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RTCD



State of Ohio Environmental Protection Agency

Southwest District

401 East Fifth Street
Dayton, Ohio 45402-2911

TELE: (937)285-6357 FAX: (937)285-6249
www.epa.state.oh.us

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

July 16, 2008

Re: **Meineke Car Care Center**
Complaint Investigation
Used Oil Generator
Hamilton County, SWDO
Notice of Violation (NOV)

Mr. Choudary Bobba
Meineke Car Care Center
7784 Montgomery Rd.
Cincinnati, OH 45236

OHR 000159277

Dear Mr. Bobba:

On April 1, 2008, Ohio EPA received a complaint submitted via USEPA's web site that Meineke Car Care Center (MCCC) located at 7784 Montgomery Rd. in Cincinnati dumps used antifreeze down the floor drain, disposes of oil filters in the dumpster, has waste oil spilled all around the waste tank and hasn't disposed of your used oil waste for a 15 year period because of the cost to properly dispose it. During my and Larry Dickerson's July 2, 2008 site visit, Mark Schiele showed us around your shop. We did not observe anything to support most of the complaint allegations (all of them except proper disposal records).

On July 15, 2008, you confirmed that MCCC drains (and collects the drained used oil in your tank) your used oil filters prior to selling the metal for scrap. However, you could not provide me with any records to document your used oil waste disposal. Therefore, based upon our July 15, 2008 telephone conversation, Ohio EPA's Division of Hazardous Waste Management is waiting to close this complaint until we receive information regarding who has picked up the last 2 loads of used oil that MCCC has disposed. We will wait to fill out Question #11 of the USED OIL INSPECTION CHECKLISTS (enclosed) and determine your compliance with OAC rule 3745-279-24 until you look further for this information. This rule requires that a generator must have the used oil hauled only by transporters that have obtained a U.S. EPA ID#; I realize that you may not have the U.S. EPA ID#, but if you find your transporter's name I can find this information for you. **Please provide Ohio EPA with the name of the company that has picked up the last 2 loads of MCCC's used oil within 15 days upon your receipt of this letter.**

Mr. Choudary Bobba
Meineke Car Care Center
July 16, 2008
Page 2

Additionally, we found the following violation of Ohio's hazardous waste laws:

Used Oil Storage Requirements for Generators
OAC 3745-279-22(C)

Containers used to store used oil at generator facilities must be labeled with the words "Used Oil".

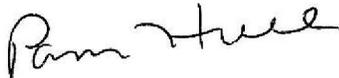
MCCC failed to label your used oil drums with the words "Used Oil".

During the July 2, 2008 complaint investigation MCCC labeled the used oil tank, and this action **corrected** the above violation.

Also during our July 15, 2008 telephone conversation, I told you that I would send you a fact sheet outlining Used Oil Generator Requirements. It is enclosed for your review.

Please call me at (937) 285-6091 if you have any questions.

Sincerely,



Pam Hull
District Representative
Division of Hazardous Waste Management

cc: Dinah Crawford, SWDO-DHWM/SWDO file
SWDO-file: Meineke Car Care Center, Used Oil Generator, Hamilton County

PH/ca

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.

USED OIL INSPECTION CHECKLIST (Short Version)

NOTE: This checklist does not include requirements for used oil transporters and transfer facilities, processors and re-refiners, burners, and marketers.

PROHIBITIONS

1. Is used oil being managed in a surface impoundment or waste pile? If so: Yes ___ No N/A ___ RMK#
- Is the surface impoundment or waste pile being regulated under OAC 3745-54 to 3745-57 and 3745-205 or 3745-65 to 3745-69 and 3745-256? [3745-279-12(A)] Yes ___ No N/A RMK#
2. Is used oil being used as a dust suppressant? [3745-279-12(B)] Yes No N/A ___ RMK#
3. Is off-specification used oil fuel burned for energy recovery only in devices specified in 3745-279-12(C)? Yes ___ No N/A RMK#

USED OIL GENERATOR STANDARDS

4. Does the generator mix hazardous waste with used oil only as provided in 3745-279-10(B)? [2745-279-21(A)] Yes ___ No N/A RMK#
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 ___ No N/A RMK#
6. Does the generator only store used oil in tanks, containers, or units subject to OAC 3745-54 to 3745-57 and 3745-205 or 3745-65 to 3745-69 and 3745-256? [3745-279-22(A)] Yes No N/A ___ RMK#
7. Are containers and aboveground tanks used to store used oil in good condition with no visible leaks? [3745-279-22(B)] Yes No N/A ___ RMK#
8. Are containers, above ground tanks, and fill pipes used for underground tanks clearly labeled or marked "Used Oil?" [3745-279-22(C)] Yes ___ No N/A ___ RMK# 1
9. Has the generator, upon detection of a release of used oil, done the following: [3745-279-22(D)]
- a. Stopped the release? Yes ___ No N/A RMK#

- b. Contained the release? Yes ___ No N/A RMK#
- c. Cleaned up and properly managed the used oil and other materials? Yes ___ No N/A RMK#
- d. Repaired or replaced the containers or tanks prior to returning them to service, if necessary? Yes ___ No N/A RMK#
10. Does the generator burn used oil in used fired space heaters? [3745-279-23] If so: Yes ___ No N/A ___ RMK#
- 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 ___ No N/A RMK#
- b. Is the heater designed to have a maximum capacity of not more than 0.5 million BTU per hour? Yes ___ No N/A RMK#
- c. Are the combustion gases from heater vented to the ambient air? Yes ___ No N/A RMK#
11. Does the generator have the used oil hauled only by transporters that have obtained U.S. EPA ID#, unless the generator qualifies for an exemption pursuant to 3745-279-24 (self transportation or tolling agreements)? [3745-279-24] Yes ___ No N/A ___ RMK# 2

USED OIL COLLECTION CENTERS AND AGGREGATION POINTS

12. 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 ___ No N/A RMK#
13. Is the non-DIY used oil collection center registered with Ohio EPA? [3745-279-31] Yes ___ No N/A RMK#
14. Is the used oil aggregation point in compliance with the generator standards in 3745-279-20 to 3745-279-24? [3745-279-32] Yes ___ No N/A RMK#

WASTE EVALUATION

15. Have all wastes generated at the facility been evaluated? [3745-52-11] Yes No N/A ___ RMK#

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REMARKS

- 1 Meineke Car Care Center (MCCC) corrected this violation during the 7/2/08 complaint investigation.
- 2 MCCC did not have detailed records regarding this information during my 7/15/08 telephone conversation with Choudary Bobba. I am sending him a DHWM guidance document pertaining to used oil generators. Will wait to determine if this is a violation until Mr. Bobba has time to check his records closer.

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

For Ohio EPA use only

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

2. Site EPA ID No.	EPA ID Number:								
3. Site Name	Name: Meineke Car Care Center				Website: (Optional)				
4. Site Location Information	Street Address: 7784 Montgomery Rd.								
	City, Town, or Village: Cincinnati				State: OH				
	County Name: Hamilton				Zip Code: 45236				
5. Site Land Type (check only one)	Private <input checked="" type="checkbox"/>	County <input type="checkbox"/>	District <input type="checkbox"/>	Federal <input type="checkbox"/>	Indian <input type="checkbox"/>	Municipal <input type="checkbox"/>	State <input type="checkbox"/>	Other <input type="checkbox"/>	
6. NAICS code(s) www.census.gov/epcd/www/naics.html									
7. Facility Representative Additional names can be recorded in number 12 Only provide address information if it is different than the site address	First Name: Choudary			MI:	Last Name: Bobba				
	Phone Number: 513-791-4733				Phone Number Extension:				
	E-Mail Address:								
	Fax Number:				Fax Number Extension:				
	Street or P.O. Box								
	City, Town or Village: West Alexandria								
	State:			Country:		Zip Code:			
8. Legal Owner and Operator of the Site List Additional Owners and/or Operators in the Comment Section or on another copy of this form page	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):				
	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:				Operator Phone #:				
	State:				Country:		Zip Code:		
9. Violations Cited?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> No								
10A. Type of Regulated Waste Activity (Mark "X" in all of the appropriate boxes)									
<input checked="" type="checkbox"/> Not Regulated				<input type="checkbox"/> Conditionally Exempt Small Quantity Generator					
<input type="checkbox"/> UNKNOWN: Cited for violation of 3745-52-11				<input type="checkbox"/> United States Importer of Hazardous Waste					
<input type="checkbox"/> Large Quantity Generator (LQG)				<input type="checkbox"/> Mixed Waste (Hazardous and Radioactive) Generator					
<input type="checkbox"/> Small Quantity Generator (SQG)									
<input type="checkbox"/> Hazardous Waste Transporter				<input type="checkbox"/> Exempt Boiler and/or Industrial Furnace					
<input type="checkbox"/> Treater, Storer or Disposer of Hazardous Waste				<input type="checkbox"/> Small Quantity On-Site Burner Exemption					
<input type="checkbox"/> Recycler of Hazardous Waste				<input type="checkbox"/> Smelting, Melting, Refining Furnace Exemption					
<input type="checkbox"/> Underground Injection Control Facility									

10B. 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"/> Large Quantity Handler of Universal Waste (accumulates 5,000 kg. or more)	
<input type="checkbox"/> Destination Facility for Universal Waste			
Check all boxes below that apply for each of the three types of facilities above		10C. Used Oil Activities (Indicate Type(s) of Activity(ies))	
	Managed	<input checked="" type="checkbox"/> Used Oil Generator	<input type="checkbox"/> Off-Specification Used Oil Burner
Batteries	<input type="checkbox"/>	<input type="checkbox"/> Used Oil Transporter	<input type="checkbox"/> Used Oil Fuel Marketer Who Directs Shipment of Off-Spec. Oil
Pesticides	<input type="checkbox"/>	<input type="checkbox"/> Used Oil Transfer Facility	<input type="checkbox"/> Used Oil Fuel Marketer to Off-Specification Used Oil Burner
Mercury containing equipment	<input type="checkbox"/>	<input type="checkbox"/> Used Oil Processor	
Lamps	<input type="checkbox"/>	<input type="checkbox"/> Used Oil Re-refiner	
11. 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.			
12. 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: Mark Schiele showed us around the shop.
Tanks	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Other Comments:
Containers	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
13. Name of Inspector(s)		Name of Inspector(s)	Date of Inspection/Time (mm/dd/yyyy) (hh:mm)
Pam Hull		Larry Dickerson	07/02/2008
14. OPTIONAL CERTIFICATION. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.			
Signature of Owner, Operator, or an Authorized Representative		Name and Title (Print)	Date (mm/dd/yyyy)

USED OIL INSPECTION CHECKLIST (Short Version)

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

For Ohio EPA use only

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

2. Site EPA ID No.	EPA ID Number:								
3. Site Name	Name: Meineke Car Care Center				Website: (Optional)				
4. Site Location Information	Street Address: 7784 Montgomery Rd.								
	City, Town, or Village: Cincinnati				State: OH				
	County Name: Hamilton				Zip Code: 45236				
5. Site Land Type (check only one)	Private <input checked="" type="checkbox"/>	County <input type="checkbox"/>	District <input type="checkbox"/>	Federal <input type="checkbox"/>	Indian <input type="checkbox"/>	Municipal <input type="checkbox"/>	State <input type="checkbox"/>	Other <input type="checkbox"/>	
6. NAICS code(s) www.census.gov/epcd/www/naics.html									
7. Facility Representative Additional names can be recorded in number 12 Only provide address information if it is different than the site address	First Name: Choudary			MI:	Last Name: Bobba				
	Phone Number: 513-791-4733				Phone Number Extension:				
	E-Mail Address:								
	Fax Number:				Fax Number Extension:				
	Street or P.O. Box								
	City, Town or Village: West Alexandria								
	State:				Country:		Zip Code:		
8. Legal Owner and Operator of the Site List Additional Owners and/or Operators in the Comment Section or on another copy of this form page	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):				
	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"/>
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	State:				Country:		Zip Code:		
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Mercury containing equipment	<input type="checkbox"/>	<input type="checkbox"/> Used Oil Processor	
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Containers	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
13. Name of Inspector(s)	Name of Inspector(s)		Date of Inspection/Time (mm/dd/yyyy) (hh:mm)
Pam Hull	Larry Dickerson		07/02/2008
14. OPTIONAL CERTIFICATION. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.			
Signature of Owner, Operator, or an Authorized Representative		Name and Title (Print)	Date (mm/dd/yyyy)