OhioEPA
State of Ohio Environmental Protection Agency

Northeast District Office

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Bob Taft, Governor
Bruce Johnson, Lieutenant Governor
Joseph P. Koncelik, Director

October 26, 2006

William Marstellar
2771 Henn Hyde Rd., NE
Warren, OH 44484

RE: CRAB CREEK INDUSTRIAL VILLAGE, (AKA. GENERAL FIREPROOFING)
OHD 004 470 795, MAHONING COUNTY, COMPLAINT 6825, 2ND NOV

Dear Mr. Marstellar:

On August 9, 2006, Frank Zingales and I, representing the Ohio Environmental Protection Agency (Ohio EPA), Division of Hazardous Waste Management, conducted a complaint inspection at the Crab Creek Industrial Village facility located at 229 E. Dennick, Youngstown, Ohio. The facility was inspected to determine its compliance with Ohio's hazardous waste laws found in Chapter 3734 of the Ohio Revised Code (ORC), and the rules promulgated thereunder in Chapter 3745 of the Ohio Administrative Code (OAC).

I sent you a notice of violation letter (NOV) letter on August 15, 2006 specifying the violations observed during the inspection. To date, Ohio EPA has not received a response to the August 15, 2006 NOV letter and the violations remain outstanding. In order to correct these violations, please submit the requested documentation to this office **within 15 days** of the date of this letter:

1. Waste Evaluation, OAC rule 3745-52-11:
   Any person who generates a waste, as defined in OAC rule 3745-51-02, must determine if that waste is a hazardous waste.

   The facility failed to evaluate the contents of 43 containers found inside the facility. The containers require immediate attention as several were in poor condition and had released their contents. The containers were located inside the eastern portion of the facility, west of the large concrete open area. The containers were labeled C01 through C24 by Ohio EPA during the inspection. Note that 20, 1-gallon containers scattered across the floor were grouped together and labeled as C20. A summary of Ohio EPA's container inventory is included with this correspondence.

   In order to abate this violation, the facility must evaluate the contents of each of the 43 containers, submit the results of the waste evaluation, and indicate how the wastes will be managed and disposed.

   A list of commercial facilities accepting hazardous waste in Ohio may be found at: http://www.epa.state.oh.us/dhwm/pdf/accepting.pdf

2. Waste Evaluation, OAC rule 3745-52-11:
   Any person who generates a waste, as defined in OAC rule 3745-51-02, must determine if that waste is a hazardous waste.

The facility failed to evaluate its spent fluorescent lamps. During the inspection, several waste lamps were observed in the office portions of the facility. The lamps were locatedin existing lamp fixtures and on the ground in a broken condition. The lamps may exhibit the toxicity characteristic for some heavy metals (i.e., mercury, lead, cadmium) and thus be a hazardous waste.

In order to abate this violation, the facility must evaluate the spent fluorescent lamps, submit the results of the waste evaluation, and indicate how the wastes will be managed and disposed.

A list of fluorescent lamp recyclers may be found at: http://www.epa.state.oh.us/ocapp/p2/wastex.html

Comments:

3. The following technical assistance documents are enclosed:
   - Identifying Your Hazardous Waste, Ohio EPA-SBAO, February 2000;
   - Universal Waste, Ohio EPA, December 2004;
   - Generator Requirement Summary Table; and
   - Generator Record Keeping Requirements Table.

4. Ohio EPA's Office of Compliance Assistance and Pollution Prevention (OCAPP) provides free compliance and pollution prevention assistance on environmental issues related to air, land and water. Should your facility be interested in receiving further information, please feel free to contact me or OCAPP. OCAPP may be contacted at: 800-329-7518 or http://www.epa.state.oh.us/opp/ocapp.html.

5. The Division of Hazardous Waste Management has created an electronic news service to provide you with quick and timely updates on events and news related to hazardous waste activities in Ohio. If you haven't already, we encourage you to sign-up for this free service. You can find more information at the following Web link http://www.epa.state.oh.us/dhwm/listserv.html. Please feel free to share this information with your colleagues.

Should you have any questions, please feel free to call me at (330) 963-1278. You can find copies of the rules and other information on the DHWM's web page at: http://www.epa.state.oh.us/dhwm.

Sincerely,

Wade Balser
District Representative
Division of Hazardous Waste Management

WB:dw
enclosures

cc: Larry C. Himes, Mahoning-Trumbull APC
ec: Natalie Oryshkewych, DHWM, NEDO
Harry Sarvis, DHWM, CO

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

E-mail this completed form to tammy.mcconnell@epa.state.oh.us or mail it to Tammy McConnell, Central Office	Ohio Environmental Protection Agency **RCRA SUBTITLE C SITE IDENTIFICATION/VERIFICATION FORM**	For Ohio EPA use only

2. Site EPA ID No.	**EPA ID Number:** OHD 004 470 795							
3. Site Name	**Name:** Crab Creek Industrial Village					**Website (optional:)**		
4. Site Location Information	**Street Address:** 229 E. Dennick Avenue							
	City, Town, or Village: Youngstown				**State:** OH			
	County Name: Mahoning				**Zip Code:** 44502			
5. Site Land Type (check only one)	**Private**	**County**	**District**	**Federal**	**Indian**	**Municipal**	**State**	**Other**
6. NAICS code(s) www.census.gov/epcd/www/naics.html	**A.**			**B.**				
	C.			**D.**				
7. Facility Representative:	**First Name:** William			**MI:**	**Last Name:** Marstellar			
	Phone Number:				**Phone Number Extension:**			
Additional names can be recorded in number 12.	**E-Mail Address:**							
	Fax Number:				**Fax Number Extension:**			
Only provide address information if it is different than the site address.	**Street or P.O. Box:** P.O. Box 2182							
	City, Town or Village: Youngstown							
	State: OH			**Country:** Mahoning		**Zip Code:** 44504		
8. Legal Owner and Operator of the Site List Additional Owners and/or Operators in the Comment Section or on another copy of this form page.	**A. Name of Site's Legal Owner:** William Marstellar			**Date Became Owner (mm/dd/yyyy):**				
	Owner Type: Mark with an X	**Privat**	**County**	**District**	**Federal**	**Indian**	**Municipal**	**State**	**Other**
	Street or P.O. Box: 2771 Henn Hyde Rd., NE							
	City, Town, or Village: Warren			**Owner Phone #:**				
	State: OH			**Country:**		**Zip Code:** 44484		
	B. Name of Site's Operator:			**Date Became Operator (mm/dd/yyyy):**				
	Operator Type: Mark with an X	**Private**	**County**	**District**	**Federal**	**Indian**	**Municipal**	**State**	**Other**
	Street or P.O. Box:							
	City, Town, or Village:			**Operator Phone #:**				
	State:			**Country:**		**Zip Code:**		

9. Violations Cited? [X] Yes [ ] No

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

[ ] **Not Regulated**

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

A. Hazardous Waste Activities

(choose only one of the following categories)

- [x] **UNKNOWN:** Cited for violation of 3745-52-11
- [ ] a. **Large Quantity Generator (LQG):**
- [ ] b. **Small Quantity Generator (SQG)**
- [ ] c. **Conditionally Exempt Small Quantity Generator**
- [ ] d. **United States Importer of Hazardous Waste**
- [ ] e. **Mixed Waste (hazardous and radioactive) Generator**
- [ ] **3. Treater, Storer or Disposer of Hazardous Waste**
- [ ] **4. Recycler of Hazardous Waste**
- [ ] **5. Exempt Boiler and/or Industrial Furnace**
  - [ ] a. Small Quantity On-site Burner Exemption
  - [ ] b. Smelting, Melting, Refining Furnace Exemption
- [ ] **6. Underground Injection Control Facility**

B. Universal Waste Activities

- [ ] **1. Small Quantity Handler of Universal Waste**

(Indicate types of universal waste generated and/or accumulated (check all boxes that apply):

- [ ] **2. Large Quantity Handler of Universal Waste**

(accumulates 5,000 kg or more).

- [ ] **3. Destination Facility for Universal Waste**

(Check all boxes below that apply for each of the three types of facilities above.)

	Generated	Accumulated
A. Batteries	[ ]	[ ]
B. Pesticides	[ ]	[ ]
C.Thermostats	[ ]	[ ]
D. Lamps	[ ]	[ ]

C. Used Oil Activities

- [ ] **1. Used Oil Generator**
- **2. Used Oil Transporter Indicate Type(s) of Activity(ies)**
  - [ ] Transporter
  - [ ] Transfer Facility
- **3. Used Oil Processor and/or Re-refiner**
  Indicate Type(s) of Activity(ies)
  - [ ] **Processor**
  - [ ] **Re-refiner**
- [ ] **4. Off-Specification Used Oil Burner**
- **5.** Used Oil Fuel Marketer -
  Indicate Type(s) of Activity(ies)
  - [ ] a. Marketer Who Directs Shipment of Off- Specification Oil
  - [ ] b. Used Oil to Off-Specification Used Oil Burner

11. Waste Codes for Federally Regulated Hazardous Wastes. Please list the codes for the federally regulated hazardous waste handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more space is needed. If there are more than 7 waste codes and they are the same as listed in the most recent RCRAInfo source record, you do not need to list them all. Instead just indicate the date of the most recent source record.

12. Comments: Use this area to describe whether the inspection was announced, whether the waste is stored in tanks or containers, etc.

YES	Announced ?	Additional Facility Representatives:	
No	Tanks?	Other comments: Complaint 6825	
YES	Containers?		

13. Name of Inspector(s)	Name of Inspector(s)	Date of Inspection/ Time (mm-dd-yyyy) (HH:MM)
Wade Balser	Frank Zingales	08-9-06 (0930-1150)

14. OPTIONAL CERTIFICATION. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature of owner, operator, or an authorized representative	Name and Title (Print)	Date (mm-dd-yyyy)