



**Environmental
Protection Agency**

Ted Strickland, Governor
Lee Fisher, Lt. Governor
Chris Korleski, Director

Re: Life Touch
OHD987027661
Crawford County
NOV-RTC

August 24, 2010

Ms. Kimberly Barker
Life Touch
1371 State Route 598
P. O. Box 507
Galion, Ohio 44833

Dear Ms. Barker:

Thank you for accompanying me during the August 12, 2010, hazardous waste compliance evaluation inspection (CEI) of Life Touch Church Directory and Portraits (Life Touch) located at 1371 State Route 598, Galion, Ohio. This inspection was conducted to determine Life Touch's compliance with Ohio's hazardous waste laws as found in Chapter 3734. of the Ohio Revised Code (ORC), and Ohio's hazardous waste regulations as adopted under Chapter 3745. of the Ohio Administrative Code (OAC). The inspection included a tour of facility operations and a review of facility paperwork.

Life Touch has not conducted any printing operations at this location since August 2009. Life Touch only does photo developing at this location. At the time of inspection, Ohio EPA considered Life Touch a non-generator of hazardous waste. Life Touch has a photo lab where silver is recovered from the developing process and is recycled through Hallmark. The photo line developer is non-hazardous and is discharged to the sanitary sewer. Life Touch also manages their fluorescent bulbs as universal waste through Crystal Clean.

I found the following violation of Ohio's hazardous waste laws.

1. Universal Waste Storage, OAC Rule 3745-273-13(D)(1)

A small quantity handler of universal waste must manage lamps in a way that prevents releases of any universal waste or component of a universal waste to the environment.

Therefore, a small quantity handler of universal waste must contain any lamp in containers or packages that are structurally sound, adequate to prevent breakage, and compatible with the contents of the lamps. Such containers and packages must remain closed and must lack evidence of leakage, spillage, or damage that could cause leakage under reasonably foreseeable conditions.

Life Touch's universal waste storage area for lamps contained multiple lamps which were not stored in a closed container.

Ms. Kimberly Barker
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On August 13, 2010, Life Touch submitted photo documentation showing that the bulbs were packaged in a closed container. **Therefore, this violation has been abated.**

If you find ways to recycle, reduce, or altogether eliminate the amount of waste your company generates you may be able to reduce treatment and disposal costs. Furthermore, you may possibly reduce your regulatory requirements.

Ohio EPA has helpful information about pollution prevention at the following web address:
<http://www.epa.ohio.gov/ocapp/>.

The Ohio Department of Development's Office of Energy Efficiency may be able to help with energy efficiency issues. Their website is at: <http://www.development.ohio.gov/cdd/oeef/>.

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

Enclosed you will find a copy of the checklists that we completed as a result of the inspection. Please address all correspondence to Amy Heller, Ohio EPA, 347 N. Dunbridge Road, Bowling Green, Ohio 43402.

Should you have any questions, please feel free to call me at (419) 373-3058. You can find copies of the rules and other information on the division's web page at:
<http://www.epa.ohio.gov/dhwm/>

Sincerely,



Amy Heller
Division of Hazardous Waste Management

/cs

Enclosure

pc: Colleen Weaver, DHWM, NWDO
Cindy Lohrbach, DHWM, NWDO
DHWM, NWDO File: Crawford County, General
ec: Amy Heller, DHWM, NWDO

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.

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| Send to Central Office <input type="checkbox"/> | Ohio Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION/VERIFICATION FORM | For Ohio EPA use only |
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Completed verification forms required to be submitted to CO should be e-mailed to kristina.durnell@epa.state.oh.us.

| | | | | | | | | | |
|---|--|--------------------------------------|-------------------------------------|--------------------------------------|---------------------------------------|------------------------------------|---------------------------------------|-----------------------------------|-----------------------------------|
| Site EPA ID No. Site Name | EPA ID Number: OHD987027661 Name: Life Touch Church Directory & Portraits Website: (Optional) | | | | | | | | |
| Site Location Information | Street Address: 1371 St Rt 598 City, Town, or Village: Galion State: OH County Name: Crawford Cty Zip Code: 44833 <table style="width:100%; border: none;"> <tr> <td style="border: none;">Private <input type="checkbox"/></td> <td style="border: none;">County <input type="checkbox"/></td> <td style="border: none;">District <input type="checkbox"/></td> <td style="border: none;">Federal <input type="checkbox"/></td> <td style="border: none;">Indian <input type="checkbox"/></td> <td style="border: none;">Municipal <input type="checkbox"/></td> <td style="border: none;">State <input type="checkbox"/></td> <td style="border: none;">Other <input type="checkbox"/></td> </tr> </table> | 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"/> |
| 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"/> | | |
| Site Land Type (check only one) NAICS code(s) www.census.gov/epcd/www/naics.html | | | | | | | | | |

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| Facility Representative Additional names can be recorded in number 12 Only provide address information if it is different than the site address | First Name: Kimberly MI: Last Name: Barker Phone Number: 419-462-4423 Phone Number Extension: E-Mail Address: Fax Number: Fax Number Extension: Street or P.O. Box: City, Town or Village: State: Zip Code: |
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|---|--|------------------------------------|--------------------------------------|-------------------------------------|--------------------------------------|---------------------------------------|------------------------------------|---------------------------------------|-----------------------------------|-----------------------------------|----------------|-------------------------------------|------------------------------------|--------------------------------------|-------------------------------------|------------------------------------|---------------------------------------|-----------------------------------|-----------------------------------|
| 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: <table style="width:100%; border: none;"> <tr> <td style="border: none;">Owner Type:</td> <td style="border: none;">Private <input type="checkbox"/></td> <td style="border: none;">County <input type="checkbox"/></td> <td style="border: none;">District <input type="checkbox"/></td> <td style="border: none;">Federal <input type="checkbox"/></td> <td style="border: none;">Indian <input type="checkbox"/></td> <td style="border: none;">Municipal <input type="checkbox"/></td> <td style="border: none;">State <input type="checkbox"/></td> <td style="border: none;">Other <input type="checkbox"/></td> </tr> </table> Date Became Owner (mm/dd/yyyy): Street or P.O. Box: City, Town or Village: State: Owner Phone #: Country: Zip Code: Name of Site's Operator: <table style="width:100%; border: none;"> <tr> <td style="border: none;">Operator Type:</td> <td style="border: none;">Private <input type="checkbox"/></td> <td style="border: none;">County <input type="checkbox"/></td> <td style="border: none;">District <input type="checkbox"/></td> <td style="border: none;">Federal <input type="checkbox"/></td> <td style="border: none;">Indian <input type="checkbox"/></td> <td style="border: none;">Municipal <input type="checkbox"/></td> <td style="border: none;">State <input type="checkbox"/></td> <td style="border: none;">Other <input type="checkbox"/></td> </tr> </table> Date Became Operator (mm/dd/yyyy): Street or P.O. Box: City, Town or Village: State: Operator Phone #: Country: Zip Code: | Owner 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"/> | 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"/> |
| Owner 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"/> | | | | | | | | | | | |
| 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"/> | | | | | | | | | | | |

VIOLATIONS CITED? Yes No

| | |
|---|---|
| TYPE OF HANDLER - MARK "X" AS APPROPRIATE | |
| <input checked="" type="checkbox"/> Not a HW Generator <input type="checkbox"/> UNKNOWN: Cited for violation of 3745-52-11 | <input type="checkbox"/> Large Quantity Generator (LQG) <input type="checkbox"/> Small Quantity Generator (SQG) <input 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 |

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| TYPE OF REGULATED WASTE ACTIVITY (MARK "X" IN ALL OF THE APPROPRIATE BOXES) | |
| <input type="checkbox"/> Recycler of Hazardous Waste <input type="checkbox"/> Underground Injection Control Facility <input type="checkbox"/> Hazardous Waste Transporter <input type="checkbox"/> Treater, Storer or Disposer of Hazardous Waste | <input type="checkbox"/> Exempt Boiler and/or Industrial Furnace <input type="checkbox"/> Small Quantity On-Site Burner Exemption <input type="checkbox"/> Smelting, Melting, Refining Furnace Exemption |

UNIVERSAL WASTE ACTIVITIES (INDICATE TYPES OF UNIVERSAL WASTE MANAGED

(CHECK ALL BOXES THAT APPLY)

Small Quantity Handler of Universal Waste

Destination Facility for Universal Waste

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

Batteries

Pesticides

Mercury containing equipment

Lamps

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

Used Oil Generator

Used Oil Transporter

Used Oil Transfer Facility

Used Oil Processor

Used Oil Re-refiner

Off-Specification Used Oil Burner

Used Oil Fuel Marketer Who Directs Shipment of Off-Spec. Oil

Used Oil Fuel Marketer to Off-Specification Used Oil Burner

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

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

Announced Yes No

Additional Facility Representatives:

Tanks Yes No

Containers Yes No

Name of Inspector(s)

Name of Inspector(s)

Amy Heller

Date of Inspection/Time
(mm/dd/yyyy) (hh:mm)
08/12/2010

Comments:

PROCESS, WASTE, P2 SUMMARY SHEET

| Facility Name: Life Touch | | Facility Type: Non-Generator | | Date of Inspection: 8/12/2010 | | EPA ID #: OHD987027661 | |
|--|---|--|---|---|-----------------------|----------------------------------|--|
| <i>Waste Generated</i> | | | <i>On- or Off-Site Management</i> | | <i>P2 Activities</i> | | |
| Process/Activity Generating Waste <small>(e.g. plating bath, machining, baghouse, painting, general maintenance, etc)</small> | Waste Description <small>(e.g. sludge, solvent, ash, used oil, spent lamps, etc.) and EPA Waste Code, if applic.</small> | QTY Generated per Month, Type of Accumulation <small>(container, tank, etc) and location of waste accumulation area</small> | Type of On-Site Treatment <small>(recycle, wwt, etc)</small> | Name, state, and type of activity occurring at the off-site facility. | Current P2 Activities | P2 Opportunities | |
| 1 | Developing process Recycling silver | varies | | Hallmark | | | |
| 2 | Spent Fluorescent bulbs [redacted] universal waste | varies | | Crystal Clean | | | |
| 3 | | | | | | | |
| 4 | | | | | | | |
| 5 | | | | | | | |

SMALL QUANTITY UNIVERSAL WASTE HANDLER REQUIREMENTS - BATTERIES AND LAMPS

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

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

PROHIBITIONS

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

WASTE MANAGEMENT & LABELING/MARKING

UNIVERSAL WASTE BATTERIES

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

UNIVERSAL WASTE LAMPS

| | | |
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| 8. | Does the SQUWH contain lamps in containers or packages that are structurally sound, adequate to prevent breakage, and are compatible with contents of the lamps? Are containers or packages closed and do they lack evidence of leakage, spillage or damage that could cause leakage? [3745-273-13(D)(1)] | Yes <input type="checkbox"/> No <input checked="" 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? | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |

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

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