



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

March 11, 2009

RE: HUKILL CHEMICAL CORPORATION
TSD/LQG/TRANSPORTER
OHD001926740/02-18-0315
CUYAHOGA
NOV/PRTC

Mr. Tim Jones
EH&S Manager
Hukill Chemical Corporation
7013 Krick Road
Bedford, OH 44146

Dear Mr. Jones:

On February 24 and 26, 2009, I conducted a compliance evaluation inspection at Hukill Chemical Corporation (HCC), located at 7013 Krick Road, Bedford, Ohio. I inspected HCC to determine its compliance with Ohio's hazardous waste laws as found in Chapter 3734. of the Ohio Revised Code (ORC) and Chapter 3745. of the Ohio Administrative Code (OAC). HCC was represented by Jeff McGlynn on February 24 and by you on February 26. Ohio EPA was represented by me.

This inspection included a facility walk through, review of outbound manifests and LDR forms, review of inbound manifests and their corresponding waste processing sheets, weekly and daily inspection checklists, waste profile sheets, the daily drum inventory log, and the daily bulk solvent inventory sheet. The annual hazardous waste refresher training is scheduled to be given on April 6, 2009. The contingency plan was not reviewed during the inspection since it can be found in the part B permit application.

I have enclosed copies of the inspection checklists for your records and copies of the photographs that I took. During the inspection, I found the following violations of Ohio's hazardous waste laws:

1. **Permit Condition C.1(a). The Permittee may not store containers of hazardous waste in an area that is not authorized by the terms and conditions of the hazardous waste operating permit.**

During the facility walk through I noted at least forty nine, 55 gallon drums sitting on the East Pad under the canopy. While I was inspecting that set of drums, another group closer to the manifold area was being moved back into the container storage room. I was unable to determine how many drums were in the second group.

When I first arrived at the facility I was told that on February 20, 2009, the auger became inoperable and the facility is waiting for a replacement part to arrive. I was also told that the drums I noticed in the unauthorized area had been placed on the East Pad the morning of the 24th to make it easier to get to the auger. I suggested that a better place to store the drums until the auger is repaired would be in the staging areas since the permit authorizes those areas for temporary storage of containers of hazardous waste. I also discussed that in the future I should be notified anytime a piece of equipment used in hazardous waste management malfunctions, and that the event must be documented in the facility's operating record by noting the problem on the correct inspection checklist(s).

The violation was abated by the afternoon of the first day of the inspection when I verified that the drums had been moved back into the container storage room. However, to demonstrate compliance with the operating record requirements, please submit to my attention the following:

- a. Inspection checklist(s) that note the days that the auger was out of service;
 - b. the number of hazardous waste containers that had to be stored in the staging areas while the auger was down; and,
 - c. paperwork documenting that the auger has been repaired.
2. **Ohio Administrative Code (OAC) 3745-273-13(D)(1). Standards for universal waste lamps, failure to store lamps in a closed container; and**
 3. **OAC rule 3745-273-14(E). Labeling requirements.**

There were a number of closed and properly labeled cardboard boxes containing universal waste lamps stacked in the area where universal waste and electronic waste are stored. Somewhere in the middle of the pile of boxes were roughly ten, fluorescent bulbs that were taped together but were not containerized or appropriately labeled. The lamps had been shipped to Hukill in that manner. I suggested that the bulbs be placed into a cardboard box. On February 26, 2009, I observed that the lamps had been placed into a labeled and closed cardboard box. **These UW violations have been abated and no further information is requested.**

4. **Permit condition D.6 (b) and (e). Inspection Schedules and Procedures.**

During the facility walk through, as we walked by the 7-Tank dike where 7 hazardous waste store tanks are located, I asked how the facility tests that the high level alarms are working. I was told that they are not tested since they no longer work and that tanks 57 and 59, located in the 7-Tank dike, have been taken out of service.

Hukill is in violation of this permit condition for failing to record on the inspection checklists that the high level alarms no longer work. The checklist used for the inspections is found on page 000343 of the permit. None of the checklists that were reviewed during this inspection or the last several inspections note that the high level alarms are not working. To demonstrate a return to compliance, Hukill must do the following:

- a. Determine if any of the high level alarms in the 7-tank dike work.
- b. Verify that tanks 52, 53 and 55 have operating high level alarms.
- c. Provide a time line for new high level alarm installation on those tanks that need one.
- d. For those tanks with high level alarms that don't work describe the management practices being used to make sure that overfill does not occur.

The inspection checklist found in the Part B permit application (Exhibit F-7 permit application paged 000343) should be updated to contain only items that are actually inspected daily. The modified checklist will need to be submitted as a permit modification.

On March 11, 2009, I received by email HCC's response to the above violation. The response discussed in detail the four items outlined above. The management practice being used to make sure that overflow does not occur on those tanks without high level alarms appears to be working. Ohio EPA finds the replacement schedule for the high level alarms acceptable and acknowledges that economic conditions may cause adjustment to the time table such that high level alarms may be replaced over a longer period of time than initially outlined.

Based on the information in your letter received on March 11, 2009, the violation has been abated.

5. Permit Condition D.7(a) and (b). Response to spills and leaks.

If a tank system becomes unfit for continual use, the Permittee must close its tank system in accordance with OAC Rule 3745-55-97 and its closure plan.

Two permitted hazardous waste storage tanks have been taken out of service, Tank 57 and Tank 59. Permit condition D.7 (a) states, in part, that if a tank system becomes unfit for continued use, it must be taken out of service immediately. Unless the tank can be repaired and placed back into service, the Permittee must close its tank system in accordance with OAC Rule 3745-55-97 and its closure plan.

In order to abate this violation HCC must close Tanks 57 and 59. The partial tank closure plan can be found on page 000469 of the Part B permit application. Please provide a timeline for closure of these tanks and the dates they were taken out of service.

We discussed what is meant by inspection of a tank system once each operating day. The way that the rule is interpreted has changed. Inspecting a tank system once each operating day does not mean each day the facility is open for business, rather, it has been interpreted to mean each day a tank is holding hazardous waste. This interpretation can be found in ***Large Quantity Generator Tank Systems Requirements, June 2008:***

Ohio EPA interprets the requirement to inspect a tank "once each operating day" to be once each day that the tank system is being used to manage (accumulate or treat) hazardous waste. When employees are not present 7 days a week, there is a possibility to use a remote camera system, which could be used to inspect the tank system components required to be inspected each operating day. To satisfy the requirements of OAC rule 3745-66-95(A), the inspections must be documented, even when using a remote camera system.

Hukill will need to develop an inspection plan to insure that the hazardous waste storage tanks are inspected on those days that the facility isn't operating.

Please respond within 30 days of the date on this letter with the requested information. 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.

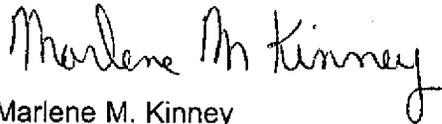
You can find copies of the rules and other information on the hazardous waste division's web page at <http://www.epa.state.oh.us/dhwm>. Ohio EPA also has helpful information about pollution prevention at the following web address: <http://www.epa.state.oh.us/opp>.

HUKILL CHEMICAL CORPORATION
MARCH 11, 2009
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The Division of Hazardous Waste Management has created an electronic news service to provide the regulated community with news related to hazardous waste activities in Ohio. If you haven't already, we encourage you to sign up for this free service by going to <http://www.epa.state.oh.us/dhwm/listserv>.

Should you have any questions or concerns, please do not hesitate to call me at (330) 963-1162.

Sincerely,



Marlene M. Kinney
Environmental Specialist
Division of Hazardous Waste Management

MMK:ddw

cc: Regional Offsite Administrator, DE-9J, USEPA Region V
Harry Sarvis, DHWM, CO
Natalie Oryshkewych, DHWM, NEDO
ec: Nyall McKenna, DHWM, NEDO

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

For Ohio EPA use only

E-mail this completed form to kristina.durnell@epa.state.oh.us
 or mail it to Kristina Durnell, Central Office

Site EPA ID No. Site Name Site Location Information Site Land Type (check only one) NAICS code(s) www.census.gov/epcd/www/naics.html	EPA ID Number: OHD001926740 Name: Hukill Chemical Corporation Website: _____ (Optional) Street Address: 7013 Krick Road City, Town, or Village: Bedford County Name: Cuyahoga State: OH Zip Code: 44146 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"/> 42469
Facility Representative Additional names can be recorded in number 12 Only provide address information if it is different than the site address	First Name: Tim MI: _____ Last Name: Jones Phone Number: 440-232-9400 Phone Number Extension: 1230 E-Mail Address: timj@hukill.com Fax Number: _____ Fax Number Extension: _____ Street or P.O. Box: _____ City, Town or Village: _____ Zip Code: _____ State: _____
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: Hukill Chemical Corporation Date Became Owner (mm/dd/yyyy): 07/14/1965 Owner Private County District Federal Indian Municipal State Other Type: <input checked="" type="checkbox"/> <input type="checkbox"/> Street or P.O. Box: 7013 Krick Road City, Town or Village: Bedford State: OH Owner Phone #: 440-232-9400 Country: USA Zip Code: 44146 Name of Site's Operator: Hukill Chemical Corporation Date Became Operator (mm/dd/yyyy): 7/14/1965 Operator Private County District Federal Indian Municipal State Other Type: <input checked="" type="checkbox"/> <input type="checkbox"/> Street or P.O. Box: 7013 Krick Road City, Town or Village: Bedford State: OH Operator Phone #: 440-232-9400 United States Zip Code: 44146

VIOLATIONS CITED? Yes No

TYPE OF HANDLER- A MINIMUM OF ONE BOX MUST BE CHECKED	
<input type="checkbox"/> Not a HW Generator <input type="checkbox"/> UNKNOWN: Cited for violation of 3745-52-11	<input checked="" type="checkbox"/> Large Quantity Generator (LQG) <input type="checkbox"/> Small Quantity Generator (SQG) <input type="checkbox"/> Conditionally Exempt Small Quantity Generator <input type="checkbox"/> U.S. Importer of Hazardous Waste <input type="checkbox"/> Mixed Waste (Hazardous and Radioactive) Generator

TYPE OF REGULATED WASTE ACTIVITY (MARK "X" IN ALL OF THE APPROPRIATE BOXES)

Recycler of Hazardous Waste
 Exempt Boiler and/or Industrial Furnace
 Underground Injection Control Facility
 Small Quantity On-Site Burner Exemption
 Hazardous Waste Transporter
 Smelting, Melting, Refining Furnace Exemption
 Treater, Storer or Disposer of Hazardous Waste

UNIVERSAL WASTE ACTIVITIES (INDICATE TYPES OF UNIVERSAL WASTE MANAGED (CHECK ALL BOXES THAT APPLY))

Small Quantity Handler of Universal Waste
 Destination Facility for Universal Waste
 Large Quantity Handler of Universal Waste
 (accumulates 5,000 kg. or more)

CHECK ALL BOXES BELOW THAT APPLY FOR THE TYPES OF UNIVERSAL WASTE THE FACILITY MANAGES

Batteries
 Pesticides
 Mercury containing equipment
 Lamps

USED OIL ACTIVITIES (INDICATE TYPE(S) OF ACTIVITY(S))

Used Oil Generator
 Used Oil Transporter
 Used Oil Transfer Facility
 Used Oil Processor
 Used Oil Re-refiner
 Off-Specification Used Oil Burner
 Used Oil Fuel Marketer Who Directs Shipment of Off-Spec. Oil
 Used Oil Fuel Marketer to Off-Specification Used Oil Burner

Waste Codes for Federally Regulated Hazardous Wastes. Please list the codes for the federally regulated hazardous waste handled at the site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page 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.

See Annual Report Or see **Hazardous Waste Permit**

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: **Tim Jones; Jeff McGlynn, Vince Valentino**
 Tanks Yes No Other Comments: **Facility transports and stores used oil but the used oil is managed as hazardous waste and is blended into chem fuel, therefore, the facility is not a used oil processor.**
 Containers Yes No

Name of Inspector(s) **Marlene Kinney** Name of Inspector(s) _____ Date of Inspection/Time (mm/dd/yyyy) (hh:mm) **2/24 and 26/2009**

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) _____

SMALL QUANTITY UNIVERSAL WASTE HANDLER REQUIREMENTS

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

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

PROHIBITIONS

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

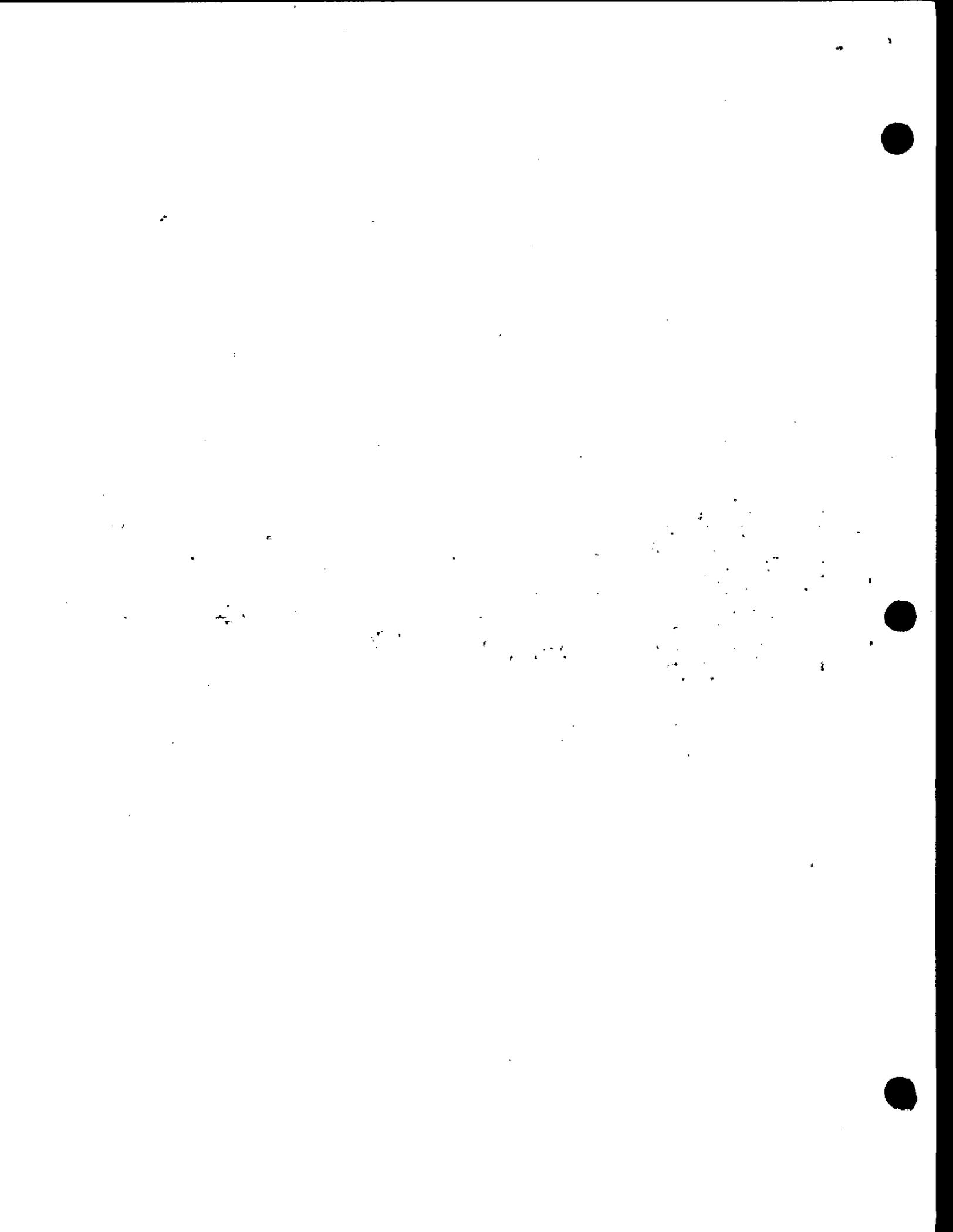
WASTE MANAGEMENT AND LABELING/MARKING

UNIVERSAL WASTE BATTERIES

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

UNIVERSAL WASTE PESTICIDES - None on-site 1 Box

8.	Does the SQUWH prevent releases to the environment by managing pesticides in containers that are closed, structurally sound, compatible with the pesticides, and lack evidence of leakage, spillage, or damage? [3745-273-13(B)(1)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
9.	If the original pesticide container is in poor condition, was it over-packed into an acceptable container? [3745-273-13(B)(2)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
10.	If the pesticide is stored in a tank, are the requirements of rules 3745-66-90 through 3745-66-101, except for paragraph (C) of 3745-66-97; 3745-66-100 and 3745-66-101 of the OAC met? (Use tank checklist) [3745-273-13(B)(3)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
11.	If pesticides are stored in a transport vehicle, is it closed, structurally sound, compatible with the pesticide(s), and does it lack evidence of leakage, spillage, or damage that could cause leakage? [3745-273-13(B)(4)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
12.	Are recalled universal waste pesticides that are in containers, tanks, or transport vehicles labeled with the label that was on or accompanied the product as sold or distributed and labeled with the words "Universal Waste Pesticides" or "Waste Pesticides?" [3745-273-14(B)(1)&(2)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
13.	Are unused pesticide products that are in containers, tanks, or transport vehicles labeled with either the label that was on the product when purchased (if still legible), the appropriate DOT label, or the designated label prescribed by the pesticide collection program and labeled with the words "Universal Waste Pesticides" or "Waste Pesticides?" [3745-273-14(C)(1)&(2)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>



UNIVERSAL WASTE THERMOSTATS <i>None noted on-site</i>		
14.	Have thermostats that show evidence of leakage, spillage or damage that could cause leaks been contained in a container that is closed, structurally sound, compatible with contents of the thermostats and lacks evidence of leakage, spillage or damage that could cause leakage? [3745-273-13(C)(1)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
15.	If the mercury-containing ampules are removed, does the SQUWH: [3745-273-13(C)(2)]	
a.	Remove the ampules in a manner to prevent breakage and is the removal done over or in a containment device? [3745-273-13(C)(2)(a)&(b)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
b.	Have a clean-up system readily available to transfer spilled mercury to another container that meets the requirements of OAC rule 3745-52-34 and is the spilled mercury transferred immediately? [3745-273-13(C)(2)(c)&(d)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
c.	Ensure that the area where ampules are removed is well ventilated and monitored in compliance with applicable OSHA exposure levels for mercury? [3745-273-13(C)(2)(e)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
d.	Ensure that employees are thoroughly familiar with the proper waste handling and emergency procedures? [3745-273-13(C)(2)(f)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
e.	Ensure that removed ampules are stored in closed, non-leaking containers that are in good condition? [3745-273-13(C)(2)(g)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
f.	Pack removed ampules in containers with packing material to prevent breakage during storage, handling and transportation? [3745-273-13(C)(2)(h)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
16.	When removing mercury containing ampules from thermostats if there are mercury or clean-up residues resulting from spills or leaks, and/or other waste generated (e.g., remaining thermostat units), has it been determined whether those exhibit a characteristic of hazardous waste identified in OAC rules 3745-51-20 to 3745-51-24? [3745-273-13(C)(3)(a)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
a.	If the residues, and/or wastes are characteristic, are they managed in compliance with Chapters 3745-50 through 3745-69, 3745-205, 3745-256, 3745-266, and 3745-270 of the Administrative Code? (The handler is considered the generator of the mercury, residues, and/or other waste and is subject to OAC Chapter 3745-52) [3745-273-13(C)(3)(b)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
17.	Are thermostats or containers of thermostats labeled either "Universal Waste-Mercury Thermostat(s)" or "Waste Mercury Thermostat(s)" or "Used Mercury Thermostat(s)"? [3745-273-14(D)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
UNIVERSAL WASTE LAMPS		
18.	Does the SQUWH contain lamps in containers or packages that are structurally sound, adequate to prevent breakage, and compatible with contents of the lamps? Are containers or packages closed and do they lack evidence of leakage, spillage or damage that could cause leakage? [3745-273-13(D)(1)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
19.	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"/>
<p>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.</p>		

unboxed lamps

20.	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 type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
ACCUMULATION TIME				
21.	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)]	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>				
22.	Is the handler able to demonstrate the length of time the universal waste has been accumulated? [3745-273-15(C)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	If yes, describe below:			
EMPLOYEE TRAINING				
23.	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				
24.	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"/>
25.	Is the material released characterized? [3745-273-17(B)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
26.	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>				
27.	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"/>
28.	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"/>
29.	Prior to shipping universal waste off-site, does the originating handler ensure that the receiver agrees to receive the shipment? [3745-273-18(D)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
30.	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"/>
31.	If a handler rejects a partial or full load from another handler, does the receiving handler contact the originating handler and discuss and do one of the following:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
a.	Send the waste back to the originating handler or send the shipment to a destination facility (If both the originating and receiving handler agree)? [3745-273-18(F)(2)] (this change makes it like the LQUWH checklist)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

32.	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 checked="" type="checkbox"/>	N/A <input checked="" type="checkbox"/>
EXPORTS				
33.	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 checked="" 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 checked="" 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 checked="" type="checkbox"/>	N/A <input checked="" type="checkbox"/>

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

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

Safety Equipment Used: *Hard Hat, Steel toe boots, safety goggles*

GENERAL REQUIREMENTS

1.	Have all wastes generated at the facility been adequately evaluated? [3745-52-11]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
2.	Are records of waste determination being kept for at least 3 years? [3745-52-40(C)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
3.	Has the generator obtained a U.S. EPA identification number? [3745-52-12]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
4.	Were annual reports filed with Ohio EPA on or before March 1 st ? [3745-52-41(A)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
5.	Are annual reports kept on file for at least 3 years? [3745-52-40(B)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
6.	Has the generator transported or caused to be transported hazardous waste to other than a facility authorized to manage the hazardous waste? [ORC 3734.02(F)]	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
7.	Has the generator disposed of hazardous waste on-site without a permit or at another facility other than a facility authorized to dispose of the hazardous waste? [ORC 3734.02(E) & (F)]	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
8.	Does the generator accumulate hazardous waste?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

NOTE: If the LQG does not accumulate or treat hazardous waste, it is not subject to 52-34 standards. All other requirements still apply, e.g., annual reports, manifest, marking, record keeping, LDR, etc.

9.	Has the generator accumulated hazardous waste on-site in excess of 90 days without a permit or an extension from the director ORC §3734.02 (E) & (F)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
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NOTE: If F006 waste is generated and accumulated for > 90 days and is recycled see 3745-52-34(G) & (H).

10.	Does the generator treat hazardous waste in a: [ORC 3734.02(E)&(F)]			
a.	Container that meets 3745-66-70 to 3745-66-77?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input 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 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 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 type="checkbox"/>

NOTE: Complete appropriate checklist for each unit.

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

11.	Does the generator export hazardous waste? If so:			
a.	Has the generator notified U.S. EPA of export activity? [3745-52-53(A)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
b.	Has the generator complied with special manifest requirements? [3745-52-54]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
c.	For manifests that have not been returned to the generator: has an exception report been filed? [3745-52-55]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
d.	Has an annual report been submitted to U.S. EPA? [3745-52-56]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

e.	Are export related documents being maintained on-site? [3745-52-57(A)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
MANIFEST REQUIREMENTS				
12.	Have all hazardous wastes shipped off-site been accompanied by a manifest? (U.S. EPA Form 8700-22) [3745-52-20(A)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
13.	Have items (1) through (20) of each manifest been completed? [3745-52-20(A)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
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)]				
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				
20.	Does the generator have a training program which teaches facility personnel hazardous waste management procedures (including contingency plan implementation) relevant to their positions? [3745-65-16(A)(2)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
21.	Does the personnel training program, at a minimum, include instructions to ensure that facility personnel are able to respond effectively to emergencies involving hazardous waste by familiarizing them with emergency procedures, emergency equipment and emergency systems (where applicable)? [3745-65-16(A)(3)(a-f)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
22.	Is the personnel training program directed by a person trained in hazardous waste management procedures? [3745-65-16(A)(2)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
23.	Do new employees receive training within six months after the date of hire (or assignment to a new position)? [3745-65-16(B)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
24.	Does the generator provide annual refresher training to employees? [3745-65-16(C)] Pending → April 6, 2009	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
25.	Does the generator keep records and documentation of:			
a.	Job titles? [3745-65-16D(1)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
b.	Job descriptions? [3745-65-16D(2)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

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

NOTE: The following section can be used by the inspector to document that all personnel who are involved with hazardous waste management have been trained. The employees who need training (written and/or on-the-job) may include the following: environmental coordinators, drum handlers, emergency coordinators, personnel who conduct hazardous waste inspections, emergency response teams, personnel who prepare manifest, etc.

Job Performed	Name of Employee	Date Trained

CONTINGENCY PLAN

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

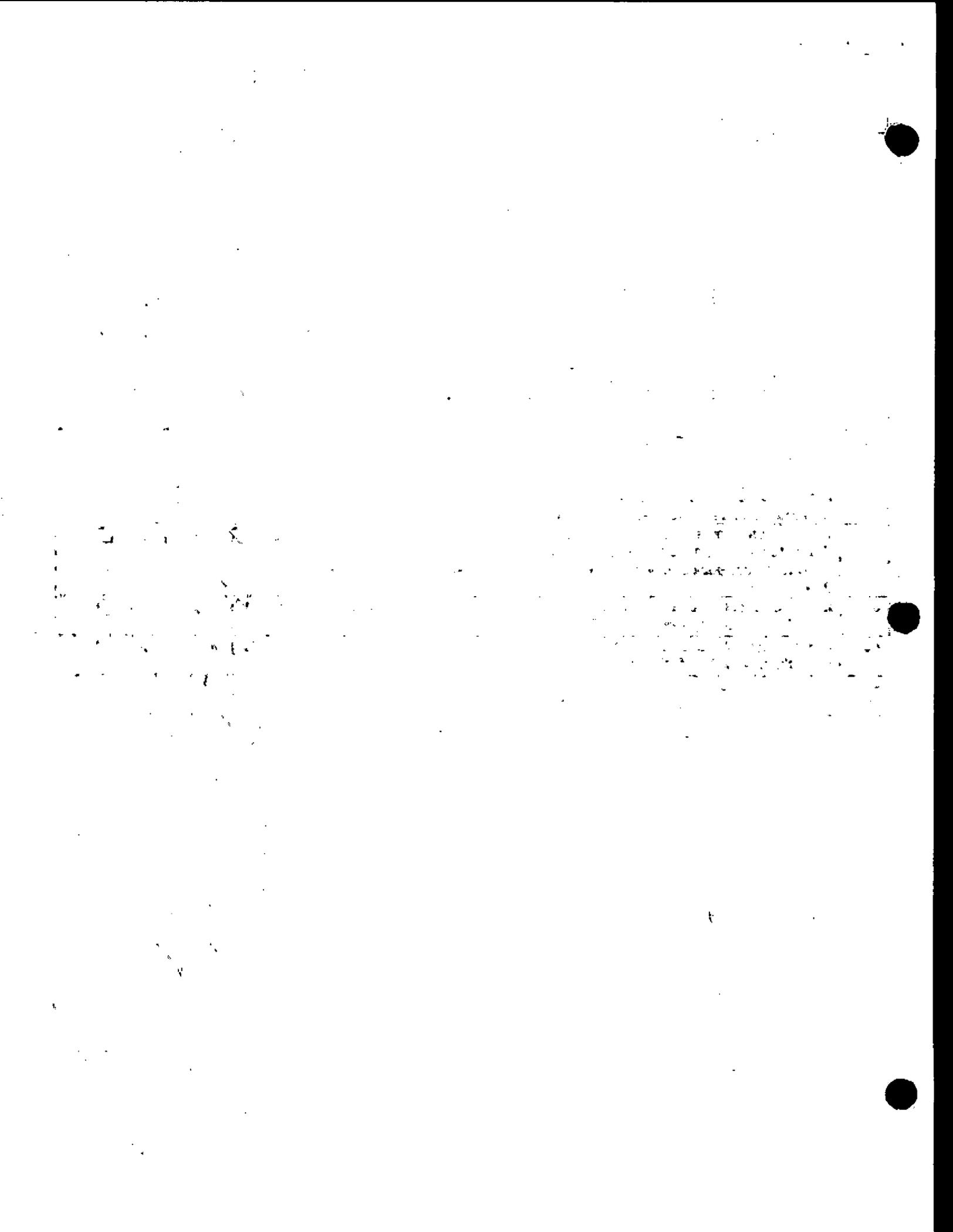
NOTE: If the facility already has a "Spill Prevention, Control and Countermeasures Plan" under CFR Part 112 or 40 CFR Part 1510, or some other emergency plan, the facility can amend that plan to incorporate hazardous waste management provisions that are sufficient to comply with OAC requirements. [3745-65-52(B)]

29.	Is a copy of the plan (plus revisions) kept on-site and been given to all emergency authorities that may be requested to provide emergency services? [3745-65-53 (A) & (B)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
30.	Has the generator revised the plan in response to rule changes, facility, equipment and personnel changes, or failure of the plan? [3745-65-54]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input 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 type="checkbox"/>

NOTE: The emergency coordinator shall be thoroughly familiar with: (a) all aspects of the facility's contingency plan; (b) all operations and activities at the facility; (c) the location and characteristics of waste handled; (d) the location of all records within the facility; (e) facility layout; and (f) shall have the authority to commit the resources needed to implement provisions of the contingency plan.

EMERGENCY PROCEDURES

32.	Has there been a fire, explosion or release of hazardous waste or hazardous waste constituents since the last inspection? If so:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
a.	Was the contingency plan implemented? [3745-65-51(B)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
b.	Did the facility follow the emergency procedures in 3745-65-56(A) through (H)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
c.	Did the facility submit a report to the Director within 15 days of the incident as required by 3745-65-56(J)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>



NOTE: OAC 3745-65-51(b) requires that the contingency plan be implemented immediately whenever there is a fire, explosion, or release of hazardous waste or hazardous waste constituents, which could threaten human health and the environment.

PREPAREDNESS AND PREVENTION

33.	Is the facility operated to minimize the possibility of fire, explosion, or any unplanned release of hazardous waste? [3745-65-31]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
34.	Does the generator have the following equipment at the facility, if it is required due to actual hazards associated with the waste:			
a.	Internal communications or alarm system? [3745-65-32(A)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
b.	Emergency communication device? [3745-65-32(B)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
c.	Portable fire control, spill control and decon equipment? [3745-65-32(C)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
d.	Water of adequate volume/pressure per documentation or facility rep? [3745-65-32(D)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

NOTE: Verify that the equipment is listed in the contingency plan.

35.	Is emergency equipment tested (inspected) as necessary to ensure its proper operation in time of emergency? [3745-65-33]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
36.	Are emergency equipment tests (inspections) recorded in a log or summary? [3745-65-33]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
37.	Do personnel have immediate access to an internal alarm or emergency communication device when handling hazardous waste (unless the device is not required under 3745-65-32)? [3745-65-34(A)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
38.	If there is only one employee on the premises, is there immediate access to a device (eg. phone, hand held two-way radio) capable of summoning external emergency assistance (unless not required under 3745-65-32)? [3745-65-34(B)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
39.	Is adequate aisle space provided for unobstructed movement of emergency or spill control equipment? [3745-65-35] <i>Getting crowded</i>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
40.	Has the generator attempted to familiarize emergency authorities with possible hazards and facility layouts? [3745-65-37(A)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
41.	Where authorities have declined to enter into arrangements or agreements, has the generator documented such a refusal? [3745-65-37(B)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

SATELLITE ACCUMULATION AREA REQUIREMENTS

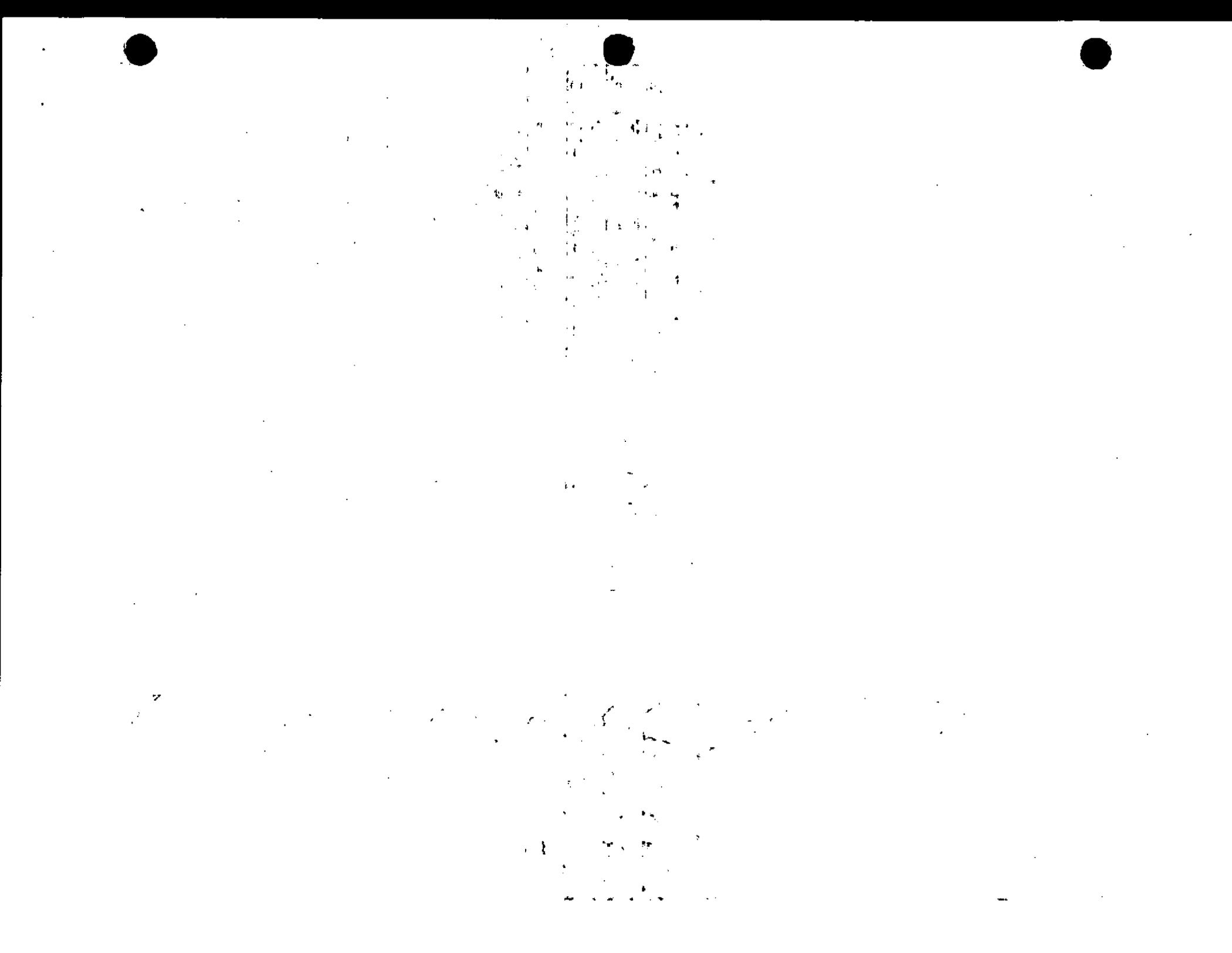
42.	Does the generator ensure that satellite accumulation area(s):			
a.	Are at or near a point of generation? [3745-52-34(C)(1)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
b.	Are under the control of the operator of the process generating the waste? [3745-52-34(C)(1)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
c.	Do not exceed a total of 55 gallons of hazardous waste per waste stream? [3745-52-34(C)(1)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
d.	Do not exceed one quart of acutely hazardous waste at any one time? [3745-52-34(C)(1)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
e.	Containers are closed, in good condition and compatible with wastes stored in them? [3745-52-34(C)(1)(a)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
f.	Containers are marked with words "Hazardous Waste" or other words identifying the contents? [3745-52-34(C)(1)(b)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
43.	Is the generator accumulating hazardous waste(s) in excess of the amounts listed in the preceding question? If so:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
a.	Did the generator comply with 3745-52-34(A)(1) through (4) or other applicable generator requirements within three days? [3745-52-34(C)(2)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

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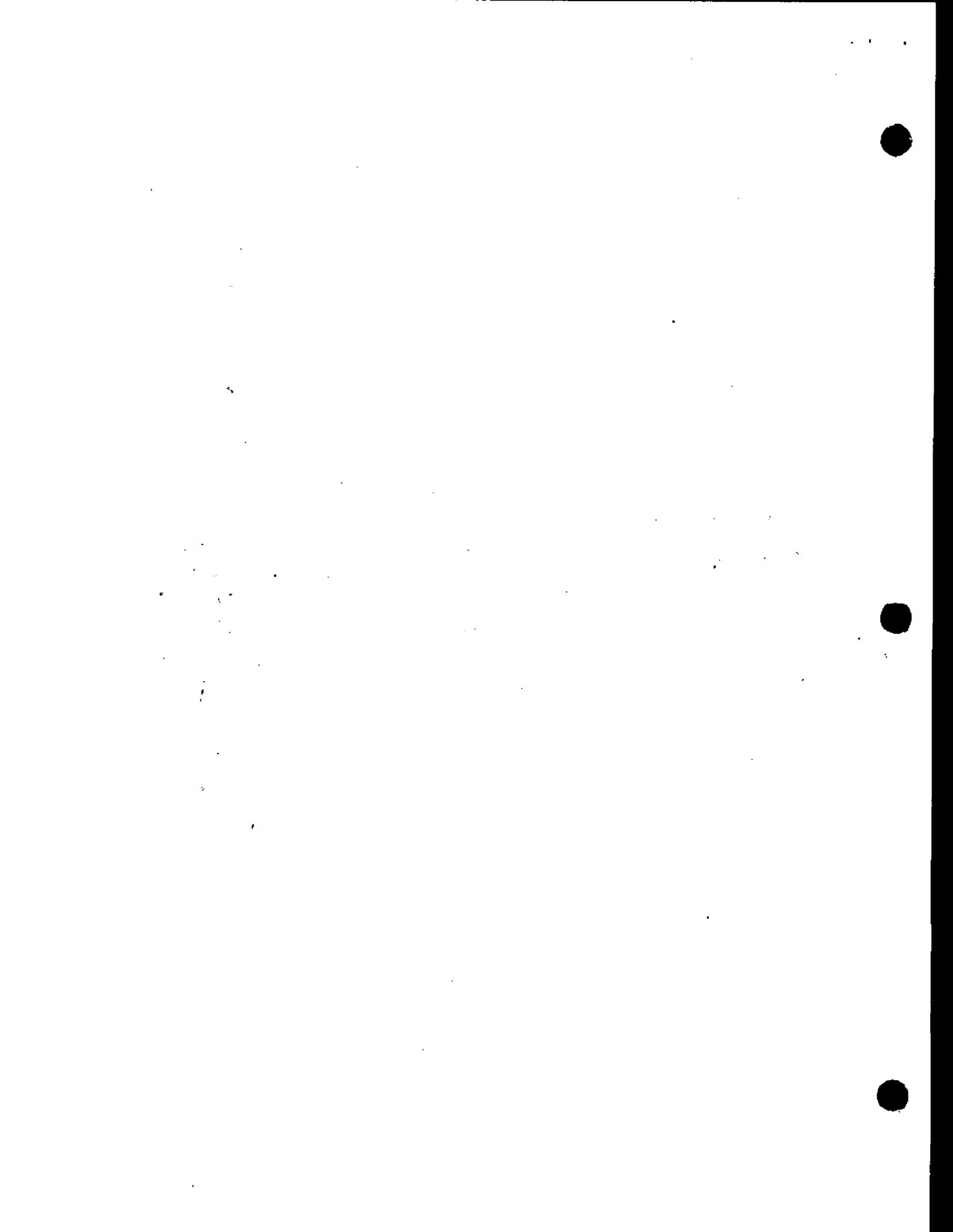
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b.	Did the generator mark the container(s) holding excess with the accumulation date when the 55 gallon (one quart) limit was exceeded? [3745-52-34(C)(2)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
NOTE: The satellite accumulation area is limited to 55 gallons of hazardous waste accumulated from a distinct point of generation in the process under the control of the operator of the process generating the waste (less than 1 quart for acute hazardous waste). There could be individual waste streams accumulated in an area from different points of generation.				
USE AND MANAGEMENT OF CONTAINERS IN <90 DAY ACCUMULATION AREAS				
44.	Has the generator marked containers with the words "Hazardous Waste?" [3745-52-34(A)(3)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
45.	Is the accumulation date on each container? [3745-52-34(A)(2)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
46.	Are hazardous wastes stored in containers which are:			
a.	Closed (except when adding/removing wastes)? [3745-66-73(A)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
b.	In good condition? [3745-66-71]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
c.	Compatible with wastes stored in them? [3745-66-72]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
d.	Handled in a manner which prevents rupture/leakage? [3745-66-73(B)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
NOTE: Record location on process summary sheets, photograph the area, and record on facility map.				
47.	Is the container accumulation areas(s) inspected weekly? [3745-66-74] Per ORC§1.44(A) "Week" means 7 consecutive days.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
a.	Are inspections recorded in a log or summary? [3745-66-74]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
48.	Are containers of ignitable or reactive wastes located at least 50 feet (15 meters) from the facility's property line? [3745-66-76]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
49.	Are containers of incompatible wastes stored separately from each other by means of a dike, berm, wall or other device? [3745-66-77(C)]	Yes <input 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 checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input 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 checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
NOTE: OAC 3745-65-17(B) requires that the generator treat, store, or dispose of ignitable or reactive waste, and the mixture or commingling of incompatible wastes, or incompatible wastes and materials so that it does not create undesirable conditions or threaten human health or the environment.				
52.	If the generator has closed a <90 day accumulation area does the closure appear to have met the closure performance standard of 3745-66-11? [3745-52-34(A)(1)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
NOTE: Please provide a description of the unit and documentation provided by the generator for the file to demonstrate that closure was completed in accordance with the closure performance standards. If the generator has closed a <90 day tank, closure must also be completed in accordance with OAC 3745-66-97 (except for paragraph C of this rule). [3745-52-34]				
PRE-TRANSPORT REQUIREMENTS — Generator is also a transporter				
53.	Does the generator package/label its hazardous waste in accordance with the applicable DOT regulations? [3745-52-30, 3745-52-31 and 3745-52-32(A)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
54.	Does each container <110 gallons have a completed hazardous waste label? [3745-52-32(B)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
55.	Before off-site transportation, does the generator placard or offer the appropriate DOT placards to the initial transporter? [3745-52-33]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

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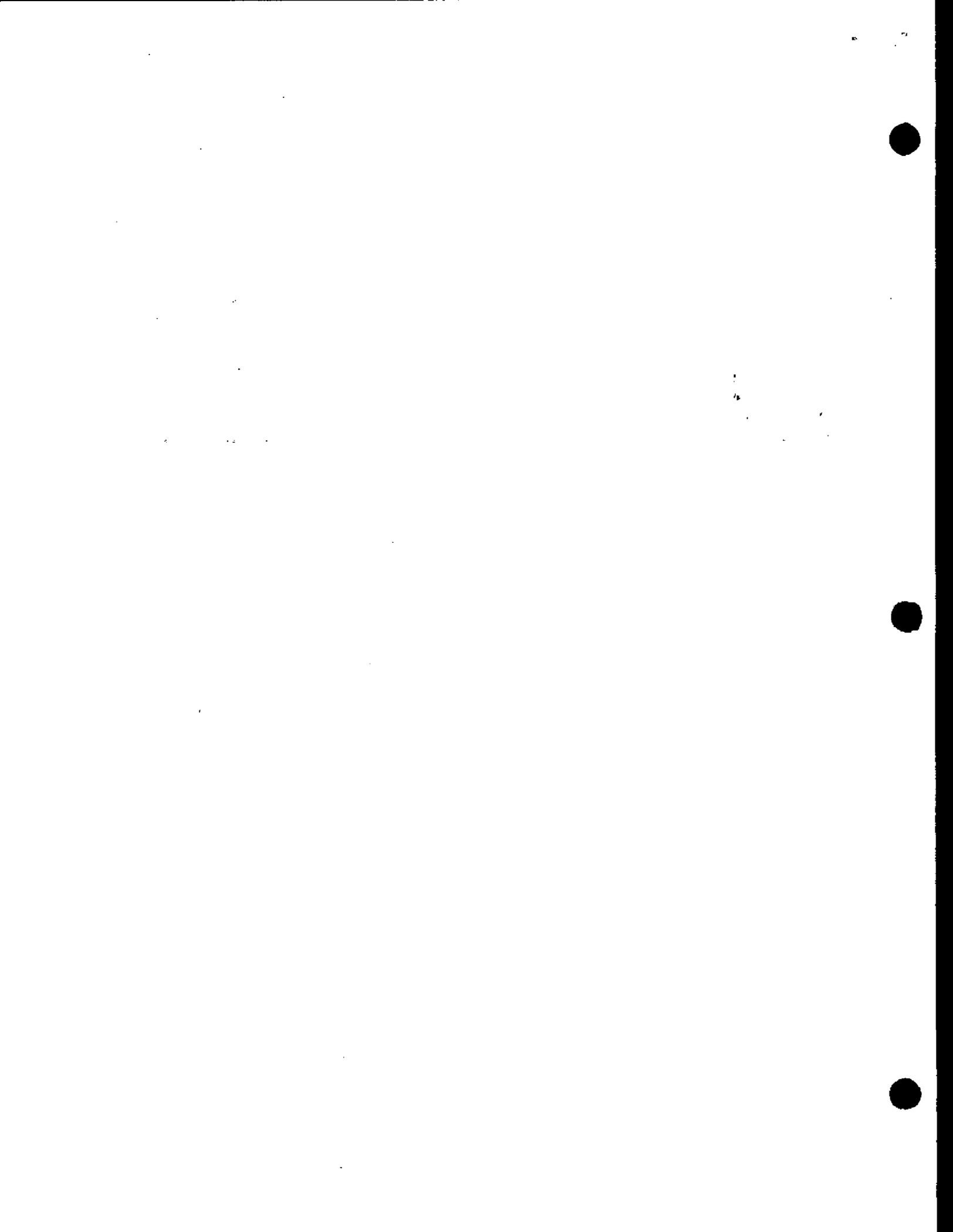
HAZARDOUS WASTE TRANSPORTER REQUIREMENTS

GENERAL INFORMATION

Please provide a brief description of site activity/waste handling procedures:

1.	Registration with Public Utilities Commission of Ohio [3745-53-11]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
2.	Has the transporter received a U.S. EPA ID number? [3745-53-11(B)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
3.	All hazardous wastes accepted have been accompanied by a manifest?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
a.	If no, was the waste generated by a CESQG or by a SQG shipped under a reclamation agreement? [3745-53-20(H)(1)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
4.	The transporter has signed the manifest as required by 3745-53-20 and carried the manifest with the waste shipment? [3745-53-20(C)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
5.	Manifests are retained for at least three years? [3745-53-22(A)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
6.	The transporter has delivered the entire quantity of waste accepted from the generator in accordance with manifest instructions?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
a.	If not, did the transporter contact the generator for further instructions and revise the manifest accordingly? [3745-53-21(A)(B)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
7.	For hazardous waste delivered by the original transporter to a rail or water transporter: Did the original transporter comply with the manifest handling requirements of 3745-53-20(E)(F)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
8.	For hazardous waste shipped out of the country: Has the transporter retained signed copies of the manifest for at least three years indicating that the waste left the U.S.A.? [3745-53-22(D)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
9.	Has the transporter ever had a discharge of hazardous waste during the time that the waste was under the transporter's control? If so:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
a.	Was immediate action taken? [3745-53-30(A)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
b.	Was Ohio EPA's Office of Emergency Response immediately notified as required by 3745-53-30(C)(1)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
c.	Did the transporter report in writing to Ohio EPA's Office of Emergency Response? [3745-53-30(C)(2)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
d.	Was the discharge cleaned up as required by Ohio EPA or a federal agency to remove hazard to human health or the environment? [3745-53-31]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
10.	Does the transporter store manifested hazardous wastes in containers temporarily while wastes are in transit? If so:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
a.	Are wastes stored for only ten days or less?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
b.	Do wastes remain properly DOT packaged during storage? [3745-53-12]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
<p>NOTE: Temporary storage in stationary tanks is not permitted under transfer facility requirements and such storage requires a RCRA permit and is subject to interim status requirements for storage facilities. Any type of storage by the transporter which is not specifically authorized under OAC 3745-53-12 transfer facility requirements is subject to full RCRA regulations.</p> <p>A "transfer facility" means any transportation-related facility, including loading docks, parking areas, storage areas and other similar areas where hazardous waste is held during the normal course of transportation. (This does not include the designated facility.)</p>				
11.	Does the transporter import hazardous waste into the United States? If so:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
a.	Did the transporter comply with OAC Chapter 3745-52? [3745-53-10(C)(1)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

Facility Name/Inspection Date]
[ID Number]



12.	Does the transporter mix hazardous wastes of different U.S. DOT descriptions by placing them into a single container? If so:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
a.	Did the transporter comply with OAC Chapter 3745-52? [3745-53-10(C)(2)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
13.	Does the transporter receive SQG wastes for transport pursuant to a reclamation agreement?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
	If so, was the following information recorded in a log or shipping paper carried with the shipment as required by 3745-53-20(H):			
a.	Name, address and U.S. EPA ID # of SQG?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
b.	Quantity of waste?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
c.	DOT required shipping information?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
d.	Date waste was accepted?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
14.	If the transporter receives SQG wastes for transport as described in Question No. 13, are records related to the shipments maintained for at least three years following expiration of the reclamation agreement? [3745-53-20(H)(4)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

Facility Name/Inspection Date]
[ID Number]

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

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

PROHIBITIONS

1.	Does the generator manage used oil in a surface impoundment or waste pile? If yes:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
a.	Is the surface impoundment or waste pile regulated as a hazardous waste management unit? [3745-279-12(A)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
<i>NOTE: For example, used oil contaminated scrap metal stored in a pile.</i>				
2.	Is used oil used as a dust suppressant? [3745-279-12(B)]	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
3.	Is off-specification used oil fuel burned for energy recovery in devices specified in 3745-279-12(C)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

NOTE: Multiple used oil checklists may be applicable if used oil handler is performing multiple tasks (e.g., if generating used oil and shipping directly to a burner, complete generator and marketer checklists at a minimum).

GENERATOR STANDARDS

4.	Does the generator mix hazardous waste with used oil? If so, <u>TSD</u>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
a.	Is the mixture managed as specified in 3745-279-10(B)? [3745-279-21(A)] <u>Managed as hazardous</u>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

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

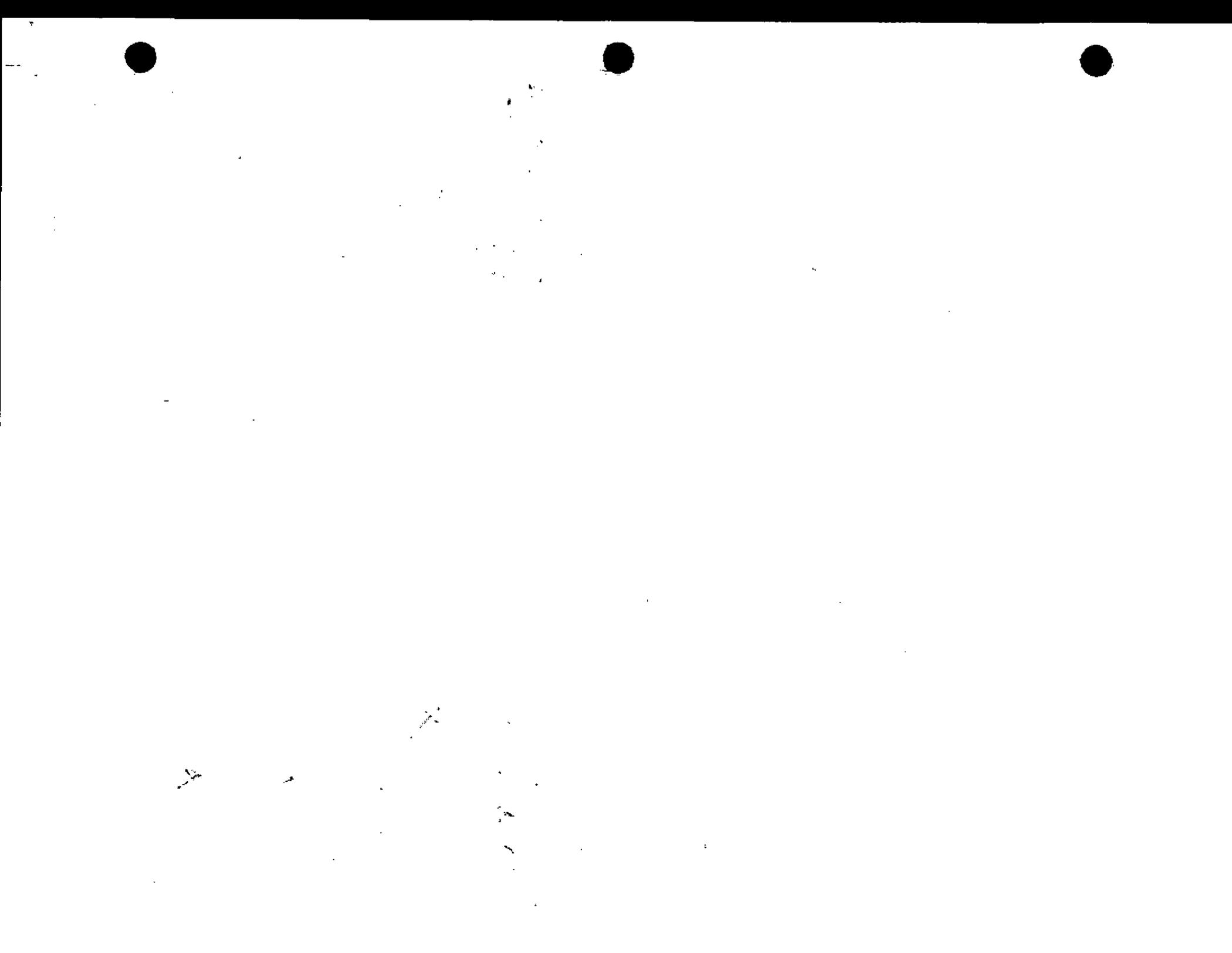
5.	Does the generator of a used oil containing greater than 1,000 ppm total halogens manage the used oil as a hazardous waste unless the presumption is rebutted successfully? [3745-279-21(B)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
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NOTE: If used oil contains greater than 1000 ppm total halogens, it is presumed to be listed hazardous waste until the presumption is successfully rebutted.

6.	Does the generator store used oil in tanks; or containers; or a unit(s) subject to regulation as a hazardous waste management unit? [3745-279-22(A)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
7.	Are containers and aboveground tanks used to store used oil in good condition with no visible leaks? [3745-279-22(B)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
8.	Are containers, above ground tanks, and fill pipes used for underground tanks clearly labeled or marked "Used Oil?" [3745-279-22(C)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
9.	Has the generator, upon detection of a release of used oil, done the following: [3745-279-22(D)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
a.	Stopped the release?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
b.	Contained the release?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
c.	Cleaned up and properly managed the used oil and other materials?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
d.	Repaired or replaced the containers or tanks prior to returning them to service, if necessary?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

ON-SITE BURNING IN SPACE HEATER

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



b.	Is the heater designed to have a maximum capacity of not more than 0.5 million BTU per hour?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
c.	Are the combustion gases from heater vented to the ambient air?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

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

GENERATOR TRANSPORTATION

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

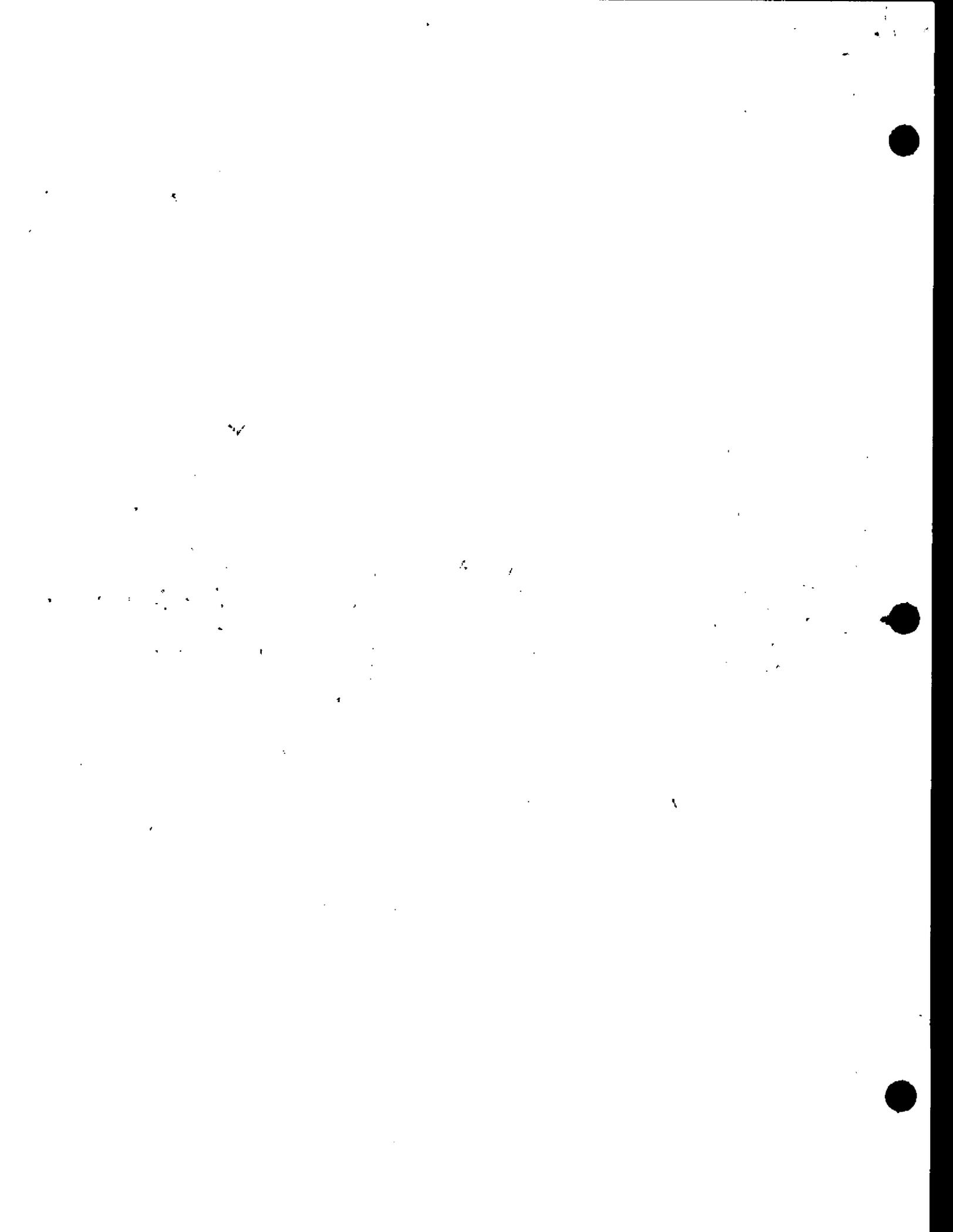
NOTE: Used oil generators may arrange for used oil to be transported by a transporter without a U.S. EPA ID # if the used oil is reclaimed under a contractual agreement (i.e., tolling arrangement).

COLLECTION CENTERS AND AGGREGATION POINTS

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

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

→ Facility is a transporter ^{TSD} and transports used oil ~~from~~ from generator's site to facility. Used oil is blended into chem fuel for burning in cement kilns.



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

FACILITY	Huckell Chemical Corporation	OHIO PERMIT #	02-18-0315
STREET ADDRESS	7013 Knick Road	US EPA ID#	04D-00-926-740
CITY, STATE AND ZIP CODE	Bedford OH 44146	PHONE NUMBER	440-232-9400
COUNTY	Cuyahoga	INSPECTION DATE	2/24, /2009

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

If So, How Far In Advance? _____

INSPECTORS	NAME	AGENCY/TITLE	PHONE
	Madeleine Kenney	Ohio EPA/DHW/ES	330 963-1162
FACILITY REPS	Jeff McEllynn		

Is facility operating as a generator? Yes

If so, complete the applicable sections of the Generator Requirements checklist for wastes being managed under generator status.

PERMIT STATUS

Permit Issued:	12/28/2006	LDR Checklist Attached:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Permit Effective Date:		Used Oil Checklist Attached:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Permit Expiration Date:	12/28/2016	Generator Checklist Attached:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Permit Renewal Date:			
Permit Modification Date(s):	12/26/2009		

AUTHORIZED ACTIVITIES

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

Post-Closure Care Corrective Action

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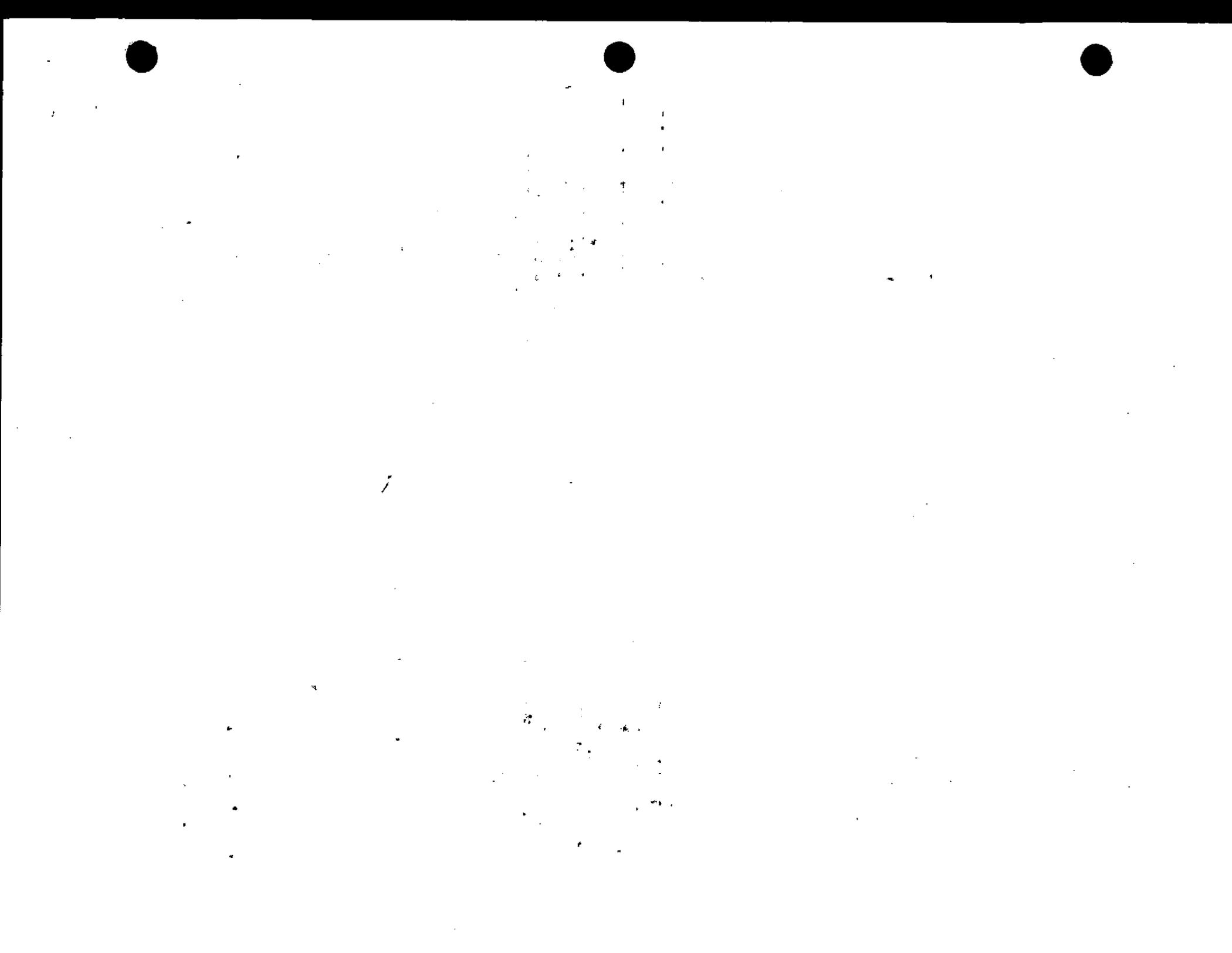
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[Facility Name/Inspection Date]

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GENERAL PERMIT COMPLIANCE AND ACTIVITIES

1.	Has the expiration date of the permit passed? If so:		Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
a.	Is the permittee continuing any activity regulated by the permit after the expiration date of the permit?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
b.	Has the facility submitted an application for a permit renewal to the director no later than 180 days prior to the expiration date of the permit? [Condition A.6]		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
2.	Has the permittee submitted the annual permit fee, payable to "Treasurer, State of Ohio," to Ohio EPA on or before the anniversary of the date of issuance during the term of the permit? [Condition A.25]		Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
3.	Is the permittee conducting any hazardous waste management activities (not otherwise exempt by law) which are not authorized by the permit? [Conditions A.1(b) and A.5]		Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
4.	Have any provisions of the permit been identified as invalid? [Condition A.4]		Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
5.	Has the facility identified any instances of noncompliance with the permit, ORC Chapter 3734, or the rules adopted thereunder, which may endanger human health or the environment? If so:		Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
a.	Did the facility immediately report the following to Ohio EPA's Emergency Response Unit? [Condition A.20]				
i.	Information concerning a release of any hazardous waste that may cause an endangerment to public drinking water supplies; and		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
ii.	Information concerning a release of hazardous waste, fire or explosion at the facility which could threaten human health or the environment outside the facility including a description of:		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
A.	Name, address and telephone number of the owner/operator?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
B.	Name, address and telephone number of the facility?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
C.	Name and quantity of material(s) involved?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
D.	The extent of injuries, if any?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
E.	An assessment of the actual or potential hazard to the environment and human health outside the facility?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
F.	Estimated quantity and disposition of recovered material that resulted from the incident?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
6.	Did the permittee provide a written report to Ohio EPA's Emergency Response Unit and DHWM within five days of becoming aware of the circumstances reported in Questions No. 5? If so, did the report contain: [Condition A.21]		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
a.	A description of the noncompliance and its cause (including exact dates and times)?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
b.	Whether the noncompliance has been corrected and if not, the anticipated time noncompliance is expected to continue? and		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
c.	Steps taken or planned to minimize the impact on the environment and to reduce, eliminate and prevent recurrence of the noncompliance?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

NOTE: The permittee need not comply with the five day written report requirement if the director, upon good cause shown by the permittee, waives that requirement and the permittee submits a written report within 15 days of the time the permittee became aware of the circumstances. [Condition A.21].



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7.	Has the permittee identified other instances of noncompliance not provided for in Condition A.22? If so:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
a.	Did the permittee report these instances to Ohio EPA, DHWM? [Condition A.22]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
b.	Do the reports provided contain the information set forth in Condition A.20? [Condition A.20]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
c.	Has the permittee taken all steps necessary to minimize releases to the environment or prevent any adverse impact on human health or the environment? [Condition A.8]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
8.	Has the permittee planned any changes in the permitted facility or activity which may result in noncompliance with the conditions of the permit?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
a.	If so, has the facility provided Ohio EPA with advance notice of such changes? [Condition A.17]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
<i>NOTE: Such notification does not waive the permittee's duty to comply with the permit. [Condition A.17]</i>				
9.	Has the permittee become aware that it failed to submit any relevant facts in the permit or issuance proceedings or that it submitted incorrect or incomplete information in permit issuance proceedings or other submissions to Ohio EPA? If so:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
a.	Has the permittee properly submitted such facts or corrected information to the appropriate entity? [Condition A.24]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
PERMIT MODIFICATION, REVISION, REVOCATION				
10.	Has the permittee filed a request for a permit modification, revision or revocation since permit issuance? [Condition A.2]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
11.	Has the permit been transferred to a new owner/operator? If so:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
a.	Has the transfer been conducted in accordance with ORC Chapter 3734. and the rules adopted thereunder which includes the permittee notifying the new owner in writing of the requirements of ORC Chapter 3734. and the rules adopted thereunder and the applicable Ohio hazardous waste rules before transferring ownership? [Condition A.18]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
12.	Has the permittee submitted reports in any compliance schedule of the permit to Ohio EPA no later than 14 days following each scheduled date, unless otherwise specified? [Condition A.19]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
13.	Has the permittee furnished relevant information which Ohio EPA has requested to determine whether cause exists for modifying, revising, revoking or suspending the permit, to determine compliance with the permit? [Condition A.10]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
14.	Has the facility furnished Ohio EPA, upon request, with copies of records required to be kept by the permit? [Condition A.10]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
15.	Is the permittee maintaining records of all data used to complete the application and any amendments, revisions or modifications to the application? [Condition A.14c]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
16.	Is the permittee retaining a complete copy of the approved application on-site? [Condition A.14c]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
17.	Is the permittee planning any physical alterations or additions to any permitted portions of the facility? If so:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
a.	Has the permittee given notice to the director of such alterations/additions? [Condition A.15]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

SITE ENTRY - AVAILABILITY OF RECORDS

18.	As specified in Condition A.11, has the permittee allowed the director or an authorized representative, upon proper identification to:		
a.	Enter at reasonable times upon the premises where a regulated activity is located or where records are kept under the conditions of the permit?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
b.	Have access to and copy, at reasonable times, any records required to be kept under the conditions of the permit?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
c.	Inspect, at any time, facilities, equipment (including control and monitoring equipment), practices or other operations regulated under the conditions of the permit?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
d.	Sample, document, photograph or monitor, at reasonable times, any substances or parameter at the location of the facility to assure compliance with the permit or as otherwise authorized by ORC Chapter 3734. and the rules adopted thereunder?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	

INSPECTION ITEMS FROM PART B APPLICATION

NOTE: The inspector or permit writer may add questions pertaining to the permittee's application, as appropriate.

RECORDKEEPING/OPERATING REQUIREMENTS

OPERATING RECORD

19.	In accordance with OAC rules 3745-54-73 and 3745-54-74 and Condition B.22 of the permit, does the permittee maintain an Operating Record which contains the following information:		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	A description of the quantity of each hazardous waste and the method(s) and date(s) of its treatment or storage?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
b.	The location of each hazardous waste and quantity at each location including cross-reference to specific manifest numbers?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
c.	Records and results of required waste analysis?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
d.	Summary reports and details of all incidents that required implementation of the contingency plan?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
e.	Records and results of required inspections?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
f.	Documents required to be maintained by LDR requirements of OAC Chapter 3745-270?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
g.	Monitoring, testing, or analytical data, and corrective action where required, from groundwater monitoring and required monitoring of surface impoundments, landfills, waste piles and land treatment units? [3745-54-73(B)(6)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
h.	For disposal facilities, location and quantity of each hazardous waste record on a facility map and cross-references to manifest document numbers? [3745-54-73(B)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	

DOCUMENTS TO BE MAINTAINED AT FACILITY

20.	In accordance with Condition A.28 of the permit, is the permittee maintaining the following documents at the facility:		
a.	Waste analysis plan in accordance with OAC rule 3745-54-13?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
b.	Contingency plan in accordance with OAC rule 3745-54-53?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	

→ Sometimes there is a time-log between data input and actual location of drums when drums go straight to processing or are getting ready to be shipped off-site. # of drums is correct but location is slow to update.

[Facility Name/Inspection Date]
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	c.	Closure plan in accordance with OAC rule 3745-55-12?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	d.	Cost estimate for facility closure in accordance with OAC rule 3745-55-42? (Estimate only - adequacy will be evaluated by CO financial assurance personnel) [Condition B.36]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	e.	Personnel training plan and records required by OAC rule 3745-54-16(C)? [Condition B.6]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	f.	Inspection schedules developed in accordance with OAC rules 3745-54-15, 3745-55-74 and 3745-55-95? [Condition B.5]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	g.	Operating record in accordance with OAC rule 3745-54-73? [Condition B.22]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	h.	Post-closure plan, as required by OAC rule 3745-55-18(A)? [Condition A.28(a)(viii)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	i.	Annually-adjusted cost estimate for facility closure and post-closure, as required by OAC rules 3745-55-42 and 3745-55-44? [Condition A.28(a)(ix)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
21.		Is the permittee maintaining copies of all inspection logs at the facility for a period of at least three years from date of inspection? [Condition B.5]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
22.		Have any of the documents in Question No. 20 been revised? [Condition A.15] If so:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	a.	Has the permittee submitted the revisions to Ohio EPA in accordance with OAC rule 3745-50-51?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	b.	Have all requirements of OAC rule 3745-50-51 been met, including, where required, Ohio EPA approval?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
ANNUAL REPORT REQUIREMENT					
23.		Is the permittee complying with annual report requirements set forth in OAC rule 3745-54-75 and the additional report requirements set forth in OAC rule 3745-54-77? [Condition B.25]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
SAMPLING/MONITORING RECORDKEEPING REQUIREMENTS					
24.		In compliance with Condition 12(b) of the permit, do the permittee's records of monitoring information specify the:	<i>Monitoring is semi-annual</i> <i>groundwater</i>		
	a.	Date(s), exact place(s), time(s) and method(s) of sampling or measurement?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	b.	Individual(s) who performed the sampling or measurement?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	c.	Date(s) analyses were performed?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	d.	Individual(s) who performed the analyses?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	e.	Analytical technique(s) or method(s) used?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	f.	Results of such analyses?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
25.		Have the methods used to obtain a representative sample of the waste to be analyzed included the appropriate SW-846 method or an equivalent method specified in the approved waste analysis plan? [Condition 12(a)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
26.		In accordance with Condition A.14 of the permit, is the permittee retaining records of monitoring information as required by the permit for at least three years from the date of sampling, including:			
	a.	All calibration and maintenance records?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

[Facility Name/Inspection Date]

[ID number]

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27.	Has Ohio EPA requested submittal of any reports or other information from the permittee? If so:	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	Have the submittals been signed and certified according to OAC rule 3745-50-42? [Condition A.13(c)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

INSPECTION ITEMS FROM THE PART B APPLICATION

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

WASTE MINIMIZATION REQUIREMENTS

28.	Does the permittee certify at least once every year that a program is in place to reduce the volume and toxicity of hazardous waste generated in accordance with Condition A.29(a) and OAC rule 3745-54-73?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
29.	Did the permittee submit the waste minimization report to Ohio EPA, Office of Compliance Assistance & Pollution Prevention and _____ District Office within 180 days of journalization of this permit and updates biennially thereafter? [Condition A.29]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
30.	Has the permittee reduced the amount of waste (hazardous waste, solid waste, air emission, waste water discharges, etc.) this year generated at their facility by implementing pollution prevention/waste minimization? If so, what amount of waste has the permittee reduced this year?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
31.	Has the permittee's company saved much money this year by implementing pollution prevention: (reducing raw material usage, disposal fees, energy savings, etc.)? If so, how much money has the permittee's company saved this year?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> ?

NOTE: If this facility is inspected two times a year, the information obtained in questions 3 & 4 only needs to be collected one time for the calendar year.

GROUND WATER MONITORING

32.	Has the permittee conducted semi-annual sampling of their monitoring wells?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
33.	Have they reported the results in the Annual Report to the director by March 1 st as required by Condition B.25?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

INSPECTION ITEMS FROM THE PART B APPLICATION

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

WASTE ACCEPTANCE AND GENERATION

34.	Is the permittee storing any containers of hazardous waste received from any off-site source that permittee is not permitted to store? [Condition A.1.]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
35.	Has the permittee arranged to receive hazardous waste from a foreign or off-site source that the permittee is not permitted to store? [Condition A.1.]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
36.	Has the permittee notified the director at least four weeks prior to the date the permittee expects to receive hazardous waste from a foreign source, as required by OAC rule 3745-54-12(A)? [Condition B.2(a)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

INSPECTION ITEMS FROM THE PART B APPLICATION

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

OFF-SITE SHIPMENTS/MANIFEST REQUIREMENTS

37.	Is the permittee complying with the following manifest requirements set forth in OAC Chapter 3745-52 and OAC rules 3745-54-70, 3745-54-71, 3745-54-72 and 3745-54-76: [Condition B.24]	
a.	All hazardous wastes shipped off-site have been accompanied by a completed manifest, U.S. EPA Form 8700-22 and, if necessary, U.S. EPA Form 8700-22A in compliance with OAC rule 3745-52-20(A)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	The manifest form used contains all information required by OAC rule 3745-52-20 and the minimum number of copies required by OAC rule 3745-52-22?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	The permittee has designated at least one permitted disposal facility and has/will designate an alternate facility or instructions to return waste in compliance with OAC rule 3745-52-20(B)(C)(D)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
d.	Prepared manifests have been signed by the permittee and initial transporter in compliance with OAC rule 3745-52-23?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
38.	As a permittee that generates hazardous waste, are signed copies of all hazardous waste manifests and any documentation required for exception reports retained for at least three years at the facility as required by OAC rules 3745-52-40 and 3745-54-71(A)(5)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

NOTE: If the permittee is generating hazardous waste, remember to attach a complete generator checklist.

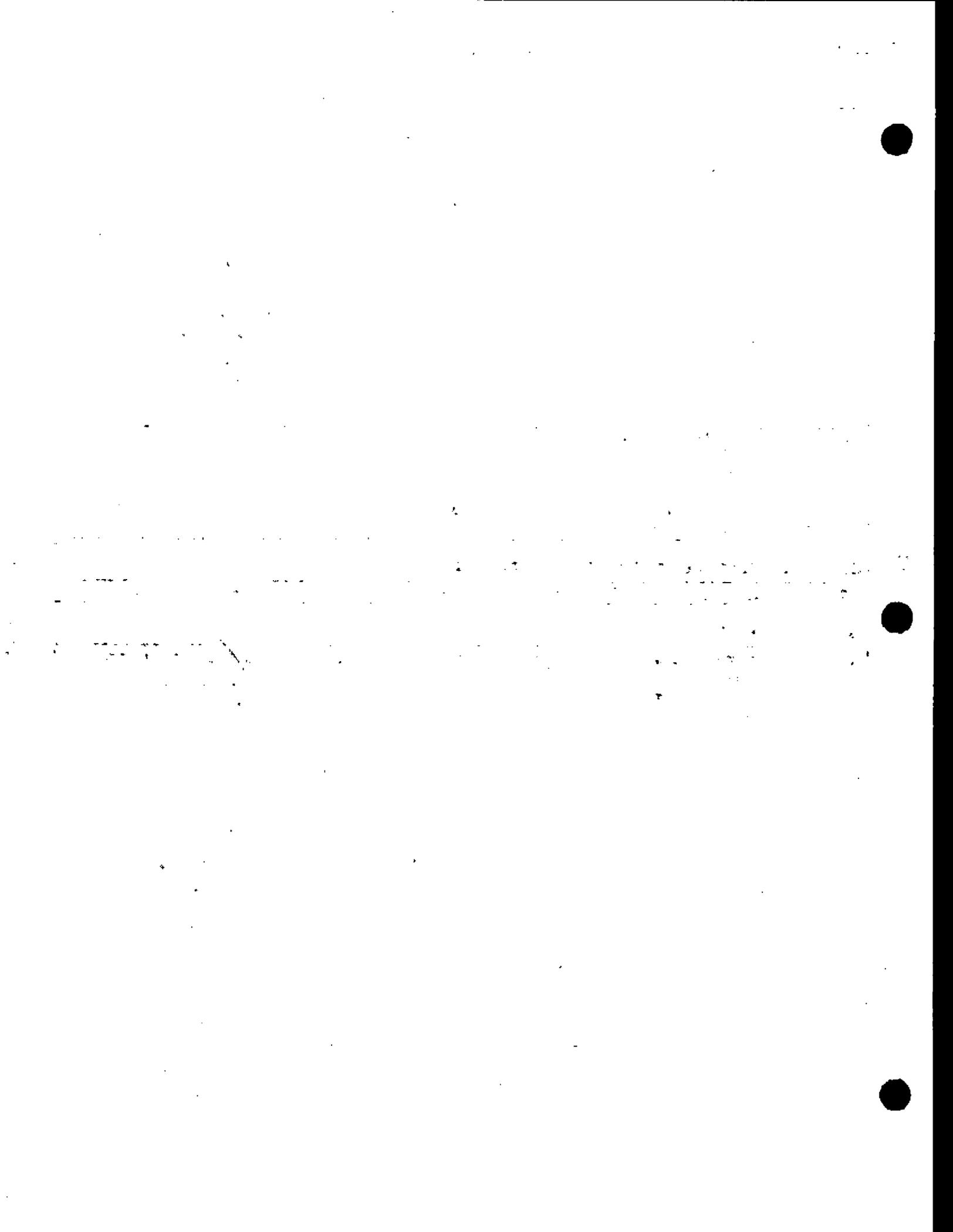
39.	Does the permittee use only properly registered transporters when removing hazardous wastes? [Condition A.16]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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TRANSPORTERS:

40.	Does the permittee give one copy of the manifest to the transporter, send one copy to the generator within 30 days, and keep one copy for at least three years? [3745-54-71(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	If shipping papers are used in lieu of manifests (bulk shipments, etc.), are the same requirements met? [3745-54-71(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Are any significant discrepancies in the manifest, as defined in 3745-54-72(A) noted in writing on the manifest document?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
41.	Have any manifest discrepancies been reconciled within 15 days as required by 3745-54-72(B)? If not:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	Has the owner/operator submitted the required information to the director?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
42.	If the facility has accepted any unmanifested hazardous wastes from off-site sources for treatment, storage, or disposal, has an unmanifested waste report containing all the information required by 3745-54-76(A) been submitted to the director within 15 days?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

WASTE ANALYSIS/WASTE ANALYSIS PLAN

43.	Does the permittee have a detailed chemical and physical analysis of waste streams which contains all information of the waste in accordance with OAC Chapters 3745-54 to 3745-57, 3745-218 and 3745-270 and the terms and conditions of the permit? [Condition B.3(a)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
44.	Does the permittee follow the procedures described in the WAP (Application ___)? [Condition B.3(b)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>



45.	In accordance with OAC rule 3745-54-13(A)(3), does the permittee repeat the waste analysis when the process or operation generating the hazardous waste has changed, or at least annually? [Condition B.3]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
46.	FOR OFF-SITE FACILITIES: Are the sampling methods and procedures specified in the permittee's WAP that will be used to inspect and, if necessary, analyze each movement of hazardous waste received at the facility to ensure that it matches the identification of the waste on the manifest [3745-54-13(c)]?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
47.	FOR FACILITIES OPERATING SURFACE IMPOUNDMENTS EXEMPT FROM LAND DISPOSAL RESTRICTIONS UNDER OAC 3745-270-04(A):	
	Does the waste analysis plan include procedures and schedules for:	
i.	The sampling of impoundment contents? [3745-54-13(B)(7)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
ii.	The analysis of test data? [3745-65-13(B)(7)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
iii.	The annual removal of residues which are not delisted or which exhibit the characteristic of a hazardous waste and either do not meet treatment standards (OAC 3745-270-40 to 3745-270-49) or where no treatment standards have been established? [3745-54-13(B)(7)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
48.	Where applicable: The methods which will be used to meet additional waste analysis requirements for specific waste management methods specified in rules 3745-54-17, 3745-57-14, 3745-57-41 and 3745-270-07 of the OAC? [3745-54-13(B)(6)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
49.	Does the permittee place the results of all waste analyses in the facility operating record in accordance with OAC rule 3745-54-73?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

INSPECTION ITEMS FROM THE PART B APPLICATION

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

GENERAL INSPECTION REQUIREMENTS

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

50.	Is the permittee following the inspection procedures and schedules as set forth in the permit (_____ of the approved Part B permit application) and the requirements of OAC rules 3745-54-15(A),(C) and (D)? [Condition B.5]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
51.	Is the permittee following the approved inspection schedule for inspecting: monitoring equipment, safety equipment, emergency equipment, security devices and operating and structural equipment as specified in OAC rule 3745-54-15(B)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	Is the schedule kept at the facility? [OAC rule 3745-54-15(B)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
52.	Does the permittee remedy deterioration or any malfunctions discovered by an inspection as required by OAC rule 3745-54-15(C)? [Condition B.5]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
53.	In accordance with OAC rule 3745-54-15(D) and Condition B.5 of the permit, do inspection records contain the following information:	
a.	Date and time of inspection?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Name of inspector?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Notation of observations made?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
d.	Date and nature of any repairs or other remedial actions?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

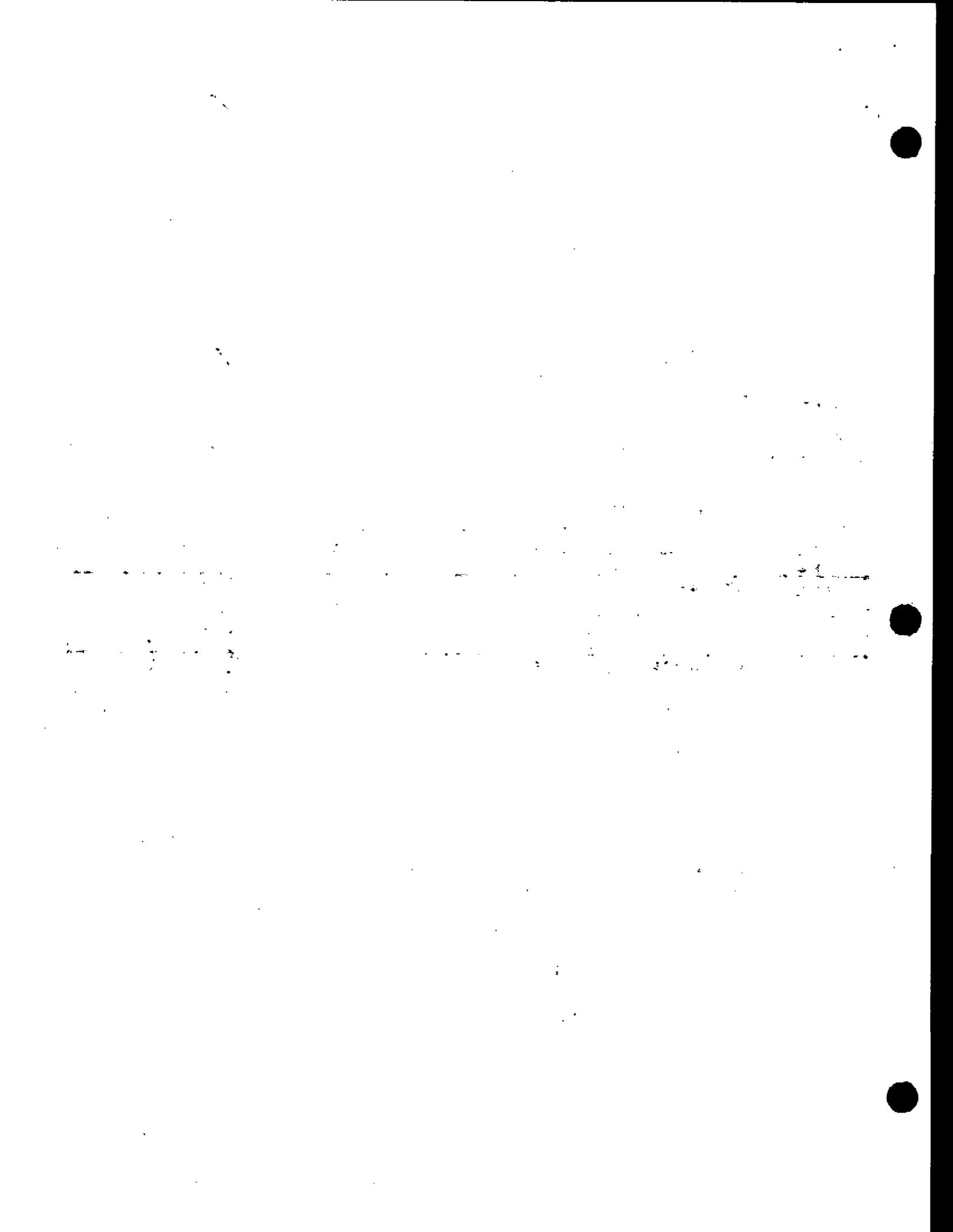
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INSPECTION ITEMS FROM THE PART B APPLICATION

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

SECURITY REQUIREMENTS

54.	Is the permittee complying with the following security provisions of OAC rule 3745-54-14 and Condition B.4 of the permit: [____ of the Part B permit application]?	
a.	Does the permittee have a 24-hour surveillance system which continuously monitors and controls entry onto the active portion of the facility?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	An artificial or natural barrier (in good repair) which completely surrounds the active portion of the facility?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	A means to control entry, at all times, through gates or other entrances, to the active portion of the facility?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
55.	In accordance with OAC rule 3745-54-14(C), does the permittee have signs reading "Danger - Unauthorized Personnel Keep Out" posted at entrances of the hazardous waste container storage building number ____?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

FACILITY OPERATIONS

56.	Is construction, maintenance and operation of the facility being conducted to minimize the possibility of a fire, explosion, or unplanned sudden or non-sudden release of hazardous waste or hazardous waste constituents to air, soil, ground or surface water? [OAC rule 3745-54-31; Condition B.1]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
57.	Does the permittee properly maintain and operate the facility to achieve compliance with the terms and conditions of the permit including: [Condition A.9]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	Effective management practices?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Adequate funding?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Adequate operator staffing and training?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
d.	Adequate laboratory and process controls?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

INSPECTION ITEMS FROM THE PART B APPLICATION

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

PERSONNEL TRAINING

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

Will be April 6, 2009

59.	Is the permittee maintaining personnel training records as required by OAC rule 3745-54-16(D) and of the approved application, including: written job titles, job descriptions and documented employee training records? [Condition B.6]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
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INSPECTION ITEMS FROM THE PART B APPLICATION

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

REQUIRED EQUIPMENT

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

60.	Has the permittee equipped the facility with the following emergency equipment as required by OAC rule 3745-54-32 and Condition B.9 of the permit:			
a.	An internal communications or alarm system?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
b.	A device such as a telephone which is capable of summoning emergency assistance from local emergency authorities?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
c.	Portable fire extinguishes and/or fire control equipment, spill control and decontamination equipment?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
d.	Water in adequate volume and pressure to supply water hose streams, foam producing equipment, automatic sprinklers or water spray systems?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
61.	Is the permittee inspecting, testing and maintaining the equipment specified in Question No. 60 to ensure its proper operating in accordance with OAC rule 3745-54-33 and Condition B.10 of the permit?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
62.	Whenever hazardous waste is being managed at the facility, has the permittee provided all personnel involved in the operation with immediate access to an internal alarm or emergency communication device as required by OAC rule 3745-54-34 and Condition B.11 of the permit?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

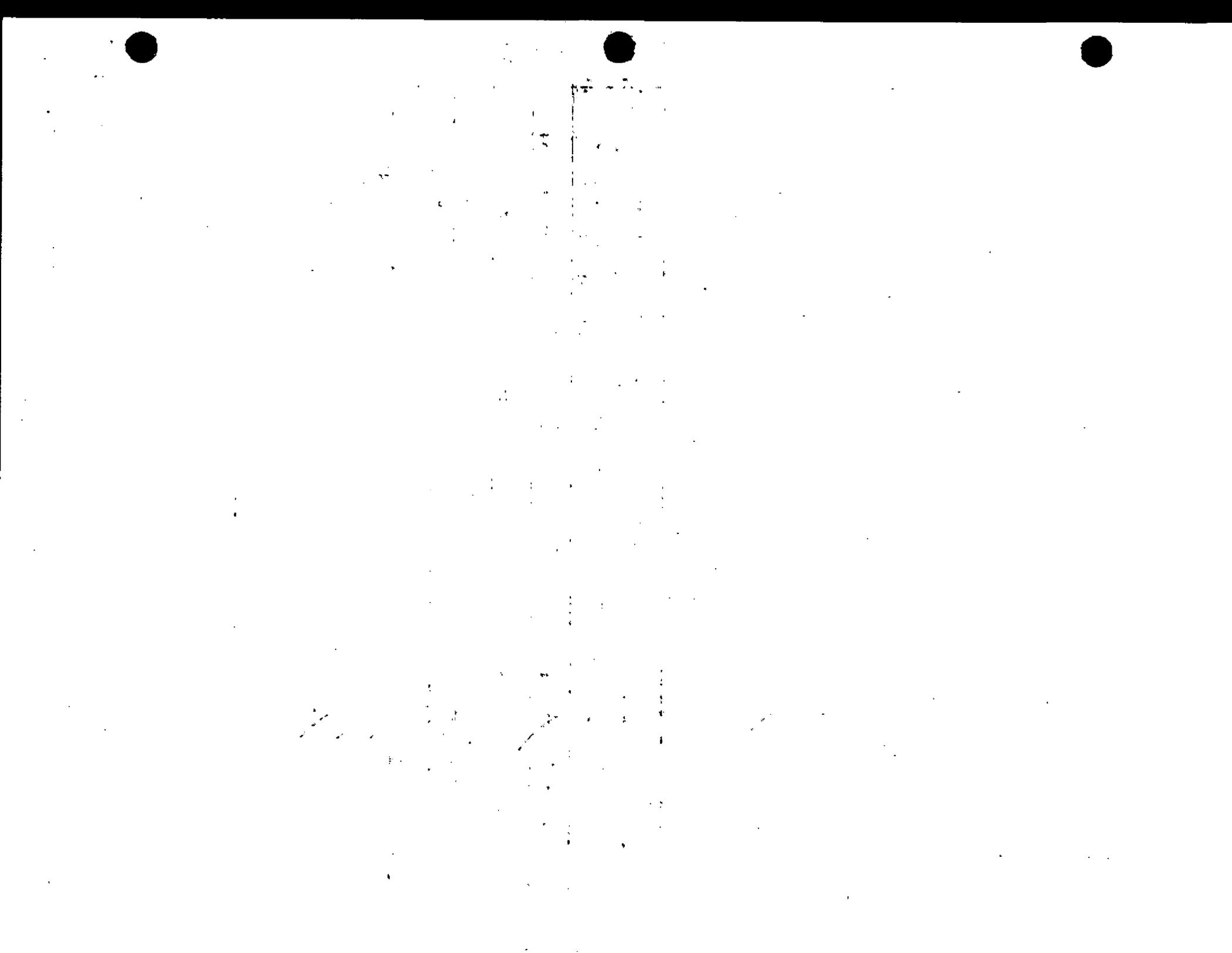
INSPECTION ITEMS FROM THE PART B APPLICATION

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

CONTINGENCY PLAN - EMERGENCY PROCEDURES

63.	In compliance with Condition B.13 of the permit and OAC rule 3745-54-37(A) and (B), does the permittee:			
a.	Familiarize emergency response agencies with the layout of the facility, associated hazards, places where personnel will normally be working, entrances and possible evacuation routes?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
b.	Inform such agencies of safety equipment, supplies, proper emergency safety procedures that are applicable to the facility?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
c.	Familiarize the local hospital listed in the approved application with the properties of hazardous waste handled at the facility and the types of injuries or illness that could result from fires, explosions or releases at the facility?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
64.	Has a state or local agency declined to enter into the arrangements set forth in OAC rule 3745-54-37(A)? If so	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
a.	Has the permittee documented the refusal in the operating record as required by OAC rule 3745-54-37(B)? [Condition B.13(b)]			
65.	Has the permittee, in accordance with OAC rule 3745-54-53 submitted a copy of the approved contingency plan (including amendments, revisions or changes) to all local authorities, agencies and response contractors designated in the approved contingency plan? [Condition B.18(b)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

No changes have been made.



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

NOTE: Also see Question No. 4 of Recordkeeping Requirements to verify that any changes to the contingency plan were submitted in accordance with OAC rule 3745-50-51.

EMERGENCY COORDINATOR

69.	In accordance with OAC rule 3745-54-55 and Condition B.19 of the permit, is an emergency coordinator on premises or on call at all times?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
70.	In accordance with OAC rule 3745-54-55 and Condition B.19 of the permit, is/are the emergency coordinator(s) at the facility familiar with the following:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	a. Contingency plan?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b. Facility operations/activities?	
	c. Waste characterization and location?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d. Location of all records in the facility?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	e. Facility layout?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
71.	In accordance with OAC rule 3745-54-55, does/do the emergency coordinator(s) have the authority to commit the resources needed to carry out the contingency plan? [Condition B.19]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
72.	Does the permittee have a contingency plan for the facility that: [Condition B.19]	
	a. Describes the actions facility shall take to comply with OAC rules 3745-54-51 through 3745-54-56 in response to fires, explosions, or any unplanned sudden or nonsudden release of hazardous waste or hazardous waste constituents to air, soil or surface water at the facility?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b. Describes arrangements agreed to by local police, fire departments, hospitals, contractors and Ohio EPA and the local emergency response team to coordinate emergency services?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c. Includes an up-to-date list of names, addresses and phone numbers (office and home) for all persons qualified to act as emergency coordinator in the order that they will assume responsibility for coordination of emergency response?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d. Includes a list of all emergency equipment, including fire extinguishing systems, spill control equipment, communications and alarm systems and decontamination equipment?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	e. Includes the location and a physical description of each item on the list referenced in Question No. 72(d), and a brief outline of its capabilities?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	f. Includes an evaluation plan for facility personnel describing signals to be used to begin evacuation, evacuation routes, and alternate evacuation routes, in situations where the primary routes could be blocked by releases of hazardous waste?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

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IMPLEMENTATION OF CONTINGENCY PLAN

73.	Has there been a fire, explosion or release of hazardous waste or hazardous waste constituents at the facility including spill or release of hazardous waste or hazardous waste constituents greater than or equal to 55 gallons; any spill or release of hazardous waste or hazardous waste constituents less than 55 gallons may result in a fire or explosion hazard as determined by the Emergency Coordinator; or any spill on-site that may potentially cause on or off-site soil and/or ground or surface water contamination; any spill or release of hazardous waste or hazardous waste constituents that is reported to the National Response Center or local (city or county) emergency response center because the spill exceeded the "RQ" limits; any fire involving hazardous waste; any explosion involving hazardous waste; since the date of the last inspection? If so:		Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
a.	Did the permittee immediately implement the approved contingency plan and follow the emergency procedures described in OAC rule 3745-54-56? [Conditions B.14 and B.20]		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
b.	Did the permittee immediately notify Ohio EPA's emergency response team using the 24-hour toll free number (800)282-9378 providing the following information: [OAC rule 3745-54-56(D)(2)]				
	i.	Name and telephone number of the reporter?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	ii.	Name and address of the facility?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	iii.	Time and type of incident?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	iv.	Name and quantity of materials involved?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	v.	The extent of injuries?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	vi.	The possible hazards to human health or the environment outside the facility?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
c.	Did the permittee collect and manage as hazardous waste all liquid or solid material resulting from fire, explosion, released material or emergency response materials until such time as the permittee can demonstrate to Ohio EPA that such waste are not hazardous wastes? [Condition B.16]		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
d.	Within 15 days of the incident did the permittee submit to the director a written report of the incident? If so:		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
	i.	Did the report contain the elements set forth in OAC rule 3745-54-56(J)? [Condition B.23]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
e.	Did the permittee note in the operating record the time, date and details of any incident that required the implementation of the approved contingency plan as required by OAC rule 3745-54-56(J)? [Condition B.23]		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

INSPECTION ITEMS FROM THE PART B APPLICATION

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

CLOSURE REQUIREMENTS

74.	Does the permittee maintain the approved closure plan at the facility? [Condition B.29]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
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[Facility Name/Inspection Date]
[ID number]

75.	Is the permittee keeping at the facility and submitting annually to Ohio EPA, the latest closure cost estimate as required by OAC rule 3745-55-42(D)? [Condition B.36]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
76.	Has the permittee amended the closure plan? If so:			
a.	Has the plan been amended in accordance with OAC rule 3745-55-18(D)? [Condition B.28]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
<i>NOTE: Also see Recordkeeping Requirements (Question #4) in order to verify that any changes to the closure plan were submitted in accordance with OAC rule 3745-50-51.</i>				
77.	Has the permittee closed the facility? If so:			
a.	Did the permittee complete closure of the facility 180 days after receiving the final volume of hazardous waste, as required by Condition B.31 of the permit?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
b.	Was closure conducted in accordance with the closure performance standard of OAC rule 3745-55-11? [Condition B.26]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
c.	Did the permittee carry out the approved closure plan as set found in Section _____ of the approved permit application? [Condition B.27]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
d.	After receiving the final volume of hazardous waste, did the permittee remove all hazardous waste and complete closure activities in accordance with the schedule specified in the approved closure plan and as required by OAC rule 3745-55-13? [Condition B.31]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
e.	Has the permittee decontaminated and/or disposed of all facility equipment, structures and soils as required by OAC rule 3745-55-14 and the approved closure plan? [Condition B.32]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
f.	Has the permittee certified that the facility has been closed in accordance with the specifications in the approved closure plan as required by OAC rule 3745-55-15? [Condition B.33]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
g.	Has the permittee submitted a survey plat to the director and local zoning authority no later than the submission of certification of closure of each hazardous waste disposal unit? [Condition B.34]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
POST-CLOSURE MAINTENANCE				
<i>NOTE: Inspector may attach a post-closure maintenance inspection schedule. If so, the attached document is referenced as Appendix _____.</i>				
78.	Has the permittee inspected the components, structures, and equipment at the site in accordance with the inspection schedule in § _____ of the permit application on a quarterly basis? [OAC rule 3745-55-17(A)(1)(b)] [Condition B.35]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
79.	Has the permittee conducted and recorded an inspection of at least the following? [Condition B.35]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
a.	Security control devices (gates, locks, fences and signs);			
b.	Erosion control;			
c.	Cover settlement, subsidence and displacement;			
d.	Vegetative cover conditions;			
e.	Integrity of run-on/run-off control measures;			
f.	Cover drainage system functioning;			
g.	Monitor well conditions; and			
h.	Benchmark integrity.			
80.	Is the permittee using the inspection forms found in the approved Part B permit application? [§ _____ of the approved permit application]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
81.	Have suitable repairs been made within a reasonable amount of time? [Condition B.35]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

1947

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82.	Have repairs been indicated on the Notification Repair Form? [Condition B.35]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
83.	Was the Notification of Repair Form submitted to Ohio EPA within one week after determining that repairs are necessary? [Condition B.35]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

INSPECTION ITEMS FROM THE PART B APPLICATION

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

STORAGE OF HAZARDOUS WASTES IN CONTAINERS

NOTE: The requirements of Condition C do not apply to the permittee's activities as a generator accumulating hazardous waste for <90 days per OAC rule 3745-52-34(A). Please complete the applicable sections of the Generator Requirements checklist to document compliance with activities associated with <90 day accumulation of wastes.

CONDITION OF CONTAINERS

84.	Are containers holding hazardous wastes in good condition as required by OAC 3745-55-71? [Condition C.4] If not:	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>	<i>1 leaking drum was overpacked with noted</i>
a.	Did the permittee transfer the hazardous waste from such a container to one that is in good condition or otherwise manage the waste in a manner that complies with the conditions of the permit? [Condition C.4]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	
85.	Does the permittee ensure that all containers used at the facility are compatible with the hazardous waste to be stored in them as required by OAC rule 3745-55-72? [Condition C.5]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	
86.	Does the permittee keep all containers closed during storage except when it is necessary to add or remove waste as required by OAC rule 3745-55-73? [Condition C.6(a)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	
87.	Does the permittee store all containerized hazardous waste on the container storage containment system as described in Condition C.7 of the permit? [Condition C.7]	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>	

INSPECTIONS

Violation of C.1.a. - moved containers from area around the auger to an unauthorized area for ~5 hours.

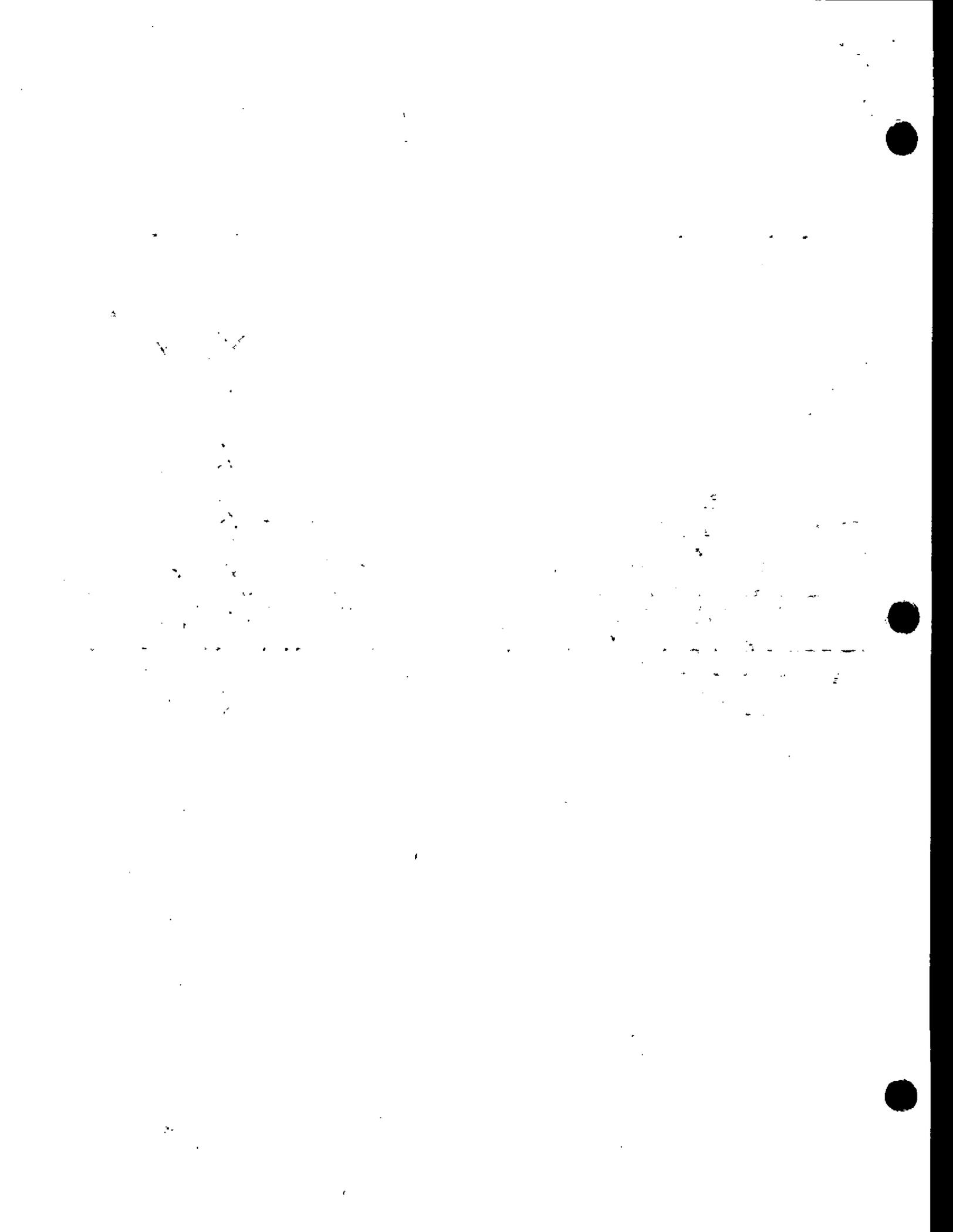
NOTE: Inspector may attach a container inspection checklist. If so, the attached document is referenced as Appendix _____.

88.	Is the permittee inspecting the container area weekly in accordance with OAC rule 3745-55-74 and the approved inspection schedule in Section _____ of the Part B permit application to detect leaking containers and deterioration of containers and the containment system? [Condition C.9]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
a.	Does the permittee note the results of these inspections in the inspection log along with any remedial action taken as required by OAC rule 3745-54-15(D)?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

CONTAINMENT SYSTEM

89.	Does the permittee maintain the containment system as described in the approved permit application, Section _____, including: [Condition C.7]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
a.	Sufficient capacity to hold 10% of the total volume of containers or the volume of the largest container, whichever is greater.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
b.	A system which is free of gaps and sufficiently impervious to contain leaks and spills?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
90.	Has the permittee had a spill or leak of wastes? If so:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
a.	Was spilled or leaked waste removed in a timely manner? [Condition C.7(e)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

[Facility Name/Inspection Date]
[ID number]



NOTE: This time period is not to exceed 24 hours. [Condition C.7(e)]

AISLE SPACE *But it is getting crowded in container storage room.*

91. Is the permittee maintaining adequate aisle space to allow unobstructed movement of personnel and equipment in the event of an emergency as required by OAC rule 3745-54-35 and Condition B.12 of the permit? Yes No N/A

INSPECTION ITEMS FROM THE PART B APPLICATION *Aisle space is going to be difficult to maintain.*

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

LAND DISPOSAL RESTRICTION REQUIREMENTS

NOTE: In order to determine compliance with all applicable LDR requirements the inspector may need to complete the separate LDR checklist:

92. Does the permittee comply with all applicable regulations regarding land disposal prohibitions and restrictions as required by OAC Chapter 3745-270? Yes No N/A

93. Does the permittee comply with the notification and certification requirements of OAC rule 3745-270-07(A)? Yes No N/A

94. Does the permittee comply with the requirements of OAC rule 3745-270-03 and does not in any way dilute a restricted waste or treatment residue as a substitute for adequate treatment? Yes No N/A

95. Does the permittee retain supporting data used to determine if wastes managed at the facility are restricted from land disposal in the facility files as required by OAC rule 3745-270-07(A)(5)? Yes No N/A

a. Are copies of all notices, certifications, demonstrations, waste analysis and other documentation produced pursuant to OAC Chapter 3745-270 retained for a period of three years as required by OAC rule 3745-270-07(A)? Yes No N/A

96. Is the permittee in compliance with the requirements of OAC rule 3745-270-50 regarding the storage of wastes restricted or prohibited from land disposal under OAC rule 3745-270-50? Yes No N/A

INSPECTION ITEMS FROM THE PART B APPLICATION

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

CORRECTIVE ACTION

97. Has the permittee submitted the monthly progress report for all corrective action activities? (This report is due by the 15th of the month following the reporting period.) [Condition ____] Yes No N/A

98. Has the permittee identified any new WMUs or releases at the facility? [Condition E.10]? If so: Yes No N/A

a. Did the permittee follow the steps indicated in Conditions E.10(a) and (b) and E.11? Yes No N/A

INSPECTION ITEMS FROM THE PART B APPLICATION

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

**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 checked="" 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 checked="" 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"/>
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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.

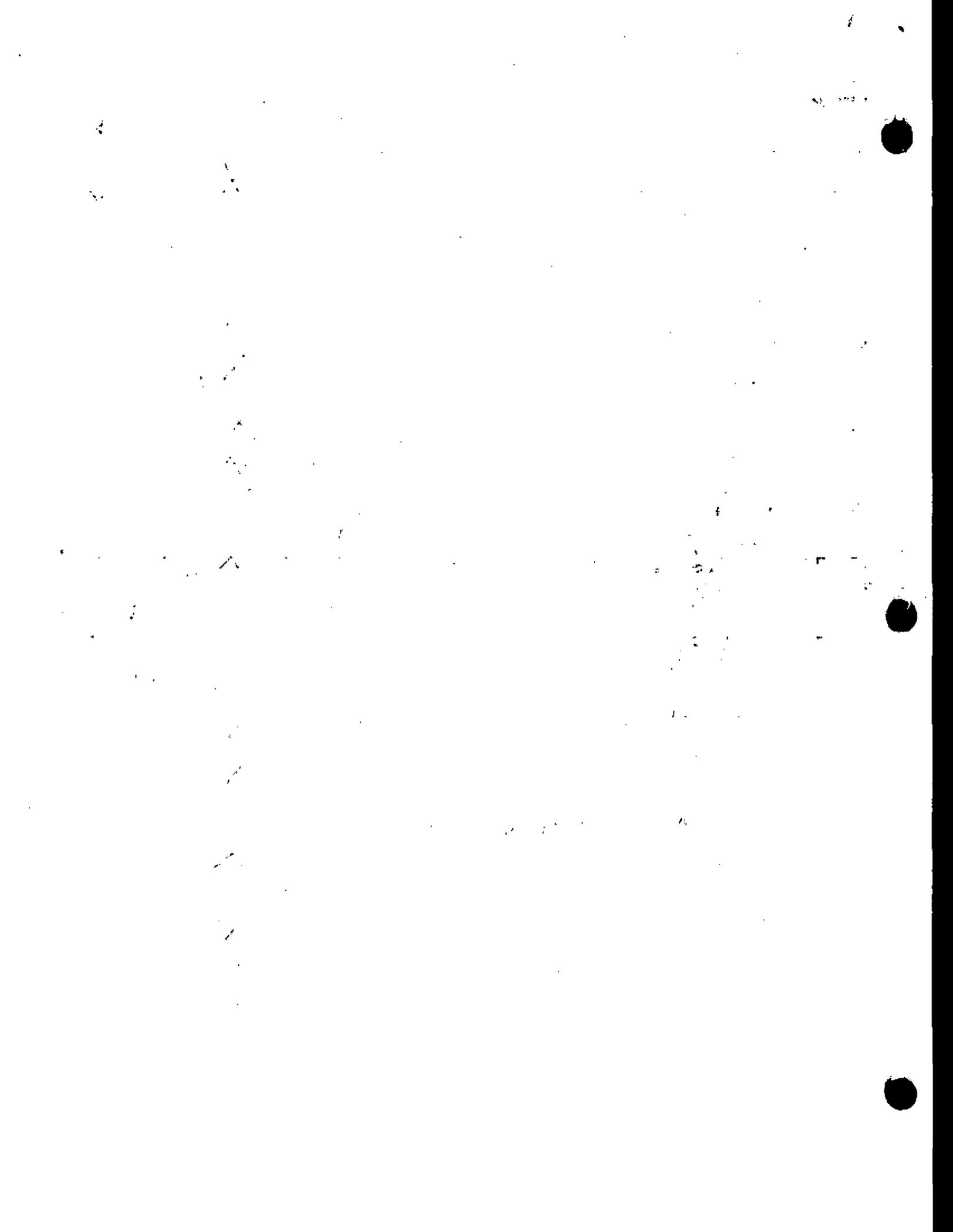
7.	Did the generator treat his HW /soil on-site to meet the LDR treatment standard?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
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NOTE If a Yes@ see question #16.

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 checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
9.	Did the generator resubmit the LDR notification form to the TSD when the HW changed or the generator used a new TSD? [3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
10.	Does the generator have a copy of the LDR notification form on file?[3745-270-07(A)(2)] <i>Attached to the manifest</i>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
a.	Is the form kept on file for three years after last HW shipped? (3745-270-07(A)(8))	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

NOTIFICATION FORM

11.	Does the LDR Notification form contain the following information:			
a.	Manifest number of the first waste shipment to the TSD?[3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
b.	Applicable waste codes (includes characteristic codes for a listed HW if applicable)? [3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
c.	A statement that conveys that the HW is subject to LDRs and must be treated to meet LDR treatment requirements? [3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
d.	A designation whether the HW is a wastewater or non-wastewater? [3745-270-07(A)(2)].	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>



NOTE: A wastewater contains <1% by wt. total suspended solids(TSS) and <1% by wt. TOC. If you doubt the HW is a wastewater or non-wastewater, the HW can be tested using for example, Standard Methods (SM) 160.2 for TSS, SW-846 method 9060a for TOC.

e.	Designation of the waste subcategory when applicable? [3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
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NOTE: Subcategories are found on the LDR treatment standards table under the applicable waste code. Not all HWs have subcategories

f.	A listing of the underlying hazardous constituents for which a characteristic waste must be treated? [3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
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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"/>
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NOTE: Not required if the TSD tests its treatment residues for all underlying hazardous constituents.

PROHIBITED DILUTION

12.	Is the HW treated by burning? If "No," go to #15.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
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13.	Is the HW a metal-bearing HW?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
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NOTE: Generally, metal-bearing HWs contain heavy metals above TCLP levels or were listed due to the presence of metals. A list of the restricted metal-bearing HWs are given in the Appendix to 3745-270-03.

14.	a.	Metal-bearing HWs cannot be incinerated, combusted or, blended and burned for fuel unless <u>one</u> of the following conditions apply. [3745-270-03(c)]		
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	i.	Contains > 1% TOC?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
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	ii.	Contains organic constituents or cyanide at levels greater than the UST levels?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
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	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"/>
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	iv.	Has a reasonable heating value (e.g., > 5000 Btu)?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
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	v.	Co-generated with a HW that must be combusted?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
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	b.	If all responses to 14 a.i. through 14 a.v. are "No," HW is being improperly treated by dilution, violation of 3745-270-03(C). Is HW being treated by dilution?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
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15.	Was the HW treated by wastewater treatment?	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
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	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 checked="" type="checkbox"/>	N/A <input checked="" type="checkbox"/>
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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"/>
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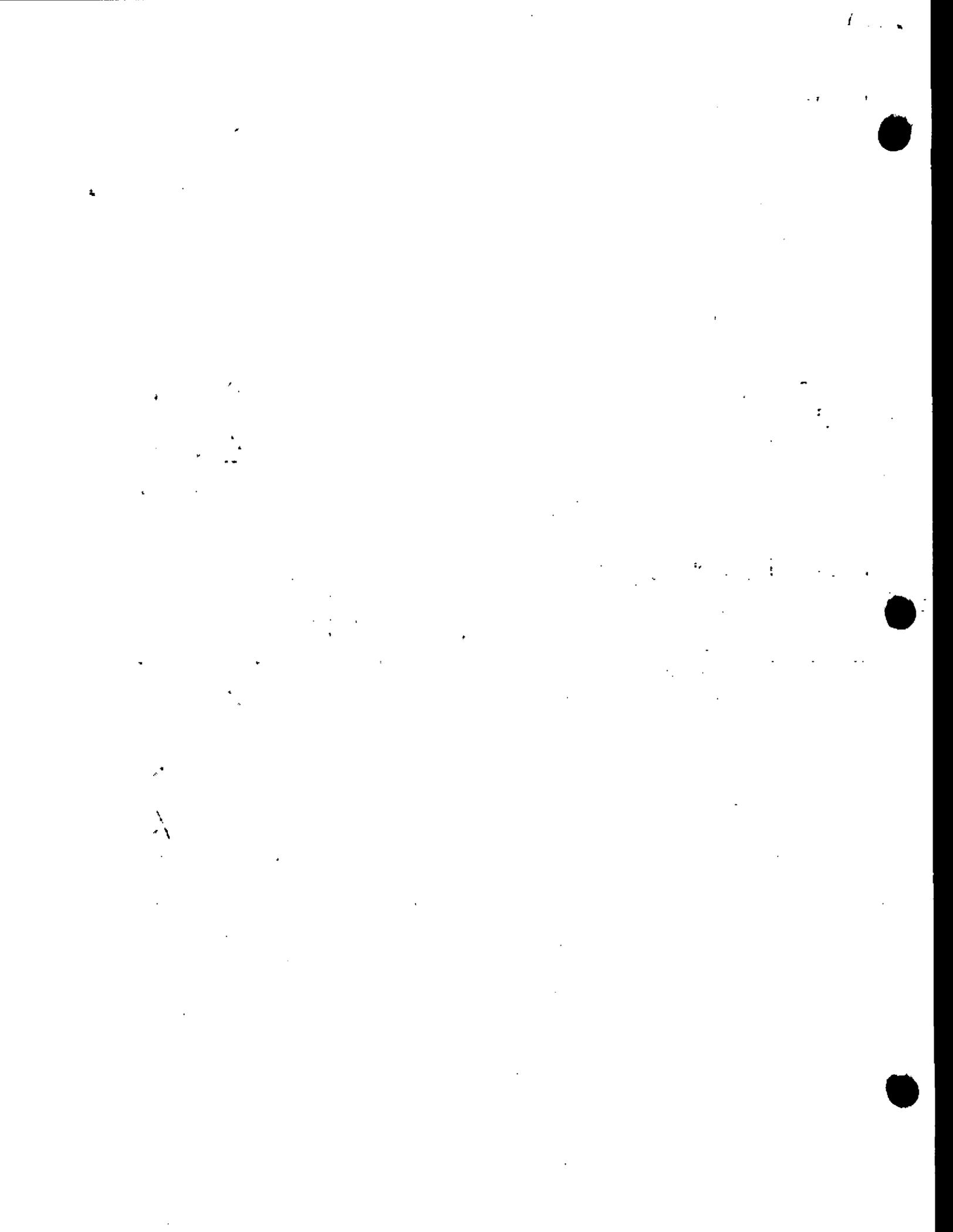
	c.	Does the wastewater treatment process include a process to separate/recover the organic phase of the waste?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
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NOTE: If the answers to b & c are "yes" 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

12.	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"/>
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	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.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>		
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)]		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
		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 right certification statement as required by 3745-70-07(b)(4)?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>