers?					
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<p>13. Name of Inspector(s) Name of Inspector(s) Date of Inspection/ Time (mm-dd-yyyy) (HH:MM)</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>Ron Shadrach, DHWM, NEDO</td> <td>Kris Coder, DHWM, NEDO</td> <td>(12-15-2006) (09:00)</td> </tr> </table>			Ron Shadrach, DHWM, NEDO	Kris Coder, DHWM, NEDO	(12-15-2006) (09:00)												
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<p>14. OPTIONAL CERTIFICATION. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>Signature of owner, operator, or an authorized representative</td> <td>Name and Title (Print)</td> <td>Date (mm-dd-yyyy)</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>			Signature of owner, operator, or an authorized representative	Name and Title (Print)	Date (mm-dd-yyyy)												
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Darko  
9150 Valley View Rd.  
Macedonia, Ohio 44058

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

CESQG: <100Kg. (Approximately 25-30 gallons) of waste in a calendar month.

SQG: Between 100 and 1,000 Kg. (About 25 to under 300 gallons) of waste in a calendar month.

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

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

Safety Equipment Used:

**WASTE EVALUATION**

1. Have all wastes generated at the facility been adequately evaluated? [3745-52-11] Yes  No  N/A

**GENERATOR CLASSIFICATION**

2. Does the generator produce <100 kg. of hazardous waste per month? [conditionally exempt small quantity generator ("CESQG")] Yes  No  N/A

*NOTE: If quantities of hazardous waste accumulated on-site at any one time exceed 1,000 Kg. - or the generator produces between 100 and 1,000 Kg. of hazardous waste per month, it is operating as a Small Quantity Generator ("SQG"). If so, complete the Small Quantity Generator Requirements checklist.*

**OFF-SITE SHIPMENT OF HAZARDOUS WASTE**

3. Does the CESQG ensure delivery of hazardous waste(s) to an off-site permitted TSD? [3734.02(F)] Yes  No  N/A

**TREATMENT OF HAZARDOUS WASTE**

4. Does the generator treat hazardous waste in a :
- a. Container that meets 3745-66-70 to 3745-66-77? Yes  No  N/A
  - b. Tank that meets 3745-66-90 to 3745-66-101 except 3745-66-97(C) Yes  No  N/A
  - c. Drip pads that meet 3745-69-40 to 3745-69-45? Yes  No  N/A
  - d. Containment building that meets 3745-256-100 to 3745-256-102? Yes  No  N/A

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

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

**REMARKS**

1. Lamps need properly managed and disposed (fluorescent and HID lamps). Some fluorescents have been replaced with TCLP compliant but not all.
2. Aerosol cans of paint and adhesive are generated and onsite. Need to ensure proper disposal of small containers.