



**Environmental
Protection Agency**

John R. Kasich, **Governor**
Mary Taylor, **Lt. Governor**
Scott L. Malby, **Director**

Re: Bills Collision
OHD986984144
Hazardous Waste
Seneca County
NOV

March 28, 2012

Mr. Bill Alspach, Owner
Bills Collision
583 North Sandusky Street
Tiffin, Ohio 44883

Dear Mr. Alspach:

Thank you for accompanying me during Ohio EPA's March 22, 2012, hazardous waste compliance evaluation inspection (CEI) of Bills Collision located at 583 North Sandusky Street, Tiffin, Ohio. I inspected Bills Collision to determine its compliance with Ohio's hazardous waste laws as found in Chapter 3734. of the Ohio Revised Code (ORC), and Ohio's hazardous waste regulations as adopted under Chapter 3745. of the Ohio Administrative Code (OAC). The inspection included a tour of facility operations and a review of facility paperwork. This letter will explain the violation I found and what you need to do to correct this violation.

Bills Collision is an auto body and collision shop for automobiles. Bills Collision does not conduct automotive repairs. Bills Collision had notified on August 14, 1990, as a small quantity generator (SQG) of hazardous waste but is currently a conditionally exempt small quantity generator (CESQG) of hazardous waste. Hazardous waste generated is solvent/paint waste (D001, D035, F003, F005). Other wastes generated are waste paint booth filters and lamps.

During the inspection, I gave you the following information: the Ohio EPA fact sheets: Running an Auto Collision Repair Shop? Know Your Ohio EPA Regulations – May 1999; Universal Waste Rules for Handlers of Lamps; Fluorescent Lamps: What you Should Know; Identifying your Hazardous Waste; Handling Paint Waste from your Business; a fact sheet I found on the Internet from the Environmental Protection Commission of Hillsborough County (Florida) entitled Paint Booth Filters which explains the proper management of paint booth filters; a sample universal waste management plan for lamps; a generator category sheet with the hazardous waste characteristics; a list of Commercial Environmental Laboratories and a list of lamp recyclers in Ohio.

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I found the following violation of Ohio's hazardous waste laws. Bills Collision needs to immediately take the necessary measures to return to compliance with Ohio's environmental laws. **Within 14 days of receipt of this letter**, Bills Collision is requested to provide documentation to this office including the steps taken to abate the violation cited below. Documentation of steps taken to return to compliance includes written correspondence, updated policies, and photographs, as appropriate, and may be submitted via the postal service or electronically to amber.hicks@epa.ohio.gov.

1. Waste Evaluation.
OAC Rule 3745-52-11

Any person who generates a waste must determine if that waste is a hazardous waste in accordance with the criteria for hazardous waste as set forth in Chapter 3745-51 of the Administrative Code.

- A. Bills Collision failed to have waste evaluation documentation or an established recycling plan in place for the fluorescent bulbs generated at the facility.

Bills Collision is currently disposing of their fluorescent bulbs in the trash.

- *During the CEI on March 22, 2012, you stated that Bills Collision will now be managing their lamps as universal waste and recycling their lamps with Gross Electric in Toledo, OH. Thus this portion of the violation is abated.*
- B. Bills Collision has failed to evaluate the paint filters from the painting booth to determine if they are hazardous. Bills Collision is currently disposing of this waste stream in the local landfill. Bills Collision must immediately cease disposing of the paint booth filters as non-hazardous waste in the local landfill until a proper waste evaluation has been completed.

A waste evaluation can be conducted by taking a representative sample of this waste to properly evaluate this waste stream through a laboratory analysis which lists constituents present and at what concentration. Bills Collision must sample the paint filters from the painting booth to determine the Toxicity Characteristic Leaching Procedure (TCLP) concentrations of **all Resource Conservation and Recovery Act (RCRA) metals** (excluding mercury) and the **regulated volatile organic constituents (VOCs)** that may be present in the waste in light of the materials or the processes used as listed in OAC Rule 3745-51-24 following the methods as outlined in U.S. EPA's SW-846. You will need to ensure to collect **at least 100 grams of waste** to properly run the TCLP test.

- ***To abate this violation, Bills Collision must submit the analytical information from sampling to me. Your results must document if the waste is hazardous or not. If it is hazardous, you must explain what treatment, storage, or disposal facility you will send it to.***
- *If the waste is hazardous, I will determine the status of your compliance with other hazardous waste laws and notify you of my findings in a separate letter.*
- *Please consult the fact sheet Identifying your Hazardous Waste given to you during the CEI. You stated during the CEI that you would contact Jones & Henry Laboratories about potential sampling and would have them call me with any questions. Please feel free to have them call me to discuss your paint booth filter sampling.*

When sampling is performed, please notify me at least seven days prior to taking the samples so that I or an Ohio EPA representative may be present.

Please be advised that the violation cited above will continue until the violation has been properly abated. Failure to comply with Chapter 3734. of the Ohio Revised Code and rules promulgated thereunder may result in a civil penalty of up to \$10,000 per day for each violation. It is imperative that you return to compliance. If circumstances delay the abatement of violations, Bills Collision is requested to submit written correspondence of the steps that will be taken by date certain to attain compliance.

Pollution Prevention:

Bills Collision is beginning to recycle their fluorescent bulbs. I have enclosed a list of computer, fluorescent lamp and ballast recyclers which you may find useful. If you find additional ways to recycle, reduce, or altogether eliminate the amount of waste that your company generates you may be able to reduce treatment and disposal costs. Furthermore, you may possibly reduce your regulatory requirements. Or if you would like a free, non-regulatory on-site pollution prevention assessment or more information about pollution prevention, please contact me at (419) 373-3082. Ohio EPA has helpful information about this at the following web address: <http://www.epa.ohio.gov/ocapp/>

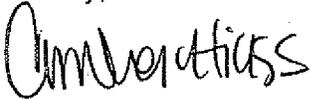
The Division of Materials and Waste Management has created an electronic news service to provide you with quick and timely updates on events and news related to hazardous waste activities in Ohio. If you haven't already, we encourage you to sign-up for this free service. You can find more information at the following Web link http://ohioepa.custhelp.com/cgi-bin/ohioepa.cfg/php/enduser/doc_serve.php?2=subscriptionpage. Please feel free to share this information with your colleagues.

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Enclosed you will find a copy of the checklists that I completed during the inspection. Please address all correspondence to Amber Hicks, Ohio EPA, 347 N. Dunbridge Road, Bowling Green, Ohio 43402. Should you have any questions, please feel free to call me at (419) 373-3082 or email me at amber.hicks@epa.ohio.gov.

You can find copies of the rules and other information on the division's web page at <http://www.epa.ohio.gov/dmwm.aspx>.

Sincerely,



Amber M. Hicks
Division of Materials and Waste Management

/lr

Enclosures

pc: Cindy Lohrbach, DMWM, NWDO
Colleen Weaver, DMWM, NWDO (w/ checklists)

ec: Amber Hicks, DMWM, NWDO
Colleen Weaver, DMWM, NWDO

NOTICE:

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

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

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: OHD986984144 Name: Bills Collision Website: (Optional) Street Address: 583 N. Sandusky Street City, Town, or Village: Tiffin State: OH County Name: Seneca Zip Code: 44883 <table style="width:100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; text-align: center;">Private <input checked="" type="checkbox"/></td> <td style="border: 1px solid black; text-align: center;">County <input type="checkbox"/></td> <td style="border: 1px solid black; text-align: center;">District <input type="checkbox"/></td> <td style="border: 1px solid black; text-align: center;">Federal <input type="checkbox"/></td> <td style="border: 1px solid black; text-align: center;">Indian <input type="checkbox"/></td> <td style="border: 1px solid black; text-align: center;">Municipal <input type="checkbox"/></td> <td style="border: 1px solid black; text-align: center;">State <input type="checkbox"/></td> <td style="border: 1px solid black; text-align: center;">Other <input type="checkbox"/></td> </tr> </table>	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"/>																
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Facility Representative Additional names can be recorded in number 12 Only provide address information if it is different than the site address	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 33%;">First Name: Bill</td> <td style="border: 1px solid black; width: 10%;">Mi:</td> <td style="border: 1px solid black; width: 57%;">Last Name: Alspach</td> </tr> <tr> <td colspan="3" style="border: 1px solid black;">Title: Owner</td> </tr> <tr> <td style="border: 1px solid black;">Phone Number: 419-448-8243</td> <td colspan="2" style="border: 1px solid black;">Phone Number Extension:</td> </tr> <tr> <td colspan="3" style="border: 1px solid black;">E-Mail Address:</td> </tr> <tr> <td style="border: 1px solid black;">Fax Number:</td> <td colspan="2" style="border: 1px solid black;">Fax Number Extension:</td> </tr> <tr> <td colspan="3" style="border: 1px solid black;">Street or P.O. Box:</td> </tr> <tr> <td colspan="3" style="border: 1px solid black;">City, Town or Village:</td> </tr> <tr> <td style="border: 1px solid black;">State:</td> <td colspan="2" style="border: 1px solid black;">Zip Code:</td> </tr> </table>	First Name: Bill	Mi:	Last Name: Alspach	Title: Owner			Phone Number: 419-448-8243	Phone Number Extension:		E-Mail Address:			Fax Number:	Fax Number Extension:		Street or P.O. Box:			City, Town or Village:			State:	Zip Code:	
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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	<table style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2" style="border: 1px solid black;">Name of Site's Legal Owner:</td> <td colspan="2" style="border: 1px solid black;">Date Became Owner (mm/dd/yyyy):</td> </tr> <tr> <td style="border: 1px solid black;">Owner Type:</td> <td style="border: 1px solid black;">Private <input type="checkbox"/></td> <td style="border: 1px solid black;">County <input type="checkbox"/></td> <td style="border: 1px solid black;">District <input type="checkbox"/></td> </tr> <tr> <td style="border: 1px solid black;">Federal <input type="checkbox"/></td> <td style="border: 1px solid black;">Indian <input type="checkbox"/></td> <td style="border: 1px solid black;">Municipal <input type="checkbox"/></td> <td style="border: 1px solid black;">State <input type="checkbox"/></td> </tr> <tr> <td style="border: 1px solid black;">Other <input type="checkbox"/></td> <td colspan="3" style="border: 1px solid black;">Street or P.O. Box:</td> </tr> <tr> <td colspan="2" style="border: 1px solid black;">City, Town or Village:</td> <td colspan="2" style="border: 1px solid black;">Owner Phone #:</td> </tr> <tr> <td style="border: 1px solid black;">State:</td> <td style="border: 1px solid black;">Country:</td> <td colspan="2" style="border: 1px solid black;">Zip Code:</td> </tr> <tr> <td colspan="2" style="border: 1px solid black;">Name of Site's Operator:</td> <td colspan="2" style="border: 1px solid black;">Date Became Operator (mm/dd/yyyy):</td> </tr> <tr> <td style="border: 1px solid black;">Operator Type:</td> <td style="border: 1px solid black;">Private <input type="checkbox"/></td> <td style="border: 1px solid black;">County <input type="checkbox"/></td> <td style="border: 1px solid black;">District <input type="checkbox"/></td> </tr> <tr> <td style="border: 1px solid black;">Federal <input type="checkbox"/></td> <td style="border: 1px solid black;">Indian <input type="checkbox"/></td> <td style="border: 1px solid black;">Municipal <input type="checkbox"/></td> <td style="border: 1px solid black;">State <input type="checkbox"/></td> </tr> <tr> <td style="border: 1px solid black;">Other <input type="checkbox"/></td> <td colspan="3" style="border: 1px solid black;">Street or P.O. Box:</td> </tr> <tr> <td colspan="2" style="border: 1px solid black;">City, Town or Village:</td> <td colspan="2" style="border: 1px solid black;">Operator Phone #:</td> </tr> <tr> <td style="border: 1px solid black;">State:</td> <td style="border: 1px solid black;">Country:</td> <td colspan="2" style="border: 1px solid black;">Zip Code:</td> </tr> </table>	Name of Site's Legal Owner:		Date Became Owner (mm/dd/yyyy):		Owner Type:	Private <input type="checkbox"/>	County <input type="checkbox"/>	District <input type="checkbox"/>	Federal <input type="checkbox"/>	Indian <input type="checkbox"/>	Municipal <input type="checkbox"/>	State <input type="checkbox"/>	Other <input type="checkbox"/>	Street or P.O. Box:			City, Town or Village:		Owner Phone #:		State:	Country:	Zip Code:		Name of Site's Operator:		Date Became Operator (mm/dd/yyyy):		Operator Type:	Private <input type="checkbox"/>	County <input type="checkbox"/>	District <input type="checkbox"/>	Federal <input type="checkbox"/>	Indian <input type="checkbox"/>	Municipal <input type="checkbox"/>	State <input type="checkbox"/>	Other <input type="checkbox"/>	Street or P.O. Box:			City, Town or Village:		Operator Phone #:		State:	Country:	Zip Code:	
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VIOLATIONS CITED?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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TYPE OF HANDLER - MARK "X" AS APPROPRIATE

<input type="checkbox"/> Not a HW Generator	<input checked="" type="checkbox"/> UNKNOWN: Cited for violation of 3745-52-11 <input type="checkbox"/> Short-Term/Temporary Generator (generates from a short-term or one-time event and not from on-going processes). <i>Check the box for the applicable generator status and provide a comment.</i>	<input type="checkbox"/> Large Quantity Generator (LQG) <input type="checkbox"/> Small Quantity Generator (SQG) <input type="checkbox"/> Conditionally Exempt Small Quantity Generator <input type="checkbox"/> U.S. Importer of Hazardous Waste <input type="checkbox"/> Mixed Waste (Hazardous and Radioactive) Generator
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TYPE OF REGULATED WASTE ACTIVITY (MARK "X" IN ALL OF THE APPROPRIATE BOXES)

- | | |
|---|--|
| <input type="checkbox"/> Hazardous Waste Transporter | <input type="checkbox"/> Exempt Boiler and/or Industrial Furnace |
| <input type="checkbox"/> Hazardous Waste Transfer Facility | <input type="checkbox"/> Small Quantity On-Site Burner Exemption |
| <input type="checkbox"/> Treater, Storer or Disposer of Hazardous Waste | <input type="checkbox"/> Smelting, Melting, Refining Furnace Exemption |
| <input type="checkbox"/> Recycler of Hazardous Waste | <input type="checkbox"/> Underground Injection Control Facility |
| <input type="checkbox"/> 72-Hour Recycler | <input type="checkbox"/> Receives Hazardous Waste from Off-site |

UNIVERSAL WASTE ACTIVITIES (INDICATE TYPES OF UNIVERSAL WASTE MANAGED)

(CHECK ALL BOXES THAT APPLY)

- | | |
|---|---|
| <input type="checkbox"/> Small Quantity Handler of Universal Waste | <input type="checkbox"/> Destination Facility for Universal Waste |
| <input type="checkbox"/> Large Quantity Handler of Universal Waste
(accumulates 5,000 kg. or more) | |

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

- Batteries
- Pesticides
- Mercury containing equipment
- Lamps

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

- Used Oil Generator
- Used Oil Transporter
- Used Oil Transfer Facility
- Used Oil Processor
- Used Oil Re-refiner
- Off-Specification Used Oil Burner
- Used Oil Fuel Marketer who directs shipment of Off-Spec Used Oil
- Used Oil Fuel Marketer who first claims the Used Oil meets the specifications

Eligible Academic Entities with Laboratories: Facility has previously notified that they are opting into managing laboratory hazardous waste pursuant to OAC rules 3745-52-200 through 3745-52-216. Check the box(es) below to indicate the laboratory type.

- College or University
- Teaching hospital that is owned by or has a formal written affiliation agreement with a college or university
- Non-profit Institute that is owned by or has a formal written affiliation agreement with a college or university

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

D001 D035 F003 F005

COMMENTS: USE THIS AREA TO DESCRIBE WHETHER THE INSPECTION WAS ANNOUNCED, WHETHER THE WASTE IS STORED IN TANKS OR CONTAINERS, ETC.

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

Name of Inspector(s)
Amber Hicks

Name of Inspector(s)

Date of Inspection/Time
(mm/dd/yyyy) (hh:mm)
3/22/12 9:59

Comments:

PROCESS, WASTE, P2 SUMMARY SHEET

Facility Name: Bills Collision **Facility Type:** LQG SQG CESQG TSD **Date of Inspection:** 3-22-12 **EPA ID#:** OHD986984144

Waste Generated			On- or Off-Site Management		P2 Activities		
Process/Activity Generating Waste <small>(e.g. plating bath, machining, baghouse, painting, general maintenance, etc)</small>	Waste Description <small>(e.g. sludge, solvent, ash, used oil, spent lamps, etc.) and EPA Waste Code, if applic.</small>	QTY Generated per Month, Type of Accumulation (container, tank, etc) and location of waste accumulation area	Type of On-Site Treatment <small>(recycle, wwt, etc)</small>	Name, state, and type of activity occurring at the off-site facility.	Current P2 Activities	P2 Opportunities	
1	Paint related activities	Waste paint/solvent - D001, D035, F003, F005		~ 1 to 2 drums per year so 5 to 10 gallons per month.	Petro-Chem Processing Group - Detroit, MI - Fuel blending prior to energy recovery at another site.	Energy recovery.	
2	Paint booth	Paint booth filters		Roll-out filters - changed once a month	In solid waste landfill - cited for 52-11.		
3	Lighting	Fluorescent bulbs		Several bulbs a year.	In solid waste landfill - cited for 52-11.		Facility will begin recycling bulbs with Gross Electric in Toledo, OH.
4							
5							
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8							
9							

REMARKS **GENERAL INFORMATION**

General Process Information:

Regulatory/Enforcement History (if applicable):

Additional P2 remarks and information:

Would this facility be interested in a P2 assessment? Yes* No *If yes, refer promptly to your district P2 coordinator.
 Office of Compliance Assistance and Pollution Prevention - 1-800-329-7518 or p2mail@epa.state.oh.us or www.epa.state.oh.us/ocapp/ocapp.html

Other:

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

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

Safety Equipment Used:

WASTE EVALUATION

1.	Have all wastes generated at the facility been adequately evaluated? [3745-52-11]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
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GENERATOR CLASSIFICATION

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

OFF-SITE SHIPMENT OF HAZARDOUS WASTE

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

4.	Does the generator treat hazardous waste in a:	
	a. Container that meets 3745-66-70 to 3745-66-77?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	b. Tank that meets 3745-66-90 to 3745-66-101 except 3745-66-97(C)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	c. Drip pads that meet 3745-69-40 to 3745-69-45?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	d. Containment building that meets 3745-256-100 to 3745-256-102?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

NOTE: Complete appropriate checklist for each unit.

NOTE: If the CESQG conducts treatment they are subject to the LQG requirements.

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

MIX HAZARDOUS WASTE WITH USED OIL

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