



State of Ohio Environmental Protection Agency

Northeast District Office

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Twinsburg, Ohio 44087

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

June 24, 2009

RE: MAHONING PAINT CORPORATION
LARGE QUANTITY GENERATOR
OHD 004167854
MAHONING COUNTY, NEDO
CEI – NOV & RTC

Mr. Charles Rumberg
The Mahoning Paint Corporation
P.O. Box 1282
Youngstown, OH 44501

Dear Mr. Rumberg:

Thank you for accompanying Sherry Slone and me during Ohio EPA's June 3, 2009, inspection of The Mahoning Paint Corporation in Youngstown, Ohio. During the course of our entrance interview, you informed us that Mahoning Paint Corporation had ceased regulated operations on May 14, 2009 and the company had been purchased by IVC Industrial Coatings, Indianapolis, IN. You also provided a copy of notifications to the Ohio EPA, the local emergency planning committee, and the local fire department regarding the cessation of regulated operations (CRO) that were to be mailed on June 4, 2009. As such, you and your staff were in the process of clean-up operations prior to and during our hazardous waste, large quantity generator inspection. Mahoning Paint Corporation had last been inspected by the Ohio EPA, Division of Hazardous Waste Management (DHWM) in 2005.

The Mahoning Paint Corporation, located at 653 Jones Street, Youngstown, Ohio, was a custom paint manufacturer. They conducted research and designed custom coatings for industrial applications. The company had operated in the 18,000 square foot production facility since the early 1940s. Coating processes included UV coating, High Solids Air Dry, High Solids Baking, Water Reducible Air Drying, and Water Reducible Baking. Products, in addition to paint, included epoxy, urethanes, vinyl, primers, and polyesters. Products were packaged into gallon cans, steel or plastic pails, steel drums or various size totes.

Mahoning Paint Corporation generated and managed hazardous waste and non-hazardous waste. Some of these waste streams were generated in the lab, warehouse, and/or offices as well:

1. liquid hazardous waste (D001, D005, D007, D008, D035, F003, and F005) generated through the clean-up of paint mills and characterized for ignitability, barium, chromium, lead, methyl ethyl ketone (MEK) and xylene;
2. solid hazardous waste (D001, D007 and D008) which included debris from paint manufacturing operations and characterized for ignitability, chromium, and lead;
3. liquid hazardous waste without chromium and lead (D001, D005, D035, F003, and F005) generated from the clean-up of paint mills and characterized for ignitability, barium, MEK, and xylene;
4. fluorescent bulbs—universal waste bulbs generated through facility lighting replacement which included four and eight foot tube and two foot U-shaped bulbs;
5. arrestor dust – non-hazardous waste generated through the clean-out process of the dust collection system;

Our inspection included Building 1, the offices and laboratory; Building 2, the warehouse; Building 3, the process building; an outside product tank; and < 90 day storage pad for your on-site generated hazardous waste.

Building 1. Many of the rooms in the office were empty; as the new company owner had removed most of the furniture and office equipment. In the lab we observed one small storage cabinet containing bottles of various chemicals. The bottles were part of an experiment you were conducting with various materials and techniques for lining/coating the interior of drums. You stated that the new owners, IVC industrial Coatings would be removing the cabinet and chemicals within the next few months. An empty parts washer that had held MEK was observed. You informed us the new owner intended to remove it with the rest of the materials and equipment. A paint booth was also located in this building, but there were no filters present.

Building 2. The warehouse was being swept at the time of our inspection. Containers of solid and hazardous waste were being accumulated in preparation for transport off-site. One container of eight foot fluorescent lamps (universal waste), closed, labeled, and dated was observed awaiting pick-up. Two additional empty parts washers were being staged until IVC Industrial Coatings removed them. Fire extinguishers were observed and you informed us that you intended to leave them for the new owner of the building.

Building 3. The production plant had a first floor and a basement. The building was nearly empty of equipment. The remaining equipment was to be removed by the new owner. On the first floor, six stationary product tanks were observed, V-240 (3800 gal) and V-256 (3800 gal) which had stored resins; and V-120 (1200 gal), T-34 (1200 gal), V-22 (1200 gal), and V-22 (2000 gal) which held resins and other chemical products. All were drained (as of May 16, 2009) and had material data safety sheets (MSDSs) of what had been stored in the tanks taped to the exterior and easily visible. There were empty drums that were destined to be reconditioned by ACN Pittsburgh and empty pails that had contained resins and solvents that you intended to dispose of as solid waste.

The basement had four stationary tanks, three were mixing tanks and one, T-3 (4000), had contained VM & P Naptha. Tank T-3 had been drained on May 15, 2009 and had a MSDS attached. Of the mixing tanks, one (2000 gal) had been emptied and cleaned; one (2000 gal) had contained a high solids pipe coating and had been drained; and the last (2000 gal) tank was empty and scheduled to be cleaned. The floor of the basement was coated with dry paint and resins from spills/releases over the years, but at the time of the inspection, the only fresh spill observed was near the stairs. You informed us that it was resin and you had absorbent spread over the spill. The floor was being swept of loose debris as part of your clean-out activities.

The outside product tank, T-11 (3000 gal), used to store xylene, had been drained on May 15, 2009. The tank had a MSDS attached. There was no evidence of spills or releases in the proximity of the tank. The hazardous waste storage pad, located along the southern perimeter of the property, consisted of painted and sealed concrete with minor cracks visible. The area was fenced, gated, and padlocked. You informed us that during the course of normal operations, waste was shipped off-site approximately every two weeks. There was no evidence of spills or releases on the pad. There were no drums being stored on the pad at the time of the inspection.

The following violations were noted.

1. **OAC rule 3745-52-34(A)(2), Accumulation time of hazardous waste.** This rule states: The date upon which each period of accumulation and/or treatment begins is clearly marked and visible for inspection on each container.

MR. CHARLES RUMBERG
MAHONING PAINT CORPORATION
JUNE 24, 2009
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Our inspection of Building 3 revealed twenty four (24) drums staged for disposal on the first floor. The drums contained paint related hazardous waste and were labeled, but the start date for the accumulation was not included on the label. The drums were staged in three rows with no aisle space between rows. You informed us that the drummed waste had been generated within the last few days. Also twenty three (23) drums containing hazardous waste generated within the last few weeks were staged for disposal in the basement. Some of the drums contained unused product, however you informed us that the majority of the waste was from clean-up operations. These drums were labeled with no accumulation start date and they were staged with no aisle space between rows also.

Immediately upon pointing these violations out to you, you had your workers date the drums and move them to create adequate aisle space. You informed us that Ashland, Inc was scheduled to pick-up these remaining hazardous wastes on Friday, June 5, 2009. On June 19, 2009 we received copies of manifests confirming that no hazardous wastes remain at the facility.

No further action is needed at this time to address this violation.

2. **OAC rule 3745-65-35, Adequate Aisle Space.**

As stated in the previous violation there was no aisle space initially between the 3 rows of staged hazardous waste drums on the first floor and in the basement of Building 3. This was corrected immediately and the wastes have since been removed from the site. No further action is needed to address this violation.

Enclosed you will find a copy of the checklists that we completed regarding our inspection. Should you have any questions, please feel free to call me at 330-385-8447. Another inspection might be conducted in the future to evaluate compliance with the CRO rules. You can find copies of the rules, laws and other information on the division's web page at <http://www.epa.state.oh.us/dhwm>.

Sincerely,



for
Patricia Natali
District Representative
Division of Hazardous Waste Management

PN:ddw
Enclosure

cc: Natalie Oryshkewych, Manager, DHWM, NEDO
ec: Frank Popotnik, Supervisor, DHWM, NEDO
Sherry Slone, DHWM, NEDO
Harry Sarvis, Compliance Manager, DHWM, CO

NOTICE:

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

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

For Ohio EPA use only

E-mail this completed form to tammy.mcconnell@epa.state.oh.us or mail it to Tammy McConnell, Central Office

| | | |
|--|--|--|
| 2. Site EPA ID No. | EPA ID Number: <u>OHD 004 167 854</u> | |
| 3. Site Name | Name: <u>Mahoning Paint Corporation</u> | Website: (Optional) |
| 4. Site Location (City, Town, or Village) | Street Address: <u>653 Jones Street</u> | |
| 5. Site Land Use (check only one) | City, Town, or Village: <u>Youngstown</u> | State: <u>OH</u> |
| 6. NW 1/4 (if rural) | County Name: <u>Mahoning</u> | Zip Code: <u>44502</u> |
| 7. Facility Registration | <input checked="" type="checkbox"/> Private <input type="checkbox"/> County District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other | |
| 8. NW 1/4 (if rural) | <u>32551</u> | |
| 9. Facility Registration | First Name: <u>Charles</u> MI: Last Name: <u>Rumberg</u> | |
| Additional name (can be reported in number 12) | Phone Number: <u>330 757 8446</u> | Phone Number Extension: |
| On-site practice address (if different from site address) | E-Mail Address: <u>CRUMBERG@TeamIVG.com</u> | |
| 10. Facility Registration | Fax Number: <u>317 636 4436</u> | Fax Number Extension: |
| 11. Facility Registration | Street or P.O. Box: <u>P.O. Box 1282</u> | |
| 12. Facility Registration | City, Town or Village: <u>Youngstown</u> | |
| 13. Facility Registration | State: <u>OH</u> Country: <u>USA</u> Zip Code: <u>44501-1282</u> | |
| 14. Facility Registration | Name of Site's Legal Owner: <u>Charles Rumberg</u> | Date Became Owner (mm/dd/yyyy): <u>01/01/1998</u> |
| 15. Facility Registration | <input checked="" type="checkbox"/> Owner Private <input type="checkbox"/> County District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other | |
| 16. Facility Registration | Street or P.O. Box: <u>1282</u> | |
| 17. Facility Registration | City, Town or Village: <u>Youngstown</u> | Owner Phone #: <u>330 757 8446</u> |
| 18. Facility Registration | State: <u>OH</u> Country: <u>USA</u> Zip Code: <u>44501</u> | |
| 19. Facility Registration | Name of Site's Operator: <u>same</u> | Date Became Operator (mm/dd/yyyy): <u>01/01/1998</u> |
| 20. Facility Registration | <input checked="" type="checkbox"/> Owner Private <input type="checkbox"/> County District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other | |
| 21. Facility Registration | Street or P.O. Box: <u>SAME</u> | |
| 22. Facility Registration | City, Town or Village: | Operator Phone #: |
| 23. Facility Registration | State: | Country: Zip Code: |
| 24. Violations Cited? | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| 25. Type of Regulated Waste Activity (Mark <input checked="" type="checkbox"/> in all of the appropriate boxes) | | |
| <input type="checkbox"/> Not Regulated | <input type="checkbox"/> Conditionally Exempt Small Quantity Generator | |
| <input type="checkbox"/> UNKNOWN: Cited for violation of 3745-52-11 | <input type="checkbox"/> United States Importer of Hazardous Waste | |
| <input checked="" type="checkbox"/> Large Quantity Generator (LQG) | <input type="checkbox"/> Mixed Waste (Hazardous and Radioactive) Generator | |
| <input type="checkbox"/> Small Quantity Generator (SQG) | | |
| <input type="checkbox"/> Hazardous Waste Transporter | <input type="checkbox"/> Exempt Boiler and/or Industrial Furnace | |
| <input type="checkbox"/> Treater, Storer or Disposer of Hazardous Waste | <input type="checkbox"/> Small Quantity On-Site Burner Exemption | |
| <input type="checkbox"/> Recycler of Hazardous Waste | <input type="checkbox"/> Smelting, Melting, Refining Furnace Exemption | |
| <input type="checkbox"/> Underground Injection Control Facility | | |

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| 10B 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"/> Large Quantity Handler of Universal Waste (accumulates 5,000 kg. or more) |
| <input type="checkbox"/> Destination Facility for Universal Waste | |
| Check all boxes below that apply to each of the types of facilities above | 10C Used Oil Activities (Indicate types of activities) |
| Batteries | <input type="checkbox"/> Used Oil Generator <input type="checkbox"/> Off-Specification Used Oil Burner |
| Pesticides | <input type="checkbox"/> Used Oil Transporter <input type="checkbox"/> Used Oil Fuel Marketer Who Directs Shipment of Off-Spec. Oil |
| Mercury containing equipment | <input type="checkbox"/> Used Oil Transfer Facility <input type="checkbox"/> Used Oil Fuel Marketer to Off-Specification Used Oil Burner |
| Lamps | <input checked="" type="checkbox"/> Managed <input type="checkbox"/> Used Oil Processor |
| Waste codes for waste handled at this facility (add an additional code if more than 2 are managed) | Regulated Hazardous Wastes. Please list the codes for the regulated hazardous wastes that are present at the facility. If there are more than 2 waste codes and they are not listed in the above, you do not need to list them all. Instead, just indicate the code for regulated hazardous wastes. Please list the codes for regulated hazardous wastes. |
| Same as Annual Report | |
| 2 Common Use Containers | Indicate whether the inspection was announced or unannounced |
| Announced <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Additional Facility Representatives: |
| Tanks <input type="checkbox"/> Yes <input type="checkbox"/> No | Other Comments: Charles Rumberg (o/o) had ceased regulated activities, 5/18/09. OEPA rec'd CRO notice dated 6/4/09 |
| Containers <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| Name of Inspector | Name of Inspector(s) |
| Patricia M. Nanti | Sherry Stone |
| Date of Inspection | |
| 06/03/2009 | |
| OPTIONAL CER and may direct to and evaluate relevant persons directly responsible for compliance and the possibility | OPTIONAL CER and may direct to and evaluate relevant persons directly responsible for compliance and the possibility |
| Signature of Owner/Representative | Name and Title |
| | |

LQG conducted 6/3/09 at: The Mahoning Paint Corporation; submitted CR0 notification 5/4/09; ceased operations 5/18/09

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

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

Safety Equipment Used: STEEL TOED SHOES

GENERAL REQUIREMENTS

| | | |
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| 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.

| | | |
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| 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).

| | | |
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| 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.

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| 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"/> |

Mahoning Paint Corp / 6/3/09
 OHIO 004 767854
 [Facility Name/Inspection Date]
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| | | |
|--|---|--|
| 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)(1)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| 13. | Have items (1) through (20) of each manifest been completed? [3745-52-20(A)(1)] & [3745-52-27(A)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| NOTE: U.S. EPA Form 8700-22(A) (the continuation form) may be needed in addition to Form 8700-22. In these situations items (21) through (35) must also be completed. [3745-52-20(A)(1)] | | |
| 14. | Does each manifest designate at least one facility which is permitted to handle the waste? [3745-52-20(B)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| NOTE: The generator may designate on the manifest one alternate facility to handle the waste in the event of an emergency which prevents the delivery of waste to the primary designated facility. [3745-52-20(C)]. | | |
| 15. | If the transporter was unable to deliver a shipment of hazardous waste to the designated facility did the generator designate an alternate TSD facility or give the transporter instructions to return the waste? [3745-52-20(D)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| 16. | Have the manifests been signed by the generator and initial transporter? [3745-52-23(A)(1) & (2)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| NOTE: Remind the generator that the certification statement they signed indicates: 1) they have properly prepared the shipment for transportation and 2) they have a program in place to reduce the volume and toxicity waste they generate. | | |
| 17. | If the generator did not receive a return copy of each completed manifest within 35 days of the waste being accepted by the transporter did the generator contact the transporter and/or TSD facility to check on the status of the waste? [3745-52-42(A)(1)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| 18. | If the generator has not received the manifest within 45 days, did the generator file an exception report with Ohio EPA? [3745-52-42(A)(2)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| 19. | Are signed copies of all manifests and any exception reports being retained for at least three years? [3745-52-40] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| NOTE: Waste generated at one location and transported along a publicly accessible road for temporary consolidated storage or treatment on a contiguous property also owned by the same person is not considered "on-site" and manifesting and transporter requirements must be met. To transport "along" a public right-of-way the destination facility has to act as a transfer facility or have a permit because this is considered to be "off-site." For additional information see the definition of "on-site" in OAC rule 3745-50-10. | | |
| PERSONNEL TRAINING NOT EVALUATED SINCE FACILITY CEMSED OPERATIONS 5/18/09, CRO * | | |
| 20. | Does the generator have a training program which teaches facility personnel hazardous waste management procedures (including contingency plan implementation) relevant to their positions? [3745-65-16(A)(2)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| 21. | Does the personnel training program, at a minimum, include instructions to ensure that facility personnel are able to respond effectively to emergencies involving hazardous waste by familiarizing them with emergency procedures, emergency equipment and emergency systems (where applicable)? [3745-65-16(A)(3)(a-f)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| 22. | Is the personnel training program directed by a person trained in hazardous waste management procedures? [3745-65-16(A)(2)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| 23. | Do new employees receive training within six months after the date of hire (or assignment to a new position)? [3745-65-16(B)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| 24. | Does the generator provide annual refresher training to employees? [3745-65-16(C)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| 25. | Does the generator keep records and documentation of: | |
| a. | Job titles? [3745-65-16D(1)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |

* FORMS HAD BEEN COMPLETED AND ALL REMAINING HAZARDOUS WASTE WAS SENT OFF-SITE ON 6/5/09.

[Facility Name/Inspection Date]
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| | | |
|-----|---|--|
| b. | Job descriptions? [3745-65-16D(2)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| c. | Type and amount of training given to each person? [3745-65-16D(3)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| d. | Completed training or job experience required? [3745-65-16D(4)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| 26. | Are training records for current personnel kept until closure of the facility and are training records for former employees kept for at least three years from the date the employee last worked at the facility? [3745-65-16(E)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 |
|---------------|------------------|--------------|
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CONTINGENCY PLAN * SEE BELOW

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

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

| | | |
|-----|---|--|
| 29. | Is a copy of the plan (plus revisions) kept on-site and been given to all emergency authorities that may be requested to provide emergency services? [3745-65-53 (A) & (B)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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"/> |

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* NOT EVALUATED SINCE FACILITY CEASED OPERATIONS 5/18/09, CRO FORMS WERE COMPLETED AND ALL HAZARDOUS WASTE WAS SENT OFF-SITE ON 6/15/09.

| | | |
|----|---|--|
| 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 * SEE BELOW

| | | |
|-----|---|--|
| 33. | Is the facility operated to minimize the possibility of fire, explosion, or any unplanned release of hazardous waste? [3745-65-31] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| b. | Emergency communication device? [3745-65-32(B)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| c. | Portable fire control, spill control and decon equipment? [3745-65-32(C)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| d. | Water of adequate volume/pressure per documentation or facility rep? [3745-65-32(D)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| 36. | Are emergency equipment tests (inspections) recorded in a log or summary? [3745-65-33] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| 40. | Has the generator attempted to familiarize emergency authorities with possible hazards and facility layouts? [3745-65-37(A)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 NO SATELLITE AREAS

| | | |
|-----|---|--|
| 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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| b. | Are under the control of the operator of the process generating the waste? [3745-52-34(C)(1)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| c. | Do not exceed a total of 55 gallons of hazardous waste per waste stream? [3745-52-34(C)(1)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| d. | Do not exceed one quart of acutely hazardous waste at any one time? [3745-52-34(C)(1)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| e. | Containers are closed, in good condition and compatible with wastes stored in them? [3745-52-34(C)(1)(a)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| f. | Containers are marked with words "Hazardous Waste" or other words identifying the contents? [3745-52-34(C)(1)(b)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |

* NOT EVALUATED SINCE FACILITY CEASED OPERATIONS [Facility Name/Inspection Date] 5/18/09, CRO FORMS WERE COMPLETED, AND ALL REMAINING HAZARDOUS WASTE WAS SENT OFF-SITE ON 6/5/09.

| | | |
|-----|---|--|
| 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)] ADDED DATE DURING INSPECTION | Yes <input type="checkbox"/> No <input checked="" 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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| 50. | If the generator places incompatible wastes, or incompatible wastes and materials in the same container, is it done in accordance with 3745-65-17(B)? [3745-66-77(A)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input 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)] SEE PICTURES IN FILE. | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
|-----|---|--|

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 **REVIEWED INSPECTION LOGS FOR 2000, 1999, 2004, 2002, & 5/1/08 THROUGH 5/11/09 - No INDICATION OF LEAKERS OR SPILLS.** tank, closure must also be completed in accordance with OAC 3745-66-97 (except for paragraph C of this rule). [3745-52-34]

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| PRE-TRANSPORT REQUIREMENTS | | |
|----------------------------|--|--|
| 53. | Does the generator package/label its hazardous waste in accordance with the applicable DOT regulations? [3745-52-30, 3745-52-31 and 3745-52-32(A)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| 54. | Does each container ≤119 gallons have a completed hazardous waste label? [3745-52-32(B)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| 55. | Before off-site transportation, does the generator placard or offer the appropriate DOT placards to the initial transporter? [3745-52-33] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |

SMALL QUANTITY UNIVERSAL WASTE HANDLER REQUIREMENTS – BATTERIES AND LAMPS

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

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

PROHIBITIONS

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

WASTE MANAGEMENT AND LABELING/MARKING

UNIVERSAL WASTE BATTERIES

- | | | |
|----|--|--|
| 3. | Are batteries that show evidence of leakage, spillage or damage that could cause leaks contained? [3745-273-13(A)(1)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| 4. | If batteries are contained, are the containers closed and structurally sound, compatible with the contents of the battery and lack evidence of leakage, spillage or damage that could cause leakage? [3745-273-13(A)(1)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| 5. | Are the casings of the batteries breached, not intact, or open (except to remove the electrolyte)? [3745-273-13(A)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |

UNIVERSAL WASTE LAMPS

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

NOTE: Treatment (such as crushing) by a UWH is prohibited under this rule unless the facility is permitted for such activities [3745-273-31(B)]. A generator crushing lamps must manage lamps according to hazardous waste rules (OAC Chapter 3745-52). Lamp crushing is a form of generator treatment (OAC rule 3745-52-34). Crushed lamps must be transported by a registered hazardous waste transporter to a permitted hazardous waste facility using a hazardous waste manifest.

- | | | |
|-----|--|--|
| 10. | Are the lamps or containers or packages of lamps labeled with the words "Universal Waste - Lamp(s)" or "Waste Lamp(s)" or "Used Lamp(s)"? [3745-273-14(E)] | Yes <input 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 proper recovery, treatment or disposal? (Burden of proof is on the handler to demonstrate) [3745-273-15(B)] (this change makes it like the LQUWH checklist) | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| <i>NOTE: Accumulation is defined as date generated or date received from another handler.</i> | | |
| 12. | Is the handler able to demonstrate the length of time the universal waste has been accumulated? [3745-273-15(C)] If yes, describe below: <i>Label observed on CF was dated w/ accumulation start date</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 | | |
| <i>NOTE: If a SQUWH self-transport waste, then the handler must comply with the Universal Waste transporter requirements.</i> | | |
| 17. | Are universal wastes sent to either another handler, destination facility or foreign destination? [3745-273-18(A)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| 18. | Is the handler aware of DOT requirements for packaging and shipping? If no, make aware of 49 CFR 171-180. | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| 19. | Prior to shipping universal waste off-site, does the originating handler ensure that the receiver agrees to receive the shipment? [3745-273-18(D)] (this change makes it like the LQUWH checklist) | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| 20. | Has the originating handler ever had an off-site shipment rejected by another handler or destination facility? | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> |
| a. | If yes, did the originating handler receive the waste back or agree to where the shipment was sent? [3745-273-18(E)(2)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input 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 of the following</u> : | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| a. | Send the waste back to the originating handler or send the shipment to a destination facility (If both the originating and receiving handler agree)? [3745-273-18(F)(2)] (this change makes it like the LQUWH checklist) | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input 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"/> |

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**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"/> |

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).

- | | | |
|----|--|--|
| 3. | Does the generator have documentation of how he determined whether the HW/soil meets or does not meet the LDR treatment standard in 2, above? [3745-270-07(A)(6)(a) or 3745-270-07(A)(6)(b)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| 4. | Does the generator keep the documentation required in #2, above, on-site for at least three years from the last date the HW/soil was sent on-site/off-site for treatment/disposal? [3745-270-07(A)(8)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| 5. | Does the generator generate a listed HW that exhibits a characteristic? If yes, | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| a. | Did the generator determine if the listed HW exhibits a characteristic that is not treated under the LDR treatment standard for the listed HW? [3745-270-09(A)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |

FOR EXAMPLE: F006 that exhibits the characteristic for silver or K062 that is corrosive, D002. Review LDR treatment standard in 3745-270-40 to determine what constituents the listed HW is treated for.

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

NOTE: This is done by evaluating which underlying hazardous constituents (UHC) are in the HW at levels above the universal treatment standards given in 3745-270-48. This requirement does not apply to high total organic carbon (i.e., contains >10% TOC) D001 wastes or listed HWs.

NOTE: Written documentation of this determination is not required.

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

NOTE If "Yes" see question #16.

- | | | |
|-----|--|--|
| 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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| 10. | Does the generator have a copy of the LDR notification form on file?[3745-270-07(A)(2)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| a. | Is the form kept on file for three years after last HW shipped? [3745-270-07(A)(8)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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"/> |

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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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> |
|-----|---|--|

| | | |
|-----|-------------------------------|---|
| 13. | Is the HW a metal-bearing HW? | Yes <input type="checkbox"/> No <input 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 one of the following conditions apply. [3745-270-03(c)] | |
|-----|----|--|--|

| | | | |
|--|----|--------------------|---|
| | i. | Contains > 1% TOC? | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
|--|----|--------------------|---|

| | | | |
|--|-----|---|---|
| | ii. | Contains organic constituents or cyanide at levels greater than the UTS levels? | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
|--|-----|---|---|

| | | | |
|--|------|--|---|
| | iii. | Is made up of combustible material e.g., paper, wood, plastic? | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
|--|------|--|---|

| | | | |
|--|-----|--|---|
| | iv. | Has a reasonable heating value (e.g., > 5000 Btu)? | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
|--|-----|--|---|

| | | | |
|--|----|--|---|
| | v. | Co-generated with a HW that must be combusted? | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
|--|----|--|---|

| | | | |
|--|----|---|---|
| | 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 type="checkbox"/> N/A <input type="checkbox"/> |
|--|----|---|---|

| | | |
|-----|---|--|
| 15. | Was the HW treated by wastewater treatment? | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> |
|-----|---|--|

| | | | |
|--|----|---|--|
| | 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 and contain ≥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 checked="" type="checkbox"/> N/A <input type="checkbox"/> | |
| | If "Yes"...complete the rest of the checklist. If "No"...stop...you are done. | | |
| a. | Does the generator have a written waste analysis plan (WAP) that describes the procedures he will follow to treat the HW/soil to the LDR treatment standard? [3745-270-07(A)(5)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| b. | Did the generator use a detailed chemical and physical analysis of the HW/soil in order to develop the WAP? [3745-270-07(A)(5)(a)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| <i>NOTE: This is a laboratory analysis but it does not have to be kept by the generator.</i> | | | |
| c. | Does the WAP contain all information necessary to treat the HW/soil to the LDR treatment standard? [3745-270-07(A)(5)(a)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| d. | Does the WAP include the testing frequency of the treated HW/soil to demonstrate that the LDR treatment standard is being met? [3745-270-07(A)(5)(a)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| e. | Does the generator keep the WAP on-site? [3745-270-07(A)(5)(b)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| f. | Is the WAP available for the inspector's review during the inspection? [3745-270-07(A)(5)(b)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| NOTIFICATION FORM FOR GENERATOR TREATMENT | | | |
| 17. | a. | Contains all information in #11 a-g above and | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input 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 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 type="checkbox"/> |
| | ii. | Maintain a copy of the notice onsite?[3745-270-09(D)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| | iii. | Include in the notification: [3745-270-09(D)(1)(a)] | |
| | 1. | Name & address of receiving landfill? | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| | 2. | Description of HW when generated? | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| | 3. | HW code when generated? | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| | 4. | Treatability group when generated? | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| | 5. | Underlying hazardous constituents present when generated? | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |
| | iv. | Contain the certification statement as required by 3745-70-07(B)(4)? | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> |

Mahoning Paint Corp 1/6/3/09
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