



**Environmental
Protection Agency**

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

February 28, 2012

**COSHOCTON COUNTY
GENERAL FILE
(COSHOCTON ETHANOL LLC)
DMWM/SEDO
OHR000147108**

Mr. Erik Chaffer
Plant Manager
Altra Coshocton Ethanol, LLC
18137 County Road 271
Coshocton OH 43812

Dear Mr. Chaffer:

On February 22, 2012, Donna Goodman and I intended to perform a hazardous waste inspection of the Coshocton Ethanol plant to determine its 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). However, based on our discussions, I understand that the facility ceased regulated operations in October 2008. We observed that your plant has implemented some site security measures; however, the required signage has not been posted at the access locations around the facility. Additionally, you have not submitted a copy of EPA Form 0327 to the required agencies. I understand that you will be working to meet these applicable CRO requirements; however, until I receive a signed 30 day-notification and the signage has been posted, Altra Coshocton Ethanol will remain in violation of the following regulation:

1) **OAC rule 3745-352-20(A)(1):(a)** Not later than thirty days after cessation of regulated operations, you must: (a) Submit a notice of cessation of regulated operations to the director (Ohio EPA), the local emergency planning committee, and the fire department using EPA Form 0327. (b) Secure the facility in accordance with rule 3745-352-30 of the Administrative Code...

(A) You will be in violation of paragraph (A) of this rule until the completed Form 0327 has been submitted to the above cited agencies (please provide a copy to me at the Southeast District Office).

(B) Additionally, OAC rule 3745-352-30(B) requires you to post warning signs (using the language included in this rule) to be posted at a minimum "at all facility access locations". Given the size of the facility, signs on each side of the property should also be posted in addition to each facility entrance. You also must record the condition of each entry barrier, security measure and warning signage in a log. To demonstrate compliance with this portion of the rule, provide photographs showing the appropriate signage has been posted around the facility and a copy of the weekly inspection log.

Southeast District Office
2195 Front Street
Logan, OH 43138-8637

740 | 385 8501
740 | 385 6490 (fax)
www.epa.ohio.gov

Altra Coshocton Ethanol must immediately take the necessary measures to return to compliance with Ohio's environmental laws. **Within 10 days** of receipt of this letter, you are requested to provide documentation to this office including the steps taken to abate the violations cited above. Documentation of steps taken to return to compliance includes written correspondence, updated policies, and photographs, as appropriate, and may be submitted via the postal service or electronically to rich.stewart@epa.ohio.gov.

Please be advised that violations cited above will continue until the violations have been properly abated. Failure to comply with Chapter 3734. of the Ohio Revised Code and rules promulgated thereunder may result in a civil penalty. It is imperative that you return to compliance. If circumstances delay the abatement of violations, you are requested to submit written correspondence of the steps that will be taken by a date certain to attain compliance.

I look forward to receiving your CRO 30-day certification, photographs of the required signage and a copy of the weekly inspection log as soon as possible. You should also review the 90-day requirements and prepare to submit that documentation or request a waiver from these requirements.

I have attached a copy of the checklists that I used to evaluate this facility. If you have any questions, please call me at (740) 380-5278.

Sincerely,



Richard Stewart
District Representative
Division of Materials & Waste Management

RS/sb

Attachments

cc: w/o attachments:
Ralph McGinniss, DMWM, 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.

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

Site EPA ID No.	EPA ID Number: OHR000147108	
Site Name	Name: Altra Coshocton Ethanol, LLC	Website: (Optional)
Site Location Information	Street Address: 18137 County Rd 271	
	City, Town, or Village: Coshocton	State: OH
	County Name: Coshocton	Zip Code: 43812
Site Land Type (check only one)	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"/>	
NAICS code(s) www.census.gov/epcd/www/naics.html		

Facility Representative	First Name: Erik	MI:	Last Name: Chaffer
Additional names can be recorded in number 12	Title: Plant Manager		
	Phone Number: 740-623-3050	Phone Number Extension:	
Only provide address information if it is different than the site address	E-Mail Address:		
	Fax Number:	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: Altra, Inc		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: San Diego		Owner Phone #:	
	State: CA		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:

VIOLATIONS CITED?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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TYPE OF HANDLER - MARK "X" AS APPROPRIATE

<input checked="" type="checkbox"/> Not a HW Generator	<input type="checkbox"/> UNKNOWN: Cited for violation of 3745-52-11 <input type="checkbox"/> 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
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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 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 Used Oil
- 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.

- College or University
- Teaching hospital that is owned by or has a formal written affiliation agreement with a college or university
- 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 Yes No Additional Facility Representatives:
Tanks Yes No
Containers Yes No

Name of Inspector(s)	Name of Inspector(s)	Date of Inspection/Time (mm/dd/yyyy) (hh:mm)
Rich Stewart	Donna Goodman	02/22/2012 13:15

Comments:

Facility no longer operating and is for sale.

**CONDITIONALLY EXEMPT SMALL QUANTITY GENERATOR REQUIREMENTS
COMPLETE AND ATTACH A PROCESS, WASTE, P2 SUMMARY SHEET**

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:

WASTE EVALUATION

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"/>
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GENERATOR CLASSIFICATION

2.	Does the generator produce <100 kg. of hazardous waste per month? [conditionally exempt small quantity generator ("CESQG")]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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NOTE: If quantities of hazardous waste accumulated on-site at any one time exceed 1,000 Kg. - or the generator produces between 100 and 1,000 Kg. of hazardous waste per month, it is operating as a Small Quantity Generator ("SQG"). If so, complete the Small Quantity Generator Requirements checklist.

OFF-SITE SHIPMENT OF HAZARDOUS WASTE

3.	Does the CESQG ensure delivery of hazardous waste(s) to an off-site permitted TSD? [3734.02(F)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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TREATMENT OF HAZARDOUS WASTE

4.	Does the generator treat hazardous waste in a:	
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 the CESQG conducts treatment they are subject to the LQG requirements.

NOTE: If waste is treated to meet LDRs, use LDR checklist.

MIX HAZARDOUS WASTE WITH USED OIL

5.	Does the CESQG mix its hazardous waste with used oil for the purpose of burning for energy recovery? [3745-51-05(J)] If so:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
a.	Does the CESQG manage the mixture in accordance with 3745-279-21?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

PROCESS, WASTE, P2 SUMMARY SHEET

Facility Name: Altra Ethanol, LLC Facility Type: LQG SQG CESQG TSD Non-Generator Date of Inspection: 2/22/12
 EPA ID# OHR000147108

Waste Generated			On- or Off-Site Management		P2 Activities	
Process/Activity Generating Waste <small>(e.g. plating bath, machining, baghouse, painting, general maintenance, etc)</small>	Waste Description <small>(e.g. sludge, solvent, ash, used oil, spent lamps, etc.) and EPA Waste Code, if applic.</small>	QTY Generated per Month, Type of Accumulation (container, tank, etc) and location of waste accumulation area	Type of On-Site Treatment <small>(recycle, wwt, etc)</small>	Name, state, and type of activity occurring at the off-site facility.	Current P2 Activities	P2 Opportunities
1						
2						

REMARKS-GENERAL INFORMATION

General Process Information:

Altra Ethanol produced ethanol fuel from corn using fermentation and distillation, no hazardous wastes are currently generated.

Regulatory/Enforcement History (if applicable):

No information was found in DHWM's files.

Additional P2 remarks and information:

NA

Would this facility be interested in a P2 assessment? Yes* No *If yes, refer promptly to your district P2 coordinator.

Office of Compliance Assistance and Pollution Prevention - 1-800-329-7518 or p2mail@epa.state.oh.us or www.epa.state.oh.us/ocapp/ocapp.html

Other:

PERMANENT CESSATION OF REGULATED OPERATIONS CHECKLIST

INSPECTION INFORMATION			
NAME		AFFILIATION	PHONE NUMBER
Inspectors:	Rich Stewart/Donna Goodman	DMWM-SEDO	740-380-5278
Inspection Dates:	2/22/12	Time:	13:15
Inspection Announced?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	If so, how much advance notice given?	none
Facility: Rep(s)	Erik Chaffer, Plant Manager		

30-DAY REQUIREMENTS

1.	Did the owner/operator of the reporting facility submit a notice of the cessation of all regulated operations (CRO) on a form prescribed by the Director to the following within 30 days of CRO: [ORC 3752.04 and OAC rule 3745-352-20(A)(1)(a)]		
	a.	Director of Ohio EPA?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	b.	Local Emergency Planning Committee?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	c.	Local Fire Department?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
2.	Did the owner/operator designate a contact person? [ORC §3752.05 and OAC rule 3745-352-20(A)(1)(c)]		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
3.	Did the owner/operator include the following information about the contact person: [ORC §3752.05(B) and OAC rule 3745-352-35(B)]		
	a.	Address of principal office of the owner/operator?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	b.	Business or residence address?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	c.	Telephone number of contact person?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
4.	Has the contact person changed? [ORC §3752.05(C) and OAC rule 3745-352-35(D)]		Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
5.	If the contact person changed his/her address or telephone numbers, did the owner/operator or contact person provide the Director with the new address or telephone number? [ORC §3752.05(D) and OAC rule 3745-352-35(D)]		Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

NOTE: The owner/operator is also required to secure the facility and post warning signs within 30 days of CRO.

90-DAY REQUIREMENTS [ORC §3752.06]

6.	Did the owner/operator make a written certification to Ohio EPA's Director concerning the completion of the removal action within 90 days after CRO? [ORC §3752.06(A)(6) and OAC rule 3745-352-20(A)(2)(g)]		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
<i>NOTE: The owner/operator may receive approval from the Director to extend the 90-day period. [ORC §3752.06(B) and OAC rule 3745-352-20(A)(3)].</i>			
7.	Does the owner/operator hold a valid hazardous waste facility installation and operation permit or renewal permit or has obtained a generator identification number issued under the state's hazardous waste program? [ORC §3752.06(C) and OAC rule 3745-352-20(A)(2)(h)]		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

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8.	Did the owner/operator submit to the Director a copy of the most recent emergency and hazardous chemical inventory form that was submitted to the State Emergency Response Commission (SERC), including a statement indicating whether any asbestos-containing materials are present at the facility? [ORC §3752.06(A)(1) and OAC rule 3745-352-20(A)(2)(a)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
9.	Did the owner/operator submit to the Director a copy of the current hazardous chemical list or each material safety data sheet that the owner/operator is required to have on file with the SERC? [ORC §3752.06(A)(2) and OAC rule 3745-352-20(A)(2)(b)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
10.	Did the owner/operator submit a list of every stationary tank, vat, electrical transformer, and vessel of any type that contains or is contaminated with regulated substances and that is to remain at the facility? [ORC §3752.06(A)(3) and OAC rule 3745-352-20(A)(2)(c)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
11.	Did the owner/operator drain or remove all regulated substances from each stationary tank, vat, electrical transformer, and vessel and from all piping, which is to remain at the facility? [ORC §3752.06(A)(4) and OAC rule 3745-352-20(A)(2)(d)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
12.	Did the owner/operator do the following:	
	a. Transfer the regulated substances to another facility owned or operated by the owner/operator? [ORC §3752.06(A)(4)(a) and OAC rule 3745-352-20(A)(2)(d)(i)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
OR		
	b. Transfer ownership of the regulated substances to another person through sale or otherwise? [ORC §3752.06(A)(4)(b) and OAC rule 3745-352-20(A)(2)(d)(ii)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
OR		
	c. Transfer the regulated substances off-site in compliance with applicable waste management laws? [ORC §3752.06(A)(4)(c) and OAC rule 3745-352-20(A)(2)(d)(iii)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
13.	Did the owner/operator remove from the facility all debris, non-stationary equipment and furnishings, non-stationary containers, and motor vehicles and rolling stock that contain or are contaminated with a regulated substance? [ORC §3752.06(A)(5) and OAC rule 3745-352-20(A)(2)(d)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
14.	Did the owner/operator do the following:	
	a. Transfer the debris, equipment, furnishings, containers, and motor vehicles and rolling stock to another facility owned and operated by the owner/operator? [ORC §3752.06(A)(5)(a) and OAC rule 3745-352-20(A)(2)(d)(i)].	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
OR		
	b. Transfer ownership of the debris, equipment, furnishings, containers, and motor vehicles, and rolling stock to another person through sale or otherwise? [ORC §3752.06(A)(5)(b) and OAC rule 3745-352-20(A)(2)(d)(ii)].	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
OR		

	c.	Cause the debris, equipment, furnishings, and containers to be transported off-site in compliance with applicable waste management laws and regulations? [ORC §3752.06(A)(5)(c) and OAC rule 3745-352-20(A)(2)(d)(iii)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
15.		Did the owner/operator record in a log the standard industrial method used to remove the regulated substance from each item? [OAC rule 3745-352-20(A)(2)(e)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
SECURITY & WARNING SIGNS REQUIREMENTS OF OWNER/OPERATOR [ORC §3752.07 AND OAC RULE 3745-352-30]			
16.		Did the owner/operator secure the facility against unauthorized entry using one or more of the following as provided in OAC rule 3745-352-30(A)(1)-(5) within 30 days of CRO?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	a.	Boarded, locked or used other means to secure all windows, doors and other potential means of entry?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b.	Fencing?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c.	Lighting and a surveillance system?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d.	Guard or security service?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	e.	Demonstrated to the satisfaction of the Director or his/her designee that the proposed security measures secure against unauthorized entry?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
17.		Did the owner/operator post the appropriate warning signs in the following fashion within 30 days of CRO? [ORC §3752.07(A) and OAC rule 3745-352-30(B)]:	
	a.	Prohibit trespassing and state: "The building, structure, or outdoor location of operations contains or is contaminated with regulated substances that may endanger public health or safety if released into the environment." [OAC rule 3745-352-30(B)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	b.	Are warning signs posted on or reasonable proximate to, the building, structure or outdoor location in sufficient number to alert people? [OAC rule 3745-352-30(B)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	c.	Posted on or reasonably proximate to, locations that contains ignitable regulated substances and includes the language, "No Smoking?" [OAC rule 3745-352-30(B)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d.	Legible from a distance of at least 25 feet? [OAC rule 3745-352-30(B)(3)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	e.	Constructed to withstand weather and affixed to secure against removal? [OAC rule 3745-352-30(B)(4)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
18.		Are entry barrier and warning signs maintained to secure against unauthorized entry by the following measures listed below: [OAC rule 3745-352-30(C)]	
	a.	Inspected weekly or as agreed by the Director or his/her designee, county sheriff's department or local police department? [OAC rule 3745-352-30(C)(1)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>

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b.	The condition is recorded in an inspection log? [OAC rule 3745-352-30(C)(2)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
c.	Prompt repair or replacement after discovery of damage, lost or removed? [OAC rule 3745-352-30(C)(3)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

ADDITIONAL MULTI-MEDIA QUESTIONS

If the owner/operator holds a valid hazardous waste installation and operation permit or renewal permit or has obtained a generator identification number issued under the state's hazardous waste program, the following four questions may apply.

19.	If the facility has an U.S. EPA I.D. number, has the owner/operator submitted a deactivation request letter?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
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NOTE: The inspector should submit a copy of the final CRO letter to Central Office's Regulatory and Information Services Section for I.D. deactivation. If the facility continues to need its I.D. number, the inspector should instruct the owner/operator to submit a deactivation request letter once the I.D. is no longer needed.

20.	Were there any <90 day accumulation units for hazardous waste?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
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List Where Unit(s) Were/Are:

21.	Did the owner/operator close his facility in a manner that: [OAC 3745-66-11]	
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a.	Minimizes the need for further maintenance?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
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b.	Controls, minimizes, or eliminates, to the extent necessary to protect human health and the environment, post-closure escape of hazardous waste, hazardous constituents, leachate contaminated run-off, or hazardous waste decomposition products to the groundwater, or surface waters, or to the atmosphere?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
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c.	Complies with the closure requirements of OAC rules 3745-66-10 to 3745-66-20, 3745-66-97, 3745-67-28, 3745-67-58, 3745-67-80, 3745-68-10, 3745-68-51, 3745-68-81 and 3745-69-04?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
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22.	During the partial and final closure periods, were all contaminated equipment, structures, and soil properly disposed or decontaminated unless otherwise specified in OAC rules 3745-66-97, 3745-67-28, 3745-67-58, 3745-67-80 or 3745-68-10?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
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NOTE: If necessary, the inspector should supply the owner/operator with the requirements for generator closure and inform them they must close all unit(s) and have documentation that closure was completed (LQGs only) A thorough hazardous waste inspection should be conducted for a subject TSD facility with more stringent requirements. <http://www.epa.state.oh.us/dhwm/guidancedocs.html#closure>

a.	Were generated hazardous wastes handled in accordance with all applicable requirements of Chapter 3745-52 of the Administrative Code?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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23.	Will there be building demolition or renovation? If yes: Not yet known.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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	Has a <i>Notification of Demolition and Renovation Form</i> been submitted?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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NOTE: Facility demolition work (even partial demolition) requires notification to Ohio EPA or local air agency regardless of whether asbestos is involved as required by the National Emission Standard for Hazardous Air Pollutants (NESHAPS) Standard for Asbestos. Notification requirements are found in OAC 3745-20-03 and 40 CFR

§61.145(b). The notification form is available from Ohio EPA's web page at <http://www.epa.state.oh.us/dapc/atu/asbestos/asbestos.html>

The inspector should check with DAPC or local air authority to determine if a notification form has been submitted. If notification was not submitted, the inspector should provide the form to the facility.

24.	Are there any wells on the property?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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	If yes, where are the wells?	West side of property, between buildings and river
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	What are the wells used for?	Drinking water and process water
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NOTE: If a well is used for drinking water, the inspector should inform DDAGW.

25.	Is there open dumping of solid waste on the property?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
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NOTE: The inspector should inform DSIWM about open dumping of solid waste.