



**Environmental  
Protection Agency**

John R. Kasich, Governor  
Mary Taylor, Lt. Governor  
Scott J. Nally, Director

November 29, 2011

**BELMONT COUNTY  
GENERAL FILE  
(BELLAIRE TIRE)  
RCRA/UOG  
NON-NOTIFIER**

Mr. Jack Keefer  
Bellaire Tire Sales & Service  
3564 Noble Street  
Bellaire, Ohio 43906

Dear Mr. Keefer:

On November 23, 2011 Vicky German and I conducted a complaint investigation of Bellaire Tire Sales & Service to determine the validity of a complaint that was received by this office on November 21, 2011, and to determine the company's compliance with Ohio's hazardous waste laws and regulations, as found in the Ohio Revised Code and the Ohio Administrative Code (ORC and OAC, respectively). The complainant alleged that Bellaire Tire Sales & Service was burning something in the used oil furnace which was creating a chemical smell and emitting black smoke.

During the complaint investigation, we found the following violations of Ohio's hazardous waste regulations:

- (1) **On-site burning of used oil in space heaters by generators, 3745-279-23(A):**  
Generators may burn used oil in used oil-fired space heaters provided that the heater burns only used oil that the owner or operator generates or used oil received from household do-it-yourself used oil generators.

Bellaire Tire Sales & Service was burning a used oil mixture that was left in the used oil tanks from the previous owner. On 11/29/11, Bellaire Tire Sales & Service submitted a copy of the shipping manifest from Crystal Clean documenting that the used oil mixture from the previous owner has been shipped off-site. No further actions are required.

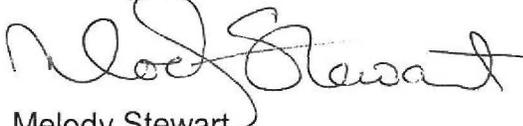
- (2) **Used oil storage requirements for generators, OAC rule 375-279-22(C):**  
Containers and aboveground tanks used to store used oil at generator facilities shall be labeled or marked clearly with the words "Used Oil".

The used oil tanks were not labeled as required by this rule. During the complaint investigation, these tanks were labeled; therefore, no further documentation is required.

Mr. Jack Keefer  
Bellaire Tire Sales & Service  
November 29, 2011  
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I have attached a copy of the Universal Waste fact sheet for your information. If you have any questions regarding this letter, please call me at 740.380.5626.

Sincerely,

A handwritten signature in black ink that reads "Melody Stewart". The signature is written in a cursive style with a large, looping initial "M".

Melody Stewart  
District Representative  
Division of Materials and Waste Management

MS/mlm

Enclosures

cc: Lisa Duvall, DAPC/SEDO

**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 appropriate regulations.

Send to Central Office <input type="checkbox"/>	<b>Ohio Environmental Protection Agency</b> <b>RCRA SUBTITLE C SITE</b> <b>IDENTIFICATION/VERIFICATION FORM</b>	For Ohio EPA use only
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Completed verification forms required to be submitted to CO should be e-mailed to [paula.canter@epa.state.oh.us](mailto:paula.canter@epa.state.oh.us).

<b>Site EPA ID No.</b>	EPA ID Number: Non-notifier							
<b>Site Name</b>	Name: Bellaire Tire Sales & Servicer					Website: (Optional)		
<b>Site Location Information</b>	Street Address: 3564 Noble Street							
	City, Town, or Village: Bellaire					State: OH		
<b>Site Land Type</b> (check only one)	County Name: Belmont		Zip Code: 43906					
<b>NAICS code(s)</b> <a href="http://www.census.gov/epcd/www/naics.html">www.census.gov/epcd/www/naics.html</a>	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"/>

<b>Facility Representative</b>	First Name: Jack		MI:	Last Name: Keefer				
Additional names can be recorded in number 12	Title: <b>Owner/General Manager</b>							
Only provide address information if it is different than the site address	Phone Number: 740.676.0717					Phone Number Extension:		
	E-Mail Address:							
	Fax Number:					Fax Number Extension:		
	Street or P.O. Box:							
	City, Town or Village:							
	State:				Zip Code:			

<b>Legal Owner And Operator of the Site.</b> List Additional Owners and/or Operators in the Comment Section or on another copy of this form page	Name of Site's Legal Owner:				Date Became Owner (mm/dd/yyyy):				
	Owner Type:	Private <input type="checkbox"/>	County <input type="checkbox"/>	District <input type="checkbox"/>	Federal <input type="checkbox"/>	Indian <input type="checkbox"/>	Municipal <input type="checkbox"/>	State <input type="checkbox"/>	Other <input type="checkbox"/>
	Street or P.O. Box:								
	City, Town or Village:				Owner Phone #:				
	State:				Country:		Zip Code:		
	Name of Site's Operator:				Date Became Operator (mm/dd/yyyy):				
	Operator Type:	Private <input type="checkbox"/>	County <input type="checkbox"/>	District <input type="checkbox"/>	Federal <input type="checkbox"/>	Indian <input type="checkbox"/>	Municipal <input type="checkbox"/>	State <input type="checkbox"/>	Other <input type="checkbox"/>
	Street or P.O. Box:								
	City, Town or Village:				Operator Phone #:				
	State:				Country:		Zip Code:		

<b>VIOLATIONS CITED?</b>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
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<b>TYPE OF HANDLER - MARK "X" AS APPROPRIATE</b>		
<input checked="" type="checkbox"/> Not a HW Generator	<input type="checkbox"/> UNKNOWN: Cited for violation of 3745-52-11  <input type="checkbox"/> Short-Term/Temporary 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"/> Large Quantity Generator (LQG)  <input type="checkbox"/> Small Quantity Generator (SQG) <input type="checkbox"/> Conditionally Exempt Small Quantity Generator <input type="checkbox"/> U.S. Importer of Hazardous Waste  <input type="checkbox"/> Mixed Waste (Hazardous and Radioactive) Generator

TYPE OF REGULATED WASTE ACTIVITY (MARK "X" IN ALL OF THE APPROPRIATE BOXES)	
<input type="checkbox"/> 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 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"/> 72-Hour Recycler	<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
<input type="checkbox"/> Batteries
<input type="checkbox"/> Pesticides
<input type="checkbox"/> Mercury containing equipment
<input checked="" type="checkbox"/> Lamps

USED OIL ACTIVITIES (INDICATE TYPE(S) OF ACTIVITY(S))
<input checked="" type="checkbox"/> Used Oil Generator
<input type="checkbox"/> Used Oil Transporter
<input type="checkbox"/> Used Oil Transfer Facility
<input type="checkbox"/> Used Oil Processor
<input type="checkbox"/> Used Oil Re-refiner
<input type="checkbox"/> Off-Specification Used Oil Burner
<input type="checkbox"/> Used Oil Fuel Marketer who directs shipment of Off-Spec Used Oil
<input type="checkbox"/> Used Oil Fuel Marketer who first claims the Used Oil meets the specifications

Eligible Academic Entities with Laboratories: Facility has previously notified that they are opting into managing laboratory hazardous waste pursuant to OAC rules 3745-52-200 through 3745-52-216. Check the box(es) below to indicate the laboratory type.
<input type="checkbox"/> College or University
<input type="checkbox"/> Teaching hospital that is owned by or has a formal written affiliation agreement with a college or university
<input type="checkbox"/> Non-profit Institute that is owned by or has a formal written affiliation agreement with a college or university

**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	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Additional Facility Representatives:
Tanks	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Containers	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Name of Inspector(s)	Name of Inspector(s)	Date of Inspection/Time (mm/dd/yyyy) (hh:mm)
Melody Stewart	Vicky German	11/23/11 10:30
<b>Comments:</b>		