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- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mr. W. J. Kendel, Plant Mgr.
 Solvay Advanced Polymers Inc
 P.O. Box 446
 State Route 7 South
 Marietta, OH 45750

2. Article Number

(Transfer from service label)

7007 3020 0001 7884 9590

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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Agent

Addressee

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Certified Mail

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Return Receipt for Merchandise

Insured Mail

C.O.D.

4. Restricted Delivery? (Extra Fee)

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Postage	\$ 1.56
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.66

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 APR 07 201

Sent to: Mr. W. J. Kendel, Solvay Adv Polymers
 Street Apt. No.:
 or PO Box No: P.O. Box 446
 City, State, ZIP+4: Marietta OH 45750

PS Form 3800, August 2006

See Reverse for Instructions



State of Ohio Environmental Protection Agency

Southeast District Office

2195 Front Street
Logan, Ohio 43138

TELE: (740) 385-8501 FAX: (740) 385-6490
www.epa.state.oh.us

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

Certified Mail: 7007 3020 0001 7884 9590

April 6, 2010

**WASHINGTON COUNTY
SOLVAY ADVANCED POLYMERS
DHWM/SEDO
OHD981529688
Permit #04-84-0194**

Mr. W. J. Kandel, Plant Manager
Solvay Advanced Polymers, LLC
P.O. Box 446
State Route 7 South
Marietta, Ohio 45750

**Subject: Ohio EPA Annual Hazardous Waste Inspection Notice of Violation and
Comments on Facility Operations**

Dear Mr. Kandel:

On March 23, 2010, Scott Bergreen and I inspected Solvay Advanced Polymers' (Solvay) facility in Marietta, Ohio to determine Solvay's compliance with their Part B Hazardous Waste Permit and Ohio's hazardous waste laws as found in Chapter 3734 of the Ohio Revised Code (ORC) and Chapter 3745 of the Ohio Administrative Code (OAC). Ohio EPA's site visit included an inspection of company operations and a review of facility records. During the inspection, Solvay was represented by Mark Potochnik and Jean Anderson.

This letter will explain the violations found and other general concerns identified during the inspection.

The following violation of Ohio's hazardous waste laws was identified by the inspection:

- (1) **OAC Rule 3745-273-13(D)(1), Waste Management- Standards For Small Quantity Handlers Of Universal Waste:** 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.

At the time of the inspection, Solvay had two lamp containers that were not closed, an 8-foot cylindrical lamp box and a 4-foot lamp box. During the inspection, Solvay closed both boxes, returning the facility to compliance with this rule.

Comments

- (a) During the inspection of the less than 90 day storage area in Building 92, a pallet of universal waste batteries was observed stacked on top of two pallets of drums containing hazardous waste. To minimize the risk of spills, Ohio EPA recommends that Solvay exercise caution when stacking waste over two pallets high.
- (b) Solvay is no longer using the Methyl Chloride less than 90 day storage area, which was located adjacent to Building 92. Because this area was used for the storage of hazardous waste, it is subject to generator closure. Solvay should consider how this area will be used in the future and determine for the facility the best time to proceed with generator closure.
- (c) During the inspection of the production area, a 55-gallon drum used for recycling solvent was observed. The drum had a flammable label on it but was not labeled to indicate that it contained recycle solvent. Although the drum of solvent being recycled is not regulated as a hazardous waste, Ohio EPA recommends that the drum be labeled to clearly identify its contents. Labeling all drums reduces the risk that incompatible materials will be mixed or that hazardous waste will be added to a material that was otherwise not hazardous.
- (d) During the inspection, four 5-gallon containers of a returned polymer product were observed on a pallet north of Building 3. A discussion with a unit manager indicated that there was a possibility that the material might be put back into the process rather than disposed of as a waste. Ohio EPA requests that, **within 30 days of the date of this letter**, you follow up on what will be done with this material and respond back with information on how the material is (or will be) ultimately managed.
- (e) During the inspection of the compounding area, a 55-gallon drum for satellite accumulation of spent propane cylinders was observed. The drum contained only one cylinder but was dated 3/9/10. Satellite drums are not required to be dated until the waste volume exceeds 55 gallons. Once the waste exceeds 55 gallons, the container(s) must be removed to a hazardous waste storage area within three days. To avoid the appearance of a violation for storing greater than 55-gallons beyond the three day time limit, Solvay should remind their workers not to date satellite drums until they are full.
- (f) Solvay's hazardous waste permit renewal application is due February 8, 2011. Solvay should submit any permit modifications that are needed, and have them approved, prior to preparing the renewal application. A method that has worked well for other permitted facilities is to go through the permit a section at a time and

identify any modifications needed. A draft copy of the section is then shown to Ohio EPA so that the modifications can be discussed in draft format before the actual permit modification(s) are officially submitted.

- (g) During our inspection, we also discussed three other outstanding permit matters:
- Solvay is still working on evaluating if the wells used as background wells are representative of background;
 - Solvay is in the process of developing protection standards for the metals recently added to the ground water monitoring list; Ohio EPA will discuss with Solvay whether background levels can be used to develop the protection standards; and
 - Solvay and Ohio EPA need to come to an agreement on capping the Former Equalization Basin.

Enclosed you will find a copy of the checklists completed during the inspection. Should you have any questions, please feel free to call me at (740) 380-5248. You can find copies of the rules and other information on the division's web page at <http://www.epa.state.oh.us/dhwm>. Ohio EPA also has helpful information about pollution prevention at the following web address: <http://www.epa.state.oh.us/opp>.

Sincerely,



Elizabeth A. Herron
Environmental Specialist
Division of Hazardous Waste Management

EH/mlm

Enclosures

NOTICE:

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

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

FACILITY	Solvay Advanced Polymers LLC	OHIO PERMIT #	04-84-0194
STREET ADDRESS	P.O. Box 446 State Route 7 South	US EPA ID#	OHD981529688
CITY, STATE AND ZIP CODE	Marietta, Ohio 45750	PHONE NUMBER	740 373 9242
COUNTY	Washington	INSPECTION DATE	March 23, 2010

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

If So, How Far In Advance?

	NAME	AGENCY/TITLE	PHONE
INSPECTORS	Elizabeth Herron	Ohio EPA Southeast District	740 380 5248
	Scott Bergreen	Ohio EPA Southeast District	740 380 5288
FACILITY REPS	Mark Potochnik	Solvay HSE	740 374 6563
	Jean Anderson	Solvay HSE	740 376 6085

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:	August 7, 2001	LDR Checklist Attached:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Permit Effective Date:	August 7, 2001	Used Oil Checklist Attached:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Permit Expiration Date:	August 7, 2011	Generator Checklist Attached:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

AUTHORIZED ACTIVITIES

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

Post-Closure Care

Corrective Action

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WASTE ACTIVITIES SUMMARY

Facility Name: Solvay Advanced Polymers **FacilityType:** LQG/TSD **Date of Inspection:** 03/23/10 **EPA ID #** OHD981529688

Description of Waste				Waste Management			
Process Generating Waste	Waste Generated	EPA Waste Code	QTY Generated per Month <small>(average based on 2009 totals, unless otherwise noted)</small>	Type of Accumulation/ Storage	Waste Location	Name, state, of TSD	Method of Waste Management
Radel production	Radel kettle bottoms containing chlorobenzene	D001 D021 F002	17.96 tons	55-gallon drums	Building 92	Spring Grove Resource Recovery (OH) Ross Incineration (OH) Clean Harbors (AR)	Fuel blending Incineration Incineration
Radel production (purging at sampling ports)	Radel residue containing chlorobenzene and resins	D001 D021	7.31 tons	55-gallon drums	Building 92	Spring Grove Resource Recovery (OH) Ross Incineration (OH) Clean Harbors (AR)	Storage, bulking, transfer Incineration Incineration
Polysulfone production	Polysulfone kettle bottoms containing chlorobenzene	D001 D007 D010 D021 F002	1.46 tons	55-gallon drums	Building 92	Spring Grove Resource Recovery (OH) Ross Incineration (OH) Clean Harbors (AR)	Fuel blending Incineration Incineration
Polysulfone production	Polysulfone residue containing chlorobenzene and resins	D001 D021	1.73 tons	55-gallon drums	Building 92	Spring Grove Resource Recovery (OH) Ross Incineration (OH) Clean Harbors (AR)	Fuel blending Incineration Incineration
Polysulfone production	Polysulfone tars containing chlorobenzene	D001 D021 F002	0.79 tons	55-gallon drums	Building 92	Spring Grove Resource Recovery (OH) Ross Incineration (OH) Clean Harbors (AR)	Fuel blending Incineration Incineration

Description of Waste				Waste Management			
Process Generating Waste	Waste Generated	EPA Waste Code	QTY Generated per Month <small>(average based on 2009 totals, unless otherwise noted)</small>	Type of Accumulation/ Storage	Waste Location	Name, state, of TSD	Method of Waste Management
Polysulfone and Radel production	Chlorobenzene contaminated wastewaters	D021	27.71 tons	Surface impoundment	Emergency basin	On-site wastewater treatment plant with NPDES discharge	Settling or clarification
Laboratory analytical wastes	Lab glassware, polymer residue and solvents	D001 D021 D022 F002 F003	1.15 tons	55-gallon drums	Behind Building 2 then transferred to Building 92	Spring Grove Resource Recovery (OH) Ross Incineration (OH) Clean Harbors (AR)	Storage, bulking and transfer Incineration Incineration
Polymer production	Waste chlorobenzene (aka MCB)	D001 D021	41 pounds	55-gallon drums	Behind Building 2	Spring Grove Resource Recovery (OH)	Storage, bulking, transfer
Radel Unit – filtration through media of polymer solution	Radel salt residue containing chlorobenzene	D001 D021	96.75 tons total in 2009	Drums or vac box	Permitted storage area at wastewater treatment plant	Clean Harbors (AR) Spring Grove Resource Recovery (OH)	Incineration Storage, bulking, transfer
Radel Unit – air pollution control device collecting methyl chloride used in batch termination	Waste methyl chloride	D001 D021	9.12 tons total in 2009	Isotainer tanker truck	The < 90 day storage area which is located east of Building 92	Clean Harbors (AR)	Incineration

Description of Waste				Waste Management			
Process Generating Waste	Waste Generated	EPA Waste Code	QTY Generated per Month <small>(average based on 2009 totals, unless otherwise noted)</small>	Type of Accumulation/ Storage	Waste Location	Name, state, of TSD	Method of Waste Management
Painting	Waste paint related material	D001	250 pounds total in 2009	55-gallon drums	Building 92	Clean Harbors (AR)	Incineration
Maintenance related activities	Waste aerosols	D001	150 pounds	55-gallon drums	Building 92	Ross Incineration (OH) Clean Harbors (AR)	Incineration Incineration
Parts washers used for maintenance	Ignitable degreaser	D001	208 pounds	55-gallon drums	Building 92	Ross Incineration (OH) Spring Grove Resource Recovery (OH) Clean Harbors (AR)	Incineration Fuel blending Energy Recovery
Lighting	Waste fluorescent bulbs	Universal waste	300 pounds in 2009	Container	Storage trailer	Environmental Recycling in Bowling Green, OH.	Recycling
Equipment maintenance	Waste batteries (lead acid, lithium, NiCad, and alkaline)	Universal waste	1,680 pounds in 2009	Container	Behind Building 2 in the < 90 day storage area	Environmental Recycling in Bowling Green, OH.	Recycling

Description of Waste				Waste Management			
Process Generating Waste	Waste Generated	EPA Waste Code	QTY Generated per Month <small>(average based on 2009 totals, unless otherwise noted)</small>	Type of Accumulation/ Storage	Waste Location	Name, state, of TSD	Method of Waste Management
Clean out of sump at polysulfone unit	Polysulfone polymer residue and salt containing chlorobenzene	D021	15.75 tons total in 2009	55-gallon drums	Building 92 or Permitted storage area at wastewater treatment plant	Clean Harbors (AR)	Incineration
Radel Production	Radel Salt Residue (dry)	D021	2.1 tons total in 2009	55-gallon drums	Building 92	Clean Harbors (TX)	Incineration
Equipment maintenance	Used oil	Non hazardous	13.5 tons in 2009	55-gallon drums	Building 92	Ross Incineration (OH) Clean Harbors (OH)	Incineration or transfer to Chemtron (OH) for fuel blending Storage bulking and/or off-site transfer
Equipment maintenance	Used oil solids	Non hazardous	3.75 tons in 2009	55-gallon drums	Building 92	Ross Incineration (OH) Clean Harbors (OH)	Incineration Storage bulking and/or off-site transfer
Unused product originally intended for use with the thermal oxidizer unit	Corrosion Inhibitor	D001	500 pounds total in 2009	55-gallon drum	Building 92	Spring Grove Resource Recovery (OH)	Storage bulking and/or off-site transfer

<i>Description of Waste</i>				<i>Waste Management</i>			
Process Generating Waste	Waste Generated	EPA Waste Code	QTY Generated per Month <small>(average based on 2009 totals, unless otherwise noted)</small>	Type of Accumulation/ Storage	Waste Location	Name, state, of TSD	Method of Waste Management
Radel unit maintenance	Dowtherm and Chlorobenzene	D018 D021	43.87 tons	55-gallon drums	Building 92	Ross Incineration (OH)	Incineration
Clean out of maintenance storage area	Lab pack of metal testing kit	D001 D002 D007 D009	8 pounds total in 2009	Container	Building 92	Clean Harbors (OH)	Incineration

PROCESS DESCRIPTION

Solvay Advanced Polymers, LLC. produces polysulfone and radel engineering polymers for use in the manufacture of medical devices, food contact uses, electronic devices, chemical process equipment, and automotive applications. The Solvay facility also processes the polymers, amodel and xydar, in their compounding unit. The amodel and xydar are manufactured off-site and processing at Solvay does not generate any hazardous waste.

WASTE MANAGEMENT INFORMATION

Satellite Accumulation Areas

The facility has two satellite accumulation areas associated with the polysulfone unit: polysulfone kettle bottoms within the manufacturing area and polysulfone tars inside the extruder room. The radel (MPPU) unit has satellite areas for the radel residue and radel trash bucket. Throughout the plant there are satellite accumulation areas for waste aerosol cans. Solvay's lab, which is located on the second floor of Building 2, has a satellite accumulation area for lab waste located in the chemical hood.

< 90 Day Storage

Solvay maintains three < 90 day storage areas.

- 1) An outdoor area located against the north side of Building 2 - used mainly for the storage of waste generated by the facility's laboratory.
- 2) Building 92 - a three sided shelter southeast of the radel unit, is Solvay's main storage area for hazardous waste.
- 3) East of Building 92 a cement pad where an isotainer tanker truck was used to store waste methyl chloride from the radel unit. The air pollution control process generating the methyl chloride waste was discontinued in May 2009, so the area is no longer being used for storage but has not yet been closed.

> 90 Day Storage

Solvay maintains a RCRA Part B permitted storage area at their wastewater treatment plant.

Parts Washers

Solvay generates an ignitable waste degreaser from four parts washers. Two parts washers are located in the maintenance area of Building 2, and one parts washer in the compounding maintenance area and one in the wastewater treatment plant maintenance shop. The parts washers are serviced by Safety-Kleen, who containerizes the waste and leaves it for Solvay to manifest off-site for disposal.

REGULATORY HISTORY

Regulatory/Enforcement History

Solvay is a large quantity generator of hazardous waste. The facility has a Part B RCRA permit for > 90 day storage, treatment of hazardous wastewaters in the emergency basin, post-closure care of a closed equalization basin, and corrective action of the wastewater treatment plant area. This permit was last renewed on August 7, 2001, and will expire on August 7, 2011.

Send to Central Office <input type="checkbox"/>	Ohio Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION/VERIFICATION FORM	For Ohio EPA use only
--	---	-----------------------

Completed verification forms required to be submitted to CO should be e-mailed to kristina.durnell@epa.state.oh.us.

Site EPA ID No.	EPA ID Number: OHD981529688									
Site Name	Name: Solvay Advanced Polymers LLC	Website: (Optional)								
Site Location Information	Street Address: 17005 State Route 7									
Site Land Type (check only one)	City, Town, or Village: Marietta	State: OH								
NAICS code(s) www.census.gov/epcd/ww/w/naics.html	County Name: Washington	Zip Code: 45750								
	<table style="width:100%; border: none;"> <tr> <td style="border: none;">Private <input checked="" 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 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"/>	
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	325211									

Facility Representative	First Name: Mark	MI: A	Last Name: Potochnik
Additional names can be recorded in number 12	Title: Senior Environmental Manager		
Only provide address information if it is different than the site address	Phone Number: 740 374-6563		Phone Number Extension:
	E-Mail Address: mark.potochnik@solvay.com		
	Fax Number: 740 374 6565		Fax Number Extension:
	Street or P.O. Box:		
	City, Town or Village:		
	State:		Zip Code:

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: Solvay Advanced Polymers LLC	Date Became Owner (mm/dd/yyyy):														
	<table style="width:100%; border: none;"> <tr> <td style="border: none;">Owner Type:</td> <td style="border: none;">Private <input checked="" 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>	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"/>	<table style="width:100%; border: none;"> <tr> <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>	Federal <input type="checkbox"/>	Indian <input type="checkbox"/>	Municipal <input type="checkbox"/>	State <input type="checkbox"/>	Other <input type="checkbox"/>
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	Street or P.O. Box: 4500 McGinnis Ferry Rd															
	City, Town or Village: Alpharetta															
	State: GA															
	Owner Phone #: 770 772 8200															
	Country: Zip Code:															
	Name of Site's Operator: Solvay Advanced Polymers LLC	Date Became Operator (mm/dd/yyyy):														
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Federal <input type="checkbox"/>	Indian <input type="checkbox"/>	Municipal <input type="checkbox"/>	State <input type="checkbox"/>	Other <input type="checkbox"/>												
	Street or P.O. Box: P.O. Box 446															
	City, Town or Village: Marietta															
	Operator Phone #: 740 373 9242															
	State: OH															
	Country: USA															
	Zip Code: 45750															

VIOLATIONS CITED? Yes No

TYPE OF HANDLER - MARK "X" AS APPROPRIATE

<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"/> Short-Term Generator (generates from a short-term or one-time event and not from on-going processes). <i>Check the box for the applicable generator status and provide a comment.</i>	<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"/> Hazardous Waste Transporter | <input type="checkbox"/> Exempt Boiler and/or Industrial Furnace |
| <input type="checkbox"/> Hazardous Waste Transfer Facility | <input type="checkbox"/> Small Quantity On-Site Burner Exemption |
| <input checked="" type="checkbox"/> Treater, Storer or Disposer of Hazardous Waste | <input type="checkbox"/> Smelting, Melting, Refining Furnace Exemption |
| <input type="checkbox"/> Recycler of Hazardous Waste | <input type="checkbox"/> Underground Injection Control Facility |
| | <input type="checkbox"/> Receives Hazardous Waste from Off-site |

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

- 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: **Jean Anderson**
 Tanks Yes No
 Containers Yes No

Name of Inspector(s)
Elizabeth Herron

Name of Inspector(s)
Scott Bergreen

Date of Inspection/Time
(mm/dd/yyyy) (hh:mm)
03/23/2010 9:30 AM - 3:30 PM

Comments:

Waste codes are the same as those listed on 2009 Hazardous Waste Annual Report (submitted February 2010)

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 checked="" type="checkbox"/>
b.	Has the facility submitted an application for a permit renewal to the director no later than 180 days (which is February 8, 2011) prior to the expiration date of the permit? [Condition A.6]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 (which is August 7) during the term of the permit? [Condition A.26]	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"/>
NOTE: If any of the provisions of the permit have been held invalid the remainder of the permit is not affected by that holding. [Condition A.4.]0		
4.	Has the facility identified any instances of noncompliance with the permit, ORC Chapter 3734, or the rules adopted thereunder, which may endanger human health or the environment? If so:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
a.	Did the facility within two hours of becoming aware of the noncompliance, orally report the following to Ohio EPA's Emergency Response Unit? [Condition A.20(a)]	
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 checked="" type="checkbox"/>
ii.	Information concerning a release or discharge of hazardous waste, fire or explosion at the facility which could threaten the environment or human health outside the facility.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
b.	Did the report include the following information (if such information was available at the time of the oral report): [Condition A.20(b)]	
i.	Name, address and telephone number of the owner/operator?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
ii.	Name, address and telephone number of the facility?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
iii.	Name and quantity of material(s) involved?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
iv.	The extent of injuries, if any?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
v.	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 checked="" type="checkbox"/>
vi.	Estimated quantity and disposition of recovered material that resulted from the incident?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
5.	Did the permittee provide a written report to Ohio EPA's Emergency Response Unit and DHWM within five 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; the period(s) of noncompliance (including exact dates and times)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 checked="" type="checkbox"/>
c.	Steps taken or planned to minimize the impact on human health and the environment and to reduce, eliminate and prevent recurrence of the noncompliance?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 the requirement and the permittee submits a written report within 15 days of the time the permittee became aware of the circumstances. [Condition A.219(c)].		
6.	Has the permittee identified other instances of noncompliance not provided for in Condition A.20 (question #4 above)? If so: [Condition A.22]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	a. Did the permittee report these instances to Ohio EPA, DHWM within a month of the time at which the permittee is aware of the noncompliance? [Condition A.22]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	b. Do the reports provided contain the information set forth in Condition A.20? [Condition A.22]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
7.	Has the permittee expeditiously taken all reasonable steps necessary to minimize or correct any adverse impact on the environment or public health resulting from noncompliance with the permit? [Condition A.8]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 facility provided Ohio EPA with advance notice of such changes? [Condition A.17]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
NOTE: Such notification does not waive the permittee's duty to comply with the permit pursuant to Condition A.5. [Condition A.17]		
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 checked="" 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"/>
<i>Since the last inspection the permit has not been transferred to a new owner.</i>		
	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 checked="" type="checkbox"/>
12.	If the Permittee is subject to a compliance schedule (OAC rule 3745-50-58(L)(5) and 3745-50-50) 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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input 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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input 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 checked="" 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 and photograph at reasonable times any facilities, equipment (including monitoring and control equipment), practices or operations regulated or required under the conditions of the permit?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d.	Sample, document, or monitor, at reasonable times, for the purposes of assuring permit compliance or as otherwise authorized by ORC Chapter 3734. and the rules adopted thereunder, any substances or parameter at any location?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
INSPECTION ITEMS FROM PART B APPLICATION			
<i>NOTE: The inspector or permit writer may add questions pertaining to the permittee's application, as appropriate.</i>			
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: [Conditions B.22., B.21., and A.28.]		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	a.	A description of the quantity of each hazardous waste received, and the method(s) and date(s) of its treatment, storage, or disposal?	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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	c.	Records and results of waste analysis performed as specified in paragraph (A) of rule 3745-270-04 and in rules 3745-54-13, 3745-54-17, 3745-57-14, 3745-57-41, and 3745-270-07?	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 checked="" 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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
DOCUMENTS TO BE MAINTAINED AT FACILITY			
20.	In accordance with Condition A.28 of the permit, is the permittee maintaining the following documents at the facility:		
	a.	Waste analysis plan in accordance with OAC rule 3745-54-13?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b.	Contingency plan in accordance with OAC rule 3745-54-53?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

	c.	Closure plan in accordance with OAC rule 3745-55-12?	Yes <input checked="" 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 checked="" 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 checked="" 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 and set out in Appendix G-2 of the permit application? [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 checked="" 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 checked="" 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 three 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 checked="" 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 checked="" 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 checked="" 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.25]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
SAMPLING/MONITORING RECORDKEEPING REQUIREMENTS			
24.		In compliance with Condition A.12(b) of the permit, do the permittee's records of monitoring information specify the:	
	a.	Date(s), exact place(s), time(s) and method(s) of sampling or measurement?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b.	Individual(s) who performed the sampling or measurement?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c.	Date(s) analyses were performed?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d.	Individual(s) who performed the analyses?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	e.	Analytical technique(s) or method(s) used?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	f.	Results of such analyses?	Yes <input checked="" 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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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 three years from the date of sampling, including:	
	a.	All calibration and maintenance records and all original strip chart recordings for continuous monitoring instrumentation?	Yes <input checked="" 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 checked="" type="checkbox"/>

INSPECTION ITEMS FROM THE PART B APPLICATION

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

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.29(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 the Southeast District Office within 180 days of journalization of this permit and updates biennially thereafter? Note: this would be 02-03-02 and even numbered years thereafter. [Condition A.29]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

GROUND WATER MONITORING

32.	Has the permittee conducted semi-annual sampling of their monitoring wells?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
33.	Have they reported the results in the Annual Ground Water Monitoring Report as required by Appendix E-1 of the Part B permit application? [Condition F.7]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

NOTE: The permit does not specify the months in which the sampling must occur. The schedule in the past has been sampling in May and November with the Annual Ground Water Report being submitted in February.

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.

WASTE ACCEPTANCE AND GENERATION

34.	Is the permittee storing any containers of hazardous waste received from any off-site source that permittee is not permitted to store? [Condition A.1.]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
35.	Has the permittee arranged to receive hazardous waste from a foreign or off-site source that the permittee is not permitted to store? [Condition A.1.]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>

INSPECTION ITEMS FROM THE PART B APPLICATION

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

36.	The permittee shall not receive hazardous waste from an off-site source, except that the permittee may accept, via pipeline, recovery well wastewater from the Union Carbide Corp. remediation project, which wastewater may be hazardous for chlorobenzene (D021). Is the permittee in compliance with this condition? [Condition B.2(a)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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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.24]	
a.	All hazardous wastes shipped off-site have been accompanied by a completed manifest, U.S. EPA Form 8700-22 and, if necessary, U.S. EPA Form 8700-22A in compliance with OAC rule 3745-52-20(A)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	The manifest form used contains all information required by OAC rule 3745-52-20 and the minimum number of copies required by OAC rule 3745-52-22?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

	c.	The permittee has designated at least one permitted disposal facility and has/will designate an alternate facility or instructions to return waste in compliance with OAC rule 3745-52-20(B)(C)(D)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d.	Prepared manifests have been signed by the permittee and initial transporter in compliance with OAC rule 3745-52-23?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
38.		As a permittee that generates hazardous waste, are signed copies of all hazardous waste manifests and any documentation required for exception reports retained for at least three years at the facility as required by OAC rules 3745-52-40 and 3745-54-71(A)(5)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
39.		Does the permittee use only properly registered transporters when removing hazardous wastes? [Condition A.16]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

WASTE ANALYSIS/WASTE ANALYSIS PLAN

43.		Does the permittee have a detailed chemical and physical analysis of waste streams which contains all information of the waste in accordance with OAC Chapters 3745-54 to 3745-57, 3745-218 and 3745-270 and the terms and conditions of the permit? [Condition B.3]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
44.		Does the permittee follow the procedures described in the Waste Analysis Plan found in Appendix C-2 of the permit application? [Condition B.3]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
45.		In accordance with OAC rule 3745-54-13(A)(3), does the permittee repeat the waste analysis as necessary to ensure that it is accurate and up to date? [Condition B.3]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
47.		FOR FACILITIES OPERATING SURFACE IMPOUNDMENTS EXEMPT FROM LAND DISPOSAL RESTRICTIONS UNDER OAC 3745-270-04(A):	

NOTE: Some of the wastewater discharged to the Emergency Basin may be characteristically hazardous for D002 and D021. OAC 3745-270-04 sets out the conditions under which wastes treated in surface impoundments may be exempted from land disposal restrictions. These conditions include certain waste analysis and monitoring requirements for the Waste Analysis Plan found in Appendix C-2 of the Permit Application.

	Does the waste analysis plan include procedures and schedules for:		
	i.	Is the Emergency Basin wastewater and sludge tested on an annual basis? [Appendix C-2 Section 5 and 3745-54-13(B)(7)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	ii.	Is the Emergency Basin wastewater and sludge tested whenever a substantial process change has occurred that might change the composition of these waste streams? [Appendix C-2 Section 5 and 3745-65-13(B)(7)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	iii.	The annual removal of residues which are not delisted or which exhibit the characteristic of a hazardous waste and either do not meet treatment standards (OAC 3745-270-40 to 3745-270-49) or where no treatment standards have been established? [3745-54-13(B)(7)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
48.		Where applicable: The methods which will be used to meet additional waste analysis requirements for specific waste management methods specified in rules 3745-54-17, 3745-57-14, 3745-57-41 and 3745-270-07 of the OAC? [3745-54-13(B)(6)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
49.		Does the permittee place the results of all waste analyses in the facility operating record in accordance with OAC rule 3745-54-73?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

INSPECTION ITEMS FROM THE PART B APPLICATION

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

GENERAL INSPECTION REQUIREMENTS

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

50.		Is the permittee following the inspection procedures and schedules as set forth in the permit (<u>Appendix G-2</u> of the approved Part B permit	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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	application) and the requirements of OAC rules 3745-54-15(A),(C) and (D)? [Condition B.5]	
51.	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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
52.	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"/>
53.	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"/>

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

SECURITY REQUIREMENTS

54.	Is the permittee complying with the following security provisions of OAC rule 3745-54-14 and Condition B.4 of the permit: [<u>Appendix G-1</u> of the Part B permit application]?	
	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 checked="" 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 checked="" 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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
55.	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 area?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

FACILITY OPERATIONS

56.	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"/>
57.	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"/>

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.

PERSONNEL TRAINING

58.	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.6]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	The facility provides personnel training which includes instruction in safe equipment operation and emergency procedures and implementation of the contingency plan? [OAC rule 3745-54-16(A)(B)(C)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	The facility provides personnel training to new employees within six months after their date of employment as required by OAC rule 3745-54-16(B)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	The facility provides an annual refresher training course as required by OAC rule 3745-54-16(C)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
59.	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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

INSPECTION ITEMS FROM THE PART B APPLICATION

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

REQUIRED EQUIPMENT

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

60.	Has the permittee equipped the facility with the following emergency equipment as required by OAC rule 3745-54-32 and Condition B.9 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"/>
61.	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.10 of the permit?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
62.	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.11 of the permit?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

INSPECTION ITEMS FROM THE PART B APPLICATION

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

CONTINGENCY PLAN - EMERGENCY PROCEDURES

63.	In compliance with Condition B.13 of the permit and OAC rule 3745-54-37(A) and (B), does the permittee:	
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	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 checked="" 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 checked="" 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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
64.		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 checked="" 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.13(b)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
65.		Has the permittee, in accordance with OAC rule 3745-54-53 submitted a copy of the approved contingency plan (including amendments, revisions or changes) to all local authorities, agencies and response contractors designated in the approved contingency plan? [Condition B.18(b)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
66.		Has the permittee notified all parties identified in the contingency plan in writing of amendments, modifications, or revisions to the plan within ten days of the effective date of the change in the plan? [Condition B.18(b)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
67.		Has the permittee submitted a copy of the approved contingency plan and all revisions, amendments and modifications to the Ohio EPA, Division of Emergency and Remedial Response (DERR) in accordance with OAC rule 3745-54-53? [Condition B.18(c)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
68.		Is the permittee reviewing the approved contingency plan at least annually and amending the plan immediately if needed in compliance with OAC rule 3745-54-54? [Condition B.17]	Yes <input checked="" 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

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

IMPLEMENTATION OF CONTINGENCY PLAN

73.	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 checked="" 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 checked="" type="checkbox"/>
ii.	Name and address of the facility?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
iii.	Time and type of incident?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
iv.	Name and quantity of materials involved?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
v.	The extent of injuries?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 checked="" 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 checked="" 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 checked="" 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 checked="" 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 checked="" type="checkbox"/>

INSPECTION ITEMS FROM THE PART B APPLICATION

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

CLOSURE REQUIREMENTS

74.	Does the permittee maintain the approved closure plan at the facility? [Condition B.29]		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
75.	Is the permittee keeping at the facility and submitting annually to Ohio EPA, the latest closure cost estimate as required by OAC rule 3745-55-42(D)? [Condition B.36]		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
76.	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 checked="" type="checkbox"/>

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.

77.	Has the permittee closed the facility? If so:		
	a.	Did the permittee complete closure of the facility 180 days after receiving the final volume of hazardous waste, as required by Condition B.31 of the permit?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	b.	Was closure conducted in accordance with the closure performance standard of OAC rule 3745-55-11? [Condition B.26]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	c.	Did the permittee carry out the approved closure plan as found in Section 9 of the approved permit application? [Condition B.27]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	d.	After receiving the final volume of hazardous waste, did the permittee remove all hazardous waste and complete closure activities in accordance with the schedule specified in the approved closure plan and as required by OAC rule 3745-55-13? [Condition B.31]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	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.32]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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.33]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 checked="" type="checkbox"/>

POST-CLOSURE MAINTENANCE

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

78.	Has the permittee inspected the components, structures, and equipment at the site in accordance with the inspection schedule in Appendix I-3, Section 4.4 and Tables 3-1 and 4-1 of the permit application on a semi-annual basis? [OAC rule 3745-55-17(A)(1)(b)] [Condition B.35]		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
79.	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 checked="" 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.	
80.	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 checked="" type="checkbox"/>
81.	Have suitable repairs been made within a reasonable amount of time? [Condition B.35]		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
82.	Have repairs been indicated on the Notification Repair Form? [Condition B.35]		Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
83.	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 checked="" type="checkbox"/>

INSPECTION ITEMS FROM THE PART B APPLICATION

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

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

84.	Are containers holding hazardous wastes in good condition as required by OAC 3745-55-71? [Condition C.4] 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 waste in a manner that complies with the conditions of the permit? [Condition C.4]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
85.	Does the permittee ensure that all containers used at the facility are compatible with the hazardous waste to be stored in them as required by OAC rule 3745-55-72? [Condition C.5]		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
86.	Does the permittee keep all containers closed during storage except when it is necessary to add or remove waste as required by OAC rule 3745-55-73? [Condition C.6(a)]		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
87.	Does the permittee store all containerized hazardous waste on the container storage containment system as described in Condition C.7 of the permit? [Condition C.7]		Yes <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

88.	Is the permittee inspecting the container area weekly in accordance with OAC rule 3745-55-74 and the approved inspection schedule in Appendix G-2 of the Part B permit application to detect leaking containers and deterioration of containers and the containment system? [Condition C.9]		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		
89.	Does the permittee maintain the containment system as described in the approved permit application, Section 4, 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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	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"/>
90.	Has the permittee had a spill or leak of wastes? If so:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	a. Was spilled or leaked waste removed in a timely manner? [Condition C.7(e)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
<i>NOTE: This time period is not to exceed 24 hours. [Condition C.6(c)]</i>		
AISLE SPACE		
91.	Is the permittee maintaining adequate aisle space to allow unobstructed movement of personnel and equipment in the event of an emergency as required by OAC rule 3745-54-35 and Condition B.12 of the permit?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
INSPECTION ITEMS FROM THE PART B APPLICATION		
<i>NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.</i>		
CORRECTIVE ACTION		
98.	Has the permittee identified any new WMUs or releases at the facility? [Condition E.10]? If so:	Yes <input type="checkbox"/> No <input checked="" 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 checked="" type="checkbox"/>
INSPECTION ITEMS FROM THE PART B APPLICATION		
<i>NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.</i>		
	Is the permittee in compliance with the conditions of their Land Use Restriction? Note: Refer to Director's Final Findings & Orders journalized March 3, 2004 and the Land Use Restrictions Agreement recorded in the Washington County Recorders Office on March 30, 2004 in volume 389 page 2615 (a copy of which is in the Ohio EPA's correspondence file #41 for Solvay.)	Yes <input checked="" 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.

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

MANIFEST REQUIREMENTS		
12.	Have all hazardous wastes shipped off-site been accompanied by a manifest? (U.S. EPA Form 8700-22) [3745-52-20(A)]	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)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<i>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)]</i>		
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"/>
<i>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)].</i>		
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"/>
<i>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.</i>		
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"/>
<i>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.</i>		
PERSONNEL TRAINING		
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 checked="" 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 checked="" 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 checked="" 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 checked="" 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 checked="" 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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Job descriptions? [3745-65-16D(2)]	Yes <input checked="" 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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

	d. Completed training or job experience required? [3745-65-16D(4)]	Yes <input checked="" 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 checked="" 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

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 checked="" 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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Arrangements with emergency authorities? [3745-65-52(C)]	Yes <input checked="" 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 checked="" 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 checked="" 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 checked="" 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 checked="" 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 checked="" type="checkbox"/>
31.	Is an emergency coordinator available at all times (on-site or on-call)? [3745-65-55]	Yes <input checked="" 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 checked="" 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 checked="" 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 checked="" 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 checked="" type="checkbox"/>
b.	Did the generator mark the container(s) holding excess with the accumulation date when the 55 gallon (one quart) limit was exceeded? [3745-52-34(C)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

NOTE: The satellite accumulation area is limited to 55 gallons of hazardous waste accumulated from a distinct point of generation in the process under the control of the operator of the process generating the waste (less than 1 quart for acute hazardous waste). There could be individual waste streams accumulated in an area from different points of generation.

USE AND MANAGEMENT OF CONTAINERS IN <90 DAY ACCUMULATION AREAS

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"/>

NOTE: Record location on process summary sheets, photograph the area, and record on facility map.

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 checked="" 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 checked="" 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 checked="" type="checkbox"/>

NOTE: OAC 3745-65-17(B) requires that the generator treat, store, or dispose of ignitable or reactive waste, and the mixture or commingling of incompatible wastes, or incompatible wastes and materials so that it does not create undesirable conditions or threaten human health or the environment.

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

PRE-TRANSPORT REQUIREMENTS

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 <110 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"/>

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

GENERAL REQUIREMENTS

1.	If LDRs do not apply, does the generator have a statement that lists how the HW was generated, why LDRs don't apply and where the HW went? [3745-270-07 (A)(7)]	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"/>
<p><i>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).</i></p>		
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"/>
<p><i>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.</i></p>		
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"/>
<p><i>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.</i></p> <p><i>NOTE: Written documentation of this determination is not required.</i></p>		
7.	Did the generator treat his HW /soil on-site <u>to meet</u> the LDR treatment standard?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
<p><i>NOTE If "Yes" see question #16.</i></p>		
8.	Did the generator send a one-time LDR notification form to the TSD with the first shipment to that facility?[3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
9.	Did the generator resubmit the LDR notification form to the TSD when the HW changed or the generator used a new TSD? [3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
10.	Does the generator have a copy of the LDR notification form on file?[3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	Is the form kept on file for three years after last HW shipped? [3745-270-07(A)(8)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
NOTIFICATION FORM		
11.	Does the LDR Notification form contain the following information:	
a.	Manifest number of the first waste shipment to the TSD?[3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Applicable waste codes (includes characteristic codes for a listed HW if applicable)? [3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	A statement that conveys that the HW is subject to LDRs and must be treated to meet LDR treatment requirements? [3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

	d.	A designation whether the HW is a wastewater or non-wastewater? [3745-270-07(A)(2)].	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
NOTE: A wastewater contains <1% by wt. total suspended solids(TSS) and <1% by wt. TOC. If you doubt the HW is a wastewater or non-wastewater, the HW can be tested using for example, Standard Methods (SM) 160.2 for TSS, SW-846 method 9060a for TOC.			
	e.	Designation of the waste subcategory when applicable? [3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
NOTE: Subcategories are found on the LDR treatment standards table under the applicable waste code. Not all HWs have subcategories			
	f.	A listing of the underlying hazardous constituents for which a characteristic waste must be treated? [3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
NOTE: Not required if the waste is high TOC D001 or the TSD tests its treatment residues for all underlying hazardous constituents.			
	g.	If the HW is F001-F005 or F039, did the generator note on the LDR form what solvents or constituents, respectively, the waste contains and must be treated for?[3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
NOTE: Not required if the TSD tests its treatment residues for all underlying hazardous constituents.			
PROHIBITED DILUTION			
12.	Is the HW treated by burning? If "No" go to #15.		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
13.	Is the HW a metal-bearing HW?		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
NOTE: Generally, metal-bearing HWs contain heavy metals above TCLP levels or were listed due to the presence of metals. A list of the restricted metal-bearing HWs are given in the Appendix to 3745-270-03.			
14.	a.	Metal-bearing HWs cannot be incinerated, combusted or, blended and burned for fuel unless <u>one</u> of the following conditions apply. [3745-270-03(c)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	i.	Contains > 1% TOC?	
	ii.	Contains organic constituents or cyanide at levels greater than the UTS levels?	
	iii.	Is made up of combustible material e.g., paper, wood, plastic?	
	iv.	Has a reasonable heating value (e.g., > 5000 Btu)?	
		<i>The polysulfone kettle bottoms which contain D007 have a heating value of 6,000 to 14,000 Btu.</i>	
	v.	Co-generated with a HW that must be combusted?	
	b.	If all responses to 14 a.i. through 14 a.v. are "No", HW is being improperly treated by dilution, violation of 3745-270-03(C). Is HW being treated by dilution?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
15.	Was the HW treated by wastewater treatment?		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Solvay's wastewater treatment is covered by their Part B permit and is exempt from LDRs under OAC Rule 3745-59-04.			
	a.	Is a LDR treatment method, other than DEACT or a numerical value, specified for the waste? [3745-270-03(B) and 3745-270-40(A)(3)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
NOTE: If Yes, HW is improperly being treated by dilution.			
	b.	Does the waste carry the D001 code <u>and</u> contain $\geq 10\%$ TOC?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	c.	Does the wastewater treatment process include a process to separate/recover the organic phase of the waste?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

NOTE: If the answers to b & c are "yes" and "no", respectively, waste is improperly being treated by dilution and generator is in violation of [3745-270-03(B) and 3745-270-40(A)(3)].

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

GENERATOR TREATMENT

16.	Does the generator treat to meet LDRs on-site [3745-270-40(A)]?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	Did the generator treat his hazardous waste/soil on-site in a tank, container, drip pad or containment building to meet the LDR treatment standard?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	If "Yes" complete the rest of the checklist. If "No"...stop...you are done.	
a.	Does the generator have a written waste analysis plan (WAP) that describes the procedures he will follow to treat the HW/soil to the LDR treatment standard? [3745-270-07(A)(5)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
b.	Did the generator use a detailed chemical and physical analysis of the HW/soil in order to develop the WAP? [3745-270-07(A)(5)(a)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	NOTE: This is a laboratory analysis but it does not have to be kept by the generator.	
c.	Does the WAP contain all information necessary to treat the HW/soil to the LDR treatment standard? [3745-270-07(A)(5)(a)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
d.	Does the WAP include the testing frequency of the treated HW/soil to demonstrate that the LDR treatment standard is being met? [3745-270-07(A)(5)(a)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
e.	Does the generator keep the WAP on-site? [3745-270-07(A)(5)(b)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
f.	Is the WAP available for the inspector's review during the inspection? [3745-270-07(A)(5)(b)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

NOTIFICATION FORM 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 checked="" type="checkbox"/>
	iii.	Include in the notification: [3745-270-09(D)(1)(a)]	
		1. Name & address of receiving landfill?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
		2. Description of HW when generated?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
		3. HW code when generated?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
		4. Treatability group when generated?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

		5.	Underlying hazardous constituents present when generated?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
		iv.	Contain the certification statement as required by 3745-70-07(B)(4)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" 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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input 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 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 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 type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
<i>An 8 foot cylindrical lamp box and a 4 foot lamp box were open at the time of the inspection. During the inspection, Solvay closed both boxes, returning the facility to compliance with this rule.</i>		
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 checked="" type="checkbox"/> No <input 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	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

	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)	
NOTE: Accumulation is defined as date generated or date received from another handler.		
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: <i>Solvay tracks the length of time universal waste is accumulated by dating the containers holding the spent lamps with the date that the first spent lamp is placed in the container.</i>	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		
NOTE: If a SQUWH self-transport waste, then the handler must comply with the Universal Waste transporter requirements.		
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 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 and do <u>one</u> of the following:	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 checked="" 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 checked="" 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 checked="" 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 checked="" type="checkbox"/>

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

NOTE: A facility is subject to the federal SPCC regulations (40 CFR 112) if it is non-transportation related (e.g., fixed) and has an aggregate above ground storage capacity greater than 1,320 gallons or a total underground storage capacity greater than 42,000 gallons of oil (including used oil), and there is reasonable expectation of a discharge to navigable waters.

PROHIBITIONS

1.	Does the generator manage used oil in a surface impoundment or waste pile? If yes:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
a.	Is the surface impoundment or waste pile regulated as a hazardous waste management unit? [3745-279-12(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
<i>NOTE: For example, used oil contaminated scrap metal stored in a pile.</i>		
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 checked="" type="checkbox"/>

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

5.	Does the generator of 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 checked="" type="checkbox"/>
b.	Contained the release?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
c.	Cleaned up and properly managed the used oil and other materials?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
d.	Repaired or replaced the containers or tanks prior to returning them to service, if necessary?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

ON-SITE BURNING IN SPACE HEATER

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

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

GENERATOR TRANSPORTATION

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

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

COLLECTION CENTERS AND AGGREGATION POINTS

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

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