



Environmental
Protection Agency

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

July 10, 2012

RE: LUBRIZOL - WICKLIFFE
OHD 004 172 565
LAKE COUNTY
NOV/RTC

Suzanne Skrab
The Lubrizol Corporation
29400 Lakeland Boulevard
Wickliffe, OH 44092-2298

Dear Ms. Skrab:

On June 8, 2012, I inspected Lubrizol located at 29400 Lakeland Boulevard, Wickliffe, Ohio. The purpose of this was to determine if this facility was in compliance with Ohio's hazardous waste, universal waste and used oil laws and rules as found in Chapter 3734 of the Ohio Revised Code (ORC) and Chapter 3745 of the Ohio Administrative Code (OAC) and with its hazardous waste storage and treatment permit.

The following violation was found:

1. **OAC Rule 3745-52-34(A)(2) – Accumulation start date.**

This rule requires that, while being accumulated and/or treated on site, each container of hazardous waste must be labeled with the date each period of accumulation and/or treatment began.

Lubrizol violated this rule by having one full drum of Vac Oil 128 hazardous waste that did not have an accumulation start date on it. This drum had been taken the day of the inspection from a satellite accumulation area and was waiting at the Pilot Plant pumpout station to be pumped into the hazardous waste tank. This was corrected during the inspection by placing the accumulation start date of 6-8-12 on the drum. Containers in satellite accumulation areas should have the accumulation start date marked on them when they are full and definitely before they are moved to another location.

Other information and suggestions:

- Ohio EPA's Office of Compliance Assistance and Pollution Prevention (OCAPP) provides compliance and pollution prevention assistance on environmental issues (including sources of funding) related to air, land, and water. They can be contacted at (800) 329-7518, or <http://www.epa.ohio.gov/Default.aspx?alias=www.epa.ohio.gov/ocapp>.
- ENERGY STAR is a government-backed program helping businesses and individuals protect the environment through superior energy efficiency. Their website is at: <http://www.energystar.gov/>.

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- The Clean Air Resource Center offers help in understanding EPA air quality requirements. In addition, if your business is required to purchase new equipment, they can offer better-cost financing with special tax incentives. Their phone number is (800) 225-5051 and website is <http://www.ohioairquality.org/>.
- Ohio Bureau of Workers' Compensation has an OSHA On-Site Consultation service which includes free on-site safety inspections and consultation, safety program assistance, and safety and hygiene training or seminars. More information can be found at: <http://www.ohiobwc.com/employer/programs/safety/SandHOSHAOnSite.asp>.

If you have any questions, please contact me at (330) 963-1217, or robert.almquist@epa.ohio.gov.

Sincerely,



Robert Almquist
Division of Materials and Waste Management

RA:cl
Enclosures

ec: Frank Popotnik, DMWM, NEDO
Natalie Oryshkewych, DMWM, NEDO
Jeff Mayhugh, DMWM, CO
Marlene Kinney, DMWM, NEDO
Anthony Becker, DAPC, NEDO

Send to Central Office <input checked="" type="checkbox"/>	Ohio Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION/VERIFICATION FORM		For Ohio EPA use only
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: OHD 004 172 565 Name: The Lubrizol Corporation Website: (Optional) Street Address: 29400 Lakeland Blvd. City, Town, or Village: Wickliffe State: OH County Name: Lake Zip Code: 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"/> 325199		
Facility Representative Additional names can be recorded in number 12 Only provide address information if it is different than the site address	First Name: Suzanne MI: Last Name: Skrab Title: Environmental Assurance Engineer Phone Number: 440-347-8112 Phone Number Extension: E-Mail Address: suzanne.skrab@lubrizol.com Fax Number: 440-347-2267 Fax Number Extension: Street or P.O. Box: City, Town or Village: State: Zip Code:		
Legal Owner And Operator of the Site. List Additional Owners and/or Operators in the Comment Section or on another copy of this form page	Name of Site's Legal Owner: The Lubrizol Corporation Date Became Owner (mm/dd/yyyy): 08/28/1931 Owner Type: 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"/> Street or P.O. Box: 29400 Lakeland Blvd. City, Town or Village: Wickliffe Owner Phone #: 440-943-1200 State: OH Country: USA Zip Code: 44092 Name of Site's Operator: same Date Became Operator (mm/dd/yyyy): Operator Type: Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other <input type="checkbox"/> Street or P.O. Box: City, Town or Village: Operator Phone #: State: Country Zip Code:		
VIOLATIONS CITED? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
TYPE OF HANDLER - MARK "X" AS APPROPRIATE			
<input type="checkbox"/> Not a HW Generator	<input type="checkbox"/> UNKNOWN: Cited for violation of 3745-52-11 <input type="checkbox"/> Short-Term/Temporary Generator (generates from a short-term or one-time event and not from on-going processes). Check the box for the applicable generator status and provide a comment. <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)

- | | |
|--|--|
| <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 checked="" 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 checked="" 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.

**same as last
annual report**

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

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

Name of Inspector(s)
Robert Almquist

Name of Inspector(s)
Anthony Becker, DAPC

Date of Inspection/Time
(mm/dd/yyyy) (hh:mm)
06/8/2012

Comments:

Waste Summary for: Lubrizol, OHD004172565, LQG, TSD, 6-8-12 inspection

Only hazardous wastes are included here.

#	Process generating the waste	Waste description and haz. codes	Profile # (Most of these waste categories include multiple waste profiles.)	Date of last analysis	Date of last LDR	Amount generated per 2011 annual report in pounds	On-site management	Off-site management
1		Paint waste, D001, F003				751		Veolia ES Technical Solutions, West Carrollton, OH for transfer off-site. (Veolia)
2		R&D waste, D002				13,377		Veolia
3		R&D waste, D002				2,855		Veolia
4		R&D waste, D001, D002				814		Veolia
5		R&D waste, D001, D002, D035				32,006		Veolia
6		R&D waste, D001, D018, F003				1,749		Veolia
7		R&D waste, D002				1,232		Veolia
8	boiler	Boiler treatment				3,676		Veolia

		chemicals, D002						
9		R&D waste, D001				295		Veolia
10		R&D waste, D001, D018				22,095		Veolia
11		R&D waste, D001, D018				1,073		Veolia
12		R&D waste, D001, D018, U188				16,308		Veolia
13		R&D waste, D002				1,402		Veolia
14		Air pollution control waste, D002, D003				3,451		Veolia
15		R&D waste, D001, D018, F003, F005				17,727		Veolia
16		Titration waste, D001, D018, D035, F003, F005				670		Veolia
18	Fleet garage	Engine parts cleaning, aqueous, D006, D018, D027, D039, D040				240		Safety-Kleen, Dolton, IL for solvents recovery

19		R&D waste, D001, D002, D003, U045				17		Veolia
20		Waste mercury, D009				60		Heritage-WTI, East Liverpool, OH for transfer off-site.
21		R&D waste, D002				1,151		Rineco Chemical Industries for transfer off-site.
22	Pilot plant operations and Research Departments	R&D lab pack, many codes – see annual report				16,890	Stored in building 21	Heritage-WTI, East Liverpool, OH for incineration.
24	Phase separation in S-1 tank	S-2 aqueous waste, D001, D018, D035, F003, F005	U31795B		4-29-09	221,999	Stored in S-2 tank	Clean Harbors, Baltimore, MD for other treatment. Supercritical extraction using carbon dioxide. The organics are stripped off and sent to a cement kiln. The water is further treated and then discharged to Chesapeake Bay after the City of Baltimore checks it.
25	Phase separation in S-1 tank	S-4 organic waste, D001, D018, D035, F003, F005	688213			339,807	Stored in S-4 tank.	Veolia and then to Systech, Paulding, OH or another cement kiln for use as a fuel.

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

CESQG: ≤100 Kg. (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: $\text{Amount in gallons} \times \text{Specific Gravity} \times 8.345 = \text{Amounts in pounds}$.

Safety Equipment Used:

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 checked="" type="checkbox"/>
	b. Tank that meets 3745-66-90 to 3745-66-100 except 3745-66-97(C)?	Yes <input checked="" 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 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 waste is treated to meet LDRs, use LDR checklist.

11.	Does the generator export hazardous waste? If so:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	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 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 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 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 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 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)(1)]	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)(1)]&[3745-52-27(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<i>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)(1)]</i>		
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"/>
<i>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)]</i>		
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"/>
<i>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.</i>		
17.	If the generator received a rejected load or residue, did the generator:	
a.	Sign item 20 of the new manifest or item 18c of the original manifest? [3745-52-23(F)(1)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
b.	Provide the transporter a copy of the manifest? [3745-52-23(F)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
c.	Send a copy of the manifest to the designated facility that returned the shipment with 30 days after delivery of the rejected shipment? [3745-52-23(F)(3)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
18.	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"/>
19.	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"/>
20.	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"/>
<i>NOTE: A generator who sends a shipment of hazardous waste to a TSD facility with the understanding that the TSD facility can accept and manage the waste and later receives that shipment back as a rejected load or residue may accumulate the waste on-site for <90 days or <180 days depending on the amount of hazardous waste on-site in that calendar month. [3745-52-34(M)]</i>		
<i>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.</i>		
PERSONNEL TRAINING		
21.	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"/>
22.	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)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

NOTE: For facility employees that receive emergency response training pursuant to OSHA regulations, the facility is not required to provide separate emergency response training, provided that the overall facility training meets all the requirements of OAC 3745-65-16(A). [3745-65-16(A)(4)]

23.	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"/>
24.	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"/>
25.	Does the generator provide refresher training to employees during each period from January 1 st to December 31 st and does each training occur within 15 months after the previous training? [3745-65-16(C)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
26.	Does the generator keep records and documentation of:			
	a. Job titles? [3745-65-16(D)(1)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	b. Job descriptions? [3745-65-16(D)(2)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	c. Type and amount of training given to each person? [3745-65-16(D)(3)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	d. Completed training or job experience required? [3745-65-16(D)(4)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
27.	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

28.	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"/>
29.	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 40 CFR Part 112 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. The facility may develop one contingency plan which meets all regulatory requirements. Ohio EPA recommends that the plan be based on the "National Response Team's Integrated Contingency Plan Guidance (One Plan)." [3745-65-52(B)]

30.	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"/>
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31.	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"/>
32.	Is an emergency coordinator available at all times (on-site or on-call)? [3745-65-55]	Yes <input checked="" 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

33.	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 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 type="checkbox"/>
c.	Did the facility submit a report to the Director within 15 days of the incident as required by 3745-65-56(I)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input 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

34.	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"/>
35.	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.

36.	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"/>
37.	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"/>
38.	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"/>
39.	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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
40.	Is adequate aisle space provided for unobstructed movement of emergency or spill control equipment? [3745-65-35]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
41.	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"/>
42.	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

43.	Does the generator ensure that satellite accumulation area(s):		
a.	Are at or near a point of generation? [3745-52-34(C)(1)]	Yes	x 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	x 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	x 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	x 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	x 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	x No <input type="checkbox"/> N/A <input type="checkbox"/>
44.	Is the generator accumulating hazardous waste(s) in excess of the amounts listed in the preceding question? If so:		Yes <input type="checkbox"/> No x 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 type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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 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

45.	Has the generator marked containers with the words "Hazardous Waste"? [3745-52-34(A)(3)]		Yes x No <input type="checkbox"/> N/A <input type="checkbox"/>
46.	Is the accumulation date on each container? [3745-52-34(A)(2)]		Yes <input type="checkbox"/> No x N/A <input type="checkbox"/>
47.	Are hazardous wastes stored in containers which are:		
a.	Closed (except when adding/removing wastes)? [3745-66-73(A)]	Yes	x No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	In good condition? [3745-66-71]	Yes	x No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Compatible with wastes stored in them? [3745-66-72]	Yes	x No <input type="checkbox"/> N/A <input type="checkbox"/>
d.	Handled in a manner which prevents rupture/leakage? [3745-66-73(B)]	Yes	x No <input type="checkbox"/> N/A <input type="checkbox"/>

NOTE: Record location on process summary sheets, photograph the area, and record on facility map.

48.	Is the container accumulation areas(s) inspected at least once during the period from Sunday to Saturday? [3745-66-74]		Yes x No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	Are inspections recorded in a log or summary? [3745-66-74]	Yes	x No <input type="checkbox"/> N/A <input type="checkbox"/>
49.	Are containers of ignitable or reactive wastes located at least 50 feet (15 meters) from the facility's property line? [3745-66-76]		Yes x No <input type="checkbox"/> N/A <input type="checkbox"/>
50.	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 x No <input type="checkbox"/> N/A <input type="checkbox"/>
51.	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 x No <input type="checkbox"/> N/A <input type="checkbox"/>

52.	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"/>
<i>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.</i>		
53.	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"/>
<i>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]</i>		
PRE-TRANSPORT REQUIREMENTS		
54.	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"/>
55.	Does each container ≤119 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"/>
56.	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"/>
<i>NOTE: Continue with the generator LDR requirements on the next page.</i>		

GENERATOR LDR REQUIREMENTS

NOTE: This LDR checklist does not include the requirements for generators that treat to meet LDR standards. If the generator treats, the inspector should use the stand-alone Generator LDR checklist instead of this checklist.

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)] If not,	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	Did the generator send the waste to a permitted HW TREATMENT facility? [3745-270-07(A)(1)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
<p><i>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).</i></p>		
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 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"/>
<p><i>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.</i></p>		
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"/>
<p><i>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.</i></p>		
<p><i>NOTE: Written documentation of this determination is not required.</i></p>		
7.	Did the generator treat his HW /soil on-site <u>to meet</u> the LDR treatment standard?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
<p><i>NOTE: If "Yes" see question #16.</i></p>		
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"/>
a.	If the generator chose not to make the determination of whether his waste must be treated, did he send a notice to the TSD facility with each shipment? [3745-270-07(A)(2)] If so, did the notice include:	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
i.	Applicable HW codes?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
ii.	Manifest number of the first shipment to the TSD?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
iii.	A statement that conveys that the HW may or may not be subject to the LDR treatment standards and the TSD must make that determination."?	Yes <input 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/notice on file?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

	[3745-270-07(A)(2)]	
a.	Is the form/notice 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"/>
<i>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.</i>		
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"/>
<i>NOTE: Subcategories are found on the LDR treatment standards table under the applicable waste code. Not all HWs have subcategories</i>		
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"/>
<i>NOTE: Not required if the waste is high TOC D001 or the TSD tests its treatment residues for all underlying hazardous constituents.</i>		
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"/>
<i>NOTE: Not required if the TSD tests its treatment residues for all underlying hazardous constituents.</i>		
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"/>
13.	Is the HW a metal-bearing HW?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<i>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 is given in the Appendix to 3745-270-03.</i>		
14.	a. Metal-bearing HWs cannot be incinerated, combusted or, blended and burned for fuel unless one of the following conditions apply. [3745-270-03(c)]	
	i. Contains > 1% TOC?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	ii. Contains organic constituents or cyanide at levels greater than the UTS levels?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	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"/>
	iv. Has a reasonable heating value (e.g., > 5000 Btu)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	v. Co-generated with a HW that must be combusted?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	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 type="checkbox"/> N/A <input type="checkbox"/>
15.	Was the HW treated by wastewater treatment?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>

	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 type="checkbox"/> N/A <input checked="" type="checkbox"/>
<i>NOTE: If "Yes", HW is improperly being treated by dilution.</i>		
	b. Does the waste carry the D001 code <u>and</u> contain $\geq 10\%$ TOC?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	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"/>
<i>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)].</i>		
<i>NOTE: A list of separation/recovery processes are given in 3745-270-42 under RORG.</i>		

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

NOTE: 1. 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.

2. Inspectors can check BUSTR's web-site at https://www.comapps.ohio.gov/sfm/fire_apps/bust/bustr/PublicInquiry.asp to determine if a UST containing used oil is registered with BUSTR. Inspectors may call BUSTR at 614-752-7938 or a BUSTR site coordinator to report an unregistered UST or a UST that appears to not be in compliance with BUSTR regulations. A list of BUSTR coordinators by county are at: https://www.comapps.ohio.gov/sfm/fire_apps/bust/bustr/SearchByCounty.asp.

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 type="checkbox"/>

NOTE: For example, used oil contaminated scrap metal stored in a pile.

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,	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
a.	Is the mixture managed as specified in 3745-279-10(B)? [3745-279-21(A)]	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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input 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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
9.	Has the generator, upon detection of a release of used oil, done the following: [3745-279-22(D)] no releases seen	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 type="checkbox"/>
b.	Contained the release?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input 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 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 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:	
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"/>
<i>NOTE: Ash accumulated in a space heater must be managed in accordance with 3745-279-10(E).</i>		
GENERATOR TRANSPORTATION		
11.	Does the generator have the used oil hauled only by transporters that have obtained a U.S. EPA ID#? [3745-279-24]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
12.	If the generator self-transported 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 checked="" 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 checked="" type="checkbox"/>
<i>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).</i>		
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"/>
<i>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.</i>		

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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input 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 checked="" type="checkbox"/> N/A <input 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 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 type="checkbox"/>
7.	Are the batteries or containers of batteries labeled with the words "Universal Waste-Battery(ies)" 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 seen

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 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 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, of the OAC met? (Use tank checklist) [3745-273-13(B)(3)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input 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 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 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 type="checkbox"/>

UNIVERSAL WASTE MERCURY-CONTAINING EQUIPMENT none seen

14.	Has mercury-containing equipment with non-contained elemental mercury	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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	or that shows evidence of leakage, spillage or damage that could cause leaks been placed in a container that is closed, structurally sound, compatible with contents of the device and lacks evidence of leakage, spillage or damage that could cause leakage and is designed to prevent escape of mercury into the environment by volatilization or any other means? [3745-273-13(C)(1)]	
15.	If the mercury-containing ampules are removed, does the SQUWH: [3745-273-13(C)(2)]	
a.	Remove and manage 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 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 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 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 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 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 type="checkbox"/>
16.	If the open original housing holding mercury is removed from a mercury-containing equipment that does not contain an ampule, does the SQUWH: [3745-273-13(C)(3)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	Immediately seal the original housing holding the mercury with an air-tight seal to prevent the release of any mercury to the environment? [3745-273-13(C)(3)(a)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Follow all requirements for removing ampules and managing removed ampules in accordance with 3745-273-13(C)(2)? [3745-273-13(C)(3)(b)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
17.	When removing mercury containing ampules from mercury-containing equipment or sealing mercury from its original housing if there are mercury or clean-up residues resulting from spills or leaks, and/or other waste generated (e.g., remaining mercury-containing device), 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)(4)(a)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input 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)(4)(b)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
18.	Is mercury-containing equipment or containers of mercury-containing equipment labelled either "Universal Waste-Mercury-Containing Equipment" or "Waste Mercury-Containing Equipment" or "Used Mercury-Containing Equipment"? [3745-237-14(D)(1)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
19.	Are mercury-containing thermostats or containers containing ONLY thermostats labeled either "Universal Waste-Mercury Thermostat(s)" or "Waste Mercury Thermostat(s)" or "Used Mercury Thermostat(s)"? [3745-273-14(D)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
UNIVERSAL WASTE LAMPS		
20.	Does the SQUWH contain lamps in containers or packages that are	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

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	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)]	
21.	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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input 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>		
22.	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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
ACCUMULATION TIME		
23.	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"/>
<p>NOTE: Accumulation is defined as date generated or date received from another handler.</p>		
24.	Is the handler able to demonstrate the length of time the universal waste has been accumulated? [3745-273-15(C)] If yes, describe below:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
EMPLOYEE TRAINING		
25.	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 no releases seen		
26.	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 type="checkbox"/>
27.	Is the material released characterized? [3745-273-17(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
28.	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 type="checkbox"/>
OFF-SITE SHIPMENTS		
<p>NOTE: If a SQUWH self-transport waste, then the handler must comply with the Universal Waste transporter requirements.</p>		
29.	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"/>

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30.	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"/>
31.	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"/>
32.	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)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
33.	If a handler rejects a partial or full load from another handler, does the receiving handler contact the originating handler and discuss and do <u>one of the following</u> :	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)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
34.	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 type="checkbox"/> N/A <input checked="" type="checkbox"/>

EXPORTS

NOTE: Small quantity handlers that export waste to the countries listed in 40 CFR 262.58(a)(1) are subject to 40 CFR 262 subpart H. Small quantity handlers that export waste to a foreign destination other than the countries listed in 40 CFR 262.58(a)(1) are subject to 40 CFR 262.53, 40 CFR 262.56(a)(1) to (a)(4), (a)(6), and (b), 40 CFR 262.57, and 40 CFR 262 subpart E. [3745-273-20]

NOTE: Violations regarding exporting universal waste to foreign destinations should be referred to U.S. EPA Region 5 because the federal counterpart provisions are not delegable to states.

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

FACILITY	The Lubrizol Corporation	OHIO PERMIT #	02-43-0177
STREET ADDRESS	29400 Lakeland Blvd.	US EPA ID#	OHD 004 172 565
CITY, STATE AND ZIP CODE	Wickliffe, OH 44092	PHONE NUMBER	440-347-8112
COUNTY	Lake	INSPECTION DATE	6-8-12

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

If So, How Far In Advance? 1 week

	NAME	AGENCY/TITLE	PHONE
INSPECTORS	Robert Almquist	Ohio EPA, DMWM	330-963-1217
	Anthony Becker	Ohio EPA, DAPC	
FACILITY REPS	Suzanne Skrab	Lubrizol	
	Gregory Taylor	Lubrizol	
	Steve Mason	Lubrizol	
	Walt Vilk	Lubrizol	

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:	3-6-02	LDR Checklist Attached:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Permit Effective Date:	3-6-02	Used Oil Checklist Attached:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Permit Expiration Date:	3-6-12	Generator Checklist Attached:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Permit Renewal Date:			
Permit Modification Date(s):	12-17-08, Aug. 2009, May 2010, Sept. 2011	Renewal currently in process	

AUTHORIZED ACTIVITIES

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

Post-Closure Care Corrective Action

GENERAL PERMIT COMPLIANCE AND ACTIVITIES

1.	Has the expiration date of the permit passed? If so:		Yes	<input checked="" type="checkbox"/>	No	<input 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 checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input 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 checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input 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.26]		Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input 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 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 permittee 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 permittee 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 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 type="checkbox"/>
			A.	Name, address and telephone number of the owner/operator?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
			B.	Name, address and telephone number of the facility?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
			C.	Name and quantity of material(s) involved?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
			D.	The extent of injuries, if any?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input 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 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 type="checkbox"/>
6.	Did the permittee provide a written report to Ohio EPA's Emergency Response Unit and DHWM within 5 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 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 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 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].

7.	Has the permittee identified other instances of noncompliance not provided for in Condition A.22? If so:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
a.	Did the permittee report these instances to Ohio EPA, DHWM? [Condition A.22]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input 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 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 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 permittee provided Ohio EPA with advance notice of such changes? [Condition A.17]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input 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 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 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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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"/>
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 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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 checked="" 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"/>
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 x	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	x	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	x	No	<input type="checkbox"/>	N/A <input type="checkbox"/>
	g.	Operating record in accordance with OAC rule 3745-54-73? [Condition B.22]	Yes	x	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 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	x	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 3 years from date of inspection? [Condition B.5]	Yes	x	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	x	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	x	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	x	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	X	No	<input type="checkbox"/>	N/A <input type="checkbox"/>
SAMPLING/MONITORING RECORDKEEPING REQUIREMENTS							
24.		In compliance with Condition A.12(b) of the permit, do the permittee's records of monitoring information specify the:					
	a.	Date(s), exact place(s), time(s) and method(s) of sampling or measurement?	Yes	x	No	<input type="checkbox"/>	N/A <input type="checkbox"/>
	b.	Individual(s) who performed the sampling or measurement?	Yes	x	No	<input type="checkbox"/>	N/A <input type="checkbox"/>
	c.	Date(s) analyses were performed?	Yes	x	No	<input type="checkbox"/>	N/A <input type="checkbox"/>
	d.	Individual(s) who performed the analyses?	Yes	x	No	<input type="checkbox"/>	N/A <input type="checkbox"/>
	e.	Analytical technique(s) or method(s) used?	Yes	x	No	<input type="checkbox"/>	N/A <input type="checkbox"/>
	f.	Results of such analyses?	Yes	x	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 A.12(a)]	Yes	x	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 3 years from the date of sampling, including:					
	a.	All calibration and maintenance records?	Yes	x	No	<input type="checkbox"/>	N/A <input type="checkbox"/>
27.		Has Ohio EPA requested submittal of any reports or other information from	Yes	<input type="checkbox"/>	No	x	N/A <input type="checkbox"/>

	the permittee? If so:	
a.	Have the submittals been signed and certified according to OAC rule 3745-50-42? [Condition A.13]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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) of the permit and OAC rule 3745-54-73(B)(9)?	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 NEDO District Office within 180 days of journalization of this permit and updates every five years thereafter? [Condition A.29]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> August 2008
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?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	If so , what amount of waste has the permittee reduced this year?	
31.	Has the permittee's company saved money this year by implementing pollution prevention (reducing raw material usage, disposal fees, energy savings, etc.)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	If so , how much money has the permittee's company saved this year?	
<i>NOTE: If this facility is inspected two times a year, the information obtained in Questions 28 through 31 only needs to be collected one time for the calendar year.</i>		
GROUND WATER MONITORING		
32.	Has the permittee conducted semi-annual sampling of their monitoring wells?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 of the permit?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
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 3 years at the facility as required by OAC rules 3745-52-40 and 3745-54-71(A)(2)(e)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<i>NOTE: If the permittee is generating hazardous waste, remember to attach a complete generator checklist.</i>		
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"/>

	3745-54-14 and Condition B.4 of the permit: [Section ____ of the approved 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 checked="" 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"/>
58.	In accordance with OAC rule 3745-54-14(C), does the permittee have signs reading "Danger - Unauthorized Personnel Keep Out" posted at entrances to the active portion of the facility?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

FACILITY OPERATIONS

59.	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? [3745-54-31 and Condition B.1]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
60.	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"/>

PERSONNEL TRAINING

61.	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.	Does the permittee provide personnel training which includes instruction in safe equipment operation and emergency procedures and implementation of the contingency plan? [3745-54-16(A)(B)(C)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Does the permittee provide 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.	Does the permittee provide refresher training as required by OAC rule 3745-54-16(C)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

NOTE: Facility personnel must take part in refresher training during each period from January 1st to December 31st. Each training must occur within 15 months after the previous training. [3745-54-16(C)]

62.	Is the permittee maintaining personnel training records as required by OAC rule 3745-54-16(D) and Section ____ of the approved permit 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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REQUIRED EQUIPMENT

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

63.	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:	
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	a.	An internal communications or alarm system?	Yes <input 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 extinguishers 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 type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
64.		Is the permittee inspecting, testing and maintaining the equipment specified in Question No. 63 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"/>
65.		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"/>

CONTINGENCY PLAN - EMERGENCY PROCEDURES

66.		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"/>
67.		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)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
68.		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 checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
69.		Has the permittee notified all parties identified in the contingency plan in writing of amendments, modifications, or revisions to the plan within 10 days of the effective date of the change in the plan? [Condition B.18(b)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
70.		Has the permittee submitted a copy of the approved contingency plan and all revisions, amendments and modifications to the Ohio EPA, Division of Environmental Response and Revitalization (DERR) in accordance with OAC rule 3745-54-53? [Condition B.18(c)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
71.		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 22 to verify that any changes to the contingency plan were submitted in accordance with OAC rule 3745-50-51.

EMERGENCY COORDINATOR

72.		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"/>
73.		In accordance with OAC rule 3745-54-55 and Condition B.19 of the permit,	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

	is/are the emergency coordinator(s) at the facility familiar with the following:	
	a. Contingency plan?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b. Facility operations/activities?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	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"/>
74.	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"/>
75.	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. 75(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"/>
<p><i>NOTE: If the permittee already has a "Spill Prevention, Control and Countermeasures Plan" under 40 CFR Part 112 or some other emergency plan, the permittee can amend that plan to incorporate hazardous waste management provisions that are sufficient to comply with OAC requirements. The permittee may develop one contingency plan which meets all regulatory requirements. Ohio EPA recommends that the plan be based on the "National Response Team's Integrated Contingency Plan Guidance (One Plan)." [3745-54-52(B)]</i></p>		
IMPLEMENTATION OF CONTINGENCY PLAN		
76.	Has there been a fire, explosion, or release of hazardous waste or hazardous waste constituents which could threaten human health or the environment since the date of the last inspection? If so:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
<p><i>NOTE: Example scenarios that could be threats to human health or the environment are provided in a DHWM guidance document on "Contingency Plan Implementation and Incident Reporting Under Ohio Hazardous Waste Rules" at: http://epa.ohio.gov/portals/32/pdf/Contingency_Plan_and_Incident_Reporting.pdf. Facility specific scenarios are included in the permittee's contingency plan.</i></p>		
	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: [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 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 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 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 type="checkbox"/>

CLOSURE REQUIREMENTS

77.	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"/>
78.	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"/>
79.	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 type="checkbox"/>

NOTE: Also see Question 22 to verify that any changes to the closure plan were submitted in accordance with OAC rule 3745-50-51.

80.	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? [Condition B.31]	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	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

	contaminated equipment, structures and soils as required by OAC rule 3745-55-14 and the approved closure plan? [Condition B.32]	
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

NOTE: Inspector may attach a post-closure maintenance inspection schedule. If so, the attached document is referenced as Appendix ____.

81.	Has the permittee inspected the components, structures, and equipment at the site in accordance with the inspection schedule in Section ____ of the approved permit application on a quarterly basis? [OAC rule 3745-55-17(A)(1)(b)] [Condition B.35]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
82.	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.	
83.	Is the permittee using the inspection forms found in the approved Part B permit application? [Section ____ of the approved permit application]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
84.	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"/>
85.	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"/>
86.	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"/>

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

87.	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 type="checkbox"/> N/A <input type="checkbox"/>
a.	Did the permittee transfer the hazardous waste from such a container to one that is in good condition or otherwise manage the	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

	waste in a manner that complies with the conditions of the permit? [Condition C.4]	
88.	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"/>
89.	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"/>
CONTAINERS - INSPECTIONS		
<i>NOTE: Inspector may attach a container inspection checklist. If so, the attached document is referenced as Appendix _____.</i>		
90.	Is the permittee inspecting the container area at least once during the period from Sunday to Saturday in accordance with OAC rule 3745-55-74 and the approved inspection schedule in Section _____ of the approved 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"/>
STORAGE OF HAZARDOUS WASTE IN TANK SYSTEMS		
TANK SYSTEMS - CONDITIONS		
91.	Is each tank clearly labeled/marked with the words "Hazardous Waste?" as required by OAC rule 3745-52-34(A)(3)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
92.	In accordance with OAC rule 3745-55-94 and Condition D.5 of the permit, does the permittee follow the general operating requirements below:	
a.	Does the permittee prevent placement of hazardous waste or treatment reagents in tank or secondary containment if such placement can cause the system to leak, rupture, corrode, or otherwise fail?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Does the permittee use appropriate controls to prevent spills or overflows from the system (e.g., check valves, dry disconnect couplings, high level alarms, etc.)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	If a leak or spill has occurred in the tank system, has the permittee complied with OAC rule 3745-55-96?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
TANK SYSTEMS - INSPECTIONS		
93.	In accordance with OAC rule 3745-55-95(A) and Condition D.6(b) of the permit, does the permittee develop and follow a schedule and procedure for inspecting overfill controls?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
94.	Has the permittee documented the inspections required in OAC rule 3745-55-95, in the operating record, including inspection of the following: [Condition D.6(c)]	
a.	Above ground portion of tank each operating day?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Data from leak detection equipment each operating day?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Construction materials and area immediately surrounding the tanks for signs of erosion or release of hazardous waste each operating day?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<i>NOTE: "Each operating day" is each day that the tank system is being used to manage (store or treat) hazardous waste.</i>		
95.	Where applicable, does the permittee inspect the cathodic protection	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

	system to confirm proper operation within six months of initial installation and annually thereafter, as required by OAC rule 3745-55-95(C)(1)? [Condition D.6(d)(i)]	
96.	Where applicable, does the permittee inspect all sources of impressed current at least bi-monthly as required by OAC rule 3745-55-95(C)(2)? [Condition D.6(d)(ii)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

TANK SYSTEMS – CLOSURE REQUIREMENTS

97.	If the permittee has closed a tank, was closure completed in accordance with OAC rule 3745-55-97? [Condition D.9]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
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TANK SYSTEMS – STORING IGNITABLE OR REACTIVE WASTES

98.	For tanks used to treat or store ignitable or reactive wastes, has the permittee complied with one of the following in accordance with OAC rule 3745-55-98(A)? [Condition D.10(a)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	Is the waste treated before or immediately after placement in the tank so that the resultant mixture is no longer ignitable or reactive and the permittee has conducted such activities in compliance with OAC rule 3745-54-17(B)?; or	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
b.	Is the waste stored or treated to protect it from materials or conditions which may cause ignition or reaction?; or	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Is the tank used solely for emergencies?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
99.	If ignitable or reactive waste is stored or treated, are protective distances maintained between waste management areas and any public streets, alleys or adjoining property lines as required by the NFPA Flammable and Combustible Liquids Code (1996)? [Condition D.10(b)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
100.	In accordance with OAC rules 3745-55-99(A), (B) and Condition D.11 of the permit, has the permittee placed incompatible wastes or materials into the same tank system, or into a tank system that has not been decontaminated and which previously held an incompatible waste or material?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
a.	If so, have the requirements of OAC rule 3745-54-17(B) been met?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

TANK SYSTEMS – WRITTEN ASSESSMENT REQUIREMENTS

101.	In accordance with OAC rule 3745-55-92(A) and Condition D.3 of the permit, has the permittee obtained and submitted a written assessment attesting that the design, installation and structural integrity of the system is adequate for the management of hazardous waste(s)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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NOTE: You should review the file to see if the written assessment has been previously reviewed and what the results were.

	Does the written assessment include the following items:	
a.	Certification by an independent, registered professional engineer?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Consideration of the design standards of the system?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Consideration of the hazardous characteristics of the waste(s)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
d.	An evaluation by a corrosion expert (only if the external system/components are metal and in contact with soil or water)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
e.	A determination of design and operational measures that will be needed to protect the tank system from potential damage (only for underground tank components)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

	f.	Design considerations to ensure that the tank foundations will maintain the load of a full tank?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	g.	Design considerations for anchoring the unit to prevent floatation (only for tanks situated in a seismic fault zone or saturated zone)?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	h.	Design considerations to ensure that the tank system will withstand the effects of frost heave (only for underground tank systems)?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
<i>NOTE: CO-DHWM Engineering staff are available to assist you with evaluation of the written assessment.</i>								
102.	In accordance with OAC rule 3745-55-92(G) and Condition D.3(b) of the permit, are there written statements by those persons who supervised installation or certified design of the new tank system, that the tank system was properly installed and designed and that required repairs were performed?		Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Do the written statements address all of the following:								
	a.	Inspection for damage and/or inadequate construction and installation was conducted?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	b.	Statement that deficiencies were corrected before the tank system was covered or put into use?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	c.	Proper backfilling?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
	d.	Tightness test; if the tank system was found not to be tight, does the statement indicate that proper repairs were made?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	e.	Proper support and protection of ancillary equipment?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	f.	Supervision of the installation of field fabricated corrosion protection?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
TANK SYSTEMS – SECONDARY CONTAINMENT								
103.	Has secondary containment been provided as required by OAC rule 3745-55-93(A)? [Condition D.4]		Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
<i>NOTE: All tank systems must have secondary containment at this point, except for tank systems that store/treat materials that become hazardous waste after January 12, 1987, which must have secondary containment required within the time intervals in OAC rules 3745-55-93(A)(1) to (A)(4). The date the material became a hazardous waste must be used in place of January 12, 1987 [3745-55-93(A)(5)].</i>								
104.	Has secondary containment been provided?		Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	a.	An external liner as described in OAC rule 3745-55-93(E)(1)? If so,	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	i.	Is liner designed or operated to contain 100% of the capacity of the largest tank?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	ii.	Is liner designed and operated to prevent run-on and infiltration or the collection system has <u>excess</u> capacity to contain run-on and infiltration from a 25-year, 24-hour storm?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	iii.	Is liner free of cracks and gaps?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	iv.	Does liner completely surround the tank and cover all earth likely to be contacted by waste during a release?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	v.	Are chemically resistant water stops in place at all points? (concrete liners only)	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	vi.	Is there a compatible interior coating or lining to prevent migration of waste into the concrete? (concrete liners only)	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	b.	Vault system as described in OAC rule 3745-55-93(E)(2)? If so,	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>

	i.	Is vault system designed to contain 100% of the capacity of the largest tank?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	ii.	Is liner designed and operated to prevent run-on and infiltration <u>or</u> the collection system has <u>excess</u> capacity to contain run-on and infiltration from a 25-year, 24-hour storm?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	iii.	Are chemically resistant water stops in place at all points?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	iv.	Is there a compatible interior coating to prevent migration into the concrete?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	v.	For ignitable or reactive waste : Is the vault system provided with means to prevent (or alternatively "protect against") the formation or ignition of vapors?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	vi.	Is vault system provided with an exterior moisture barrier?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c.	Double-walled tank as described in OAC rule 3745-55-93(E)(3)? If so,	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	i.	<u>Is double-walled tank designed as an integral structure to contain any release from the inner tank?</u>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	ii.	If metal , are the primary tank interior and outer shell exterior surfaces protected from corrosion?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	iii.	Is double-walled tank provided with a continuous leak detection system able to detect a release within 24 hours or at the earliest practicable time?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d.	An equivalent device as described in OAC rule 3745-55-93(D)(4) which has been approved by the director?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>

TANK SYSTEMS – SECONDARY CONTAINMENT DESIGN/OPERATION/INSTALLATION

105.	In accordance with OAC rules 3745-55-93(B)(1), (2) and Condition D.4 of the permit, has each secondary containment system been designed, installed and operated to prevent any migration of wastes or liquid to the soil, groundwater, or surface water and is it capable of <u>detecting and collecting</u> releases and accumulated liquids?		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
106.	Does the secondary containment system meet the following minimum requirements of OAC rule 3745-55-93(C)?: [Condition D.4]		
	a.	Constructed or lined with compatible materials of sufficient strength to prevent failure?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b.	Placed on a foundation or base capable of providing support?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c.	Provided with a leak detection system designed/operated to detect failure to primary or secondary containment or any release of hazardous waste within 24 hours or at the earliest practicable time?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d.	Sloped or designed to drain and remove liquid resulting from leaks, spills or precipitation?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	e.	Any liquid which accumulates in the containment unit resulting from spills, leaks or precipitation removed within 24 hours or in a timely manner?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

TANK SYSTEMS – ANCILLARY EQUIPMENT REQUIREMENTS

107.	In accordance with OAC rule 3745-55-93(F) and Condition D.4 of the permit, is ancillary equipment provided with secondary containment (such as double-walled piping, jacketing or a trench)?		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	If not , is the ancillary equipment one of the following:		

a.	Above ground piping (exclusive of flanges, joints, valves and connections) that is inspected daily?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Welded flanges, welded joints and/or welded connections that is inspected daily?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Sealless or magnetic coupling pumps and/or sealless valves?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
d.	Pressurized above ground piping systems with automatic shut-off devices (e.g., excess flow check valves, flow metering shutdown and/or loss of pressure-actuated shut-off devices) that is inspected daily?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

TANK SYSTEMS – TANK SYSTEMS FOUND TO BE LEAKING OR UNFIT FOR USE

108.	Has there been a leak or spill from any tank system or has any tank system been found unfit for use? If so , did the permittee take the following actions as required by OAC rules 3745-55-96(A) through (E)? [Conditions D.7(a), D.8(a) and (b)]:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
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NOTE: If the tank is found to be unfit for use, inspector should explain why.

a.	Immediately cease flow of material into tank and investigate the cause of the release?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Remove waste from tank system to prevent further release within 24 hours of detection or at the earliest practicable time?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Remove all material released into secondary containment system within 24 hours or as timely as possible to prevent harm to human health and the environment?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
d.	For a visible release to the environment, immediately conduct a visual inspection of the release?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
e.	For a visible release to the environment, prevent further migration of the leak or spill to soils or surface waters?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
f.	For a visible release to the environment, properly dispose of any visibly contaminated soil or surface water?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
g.	Report any release to the environment to the director within 24 hours unless it was less than one pound and was cleaned up immediately?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
h.	For a release to the environment, submit a written report of the incident to the director within 30 days of the release?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
i.	Remediate the spill and repair the unit prior to returning it to service?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
j.	For a release from a tank system without secondary containment, did the permittee provide secondary containment meeting the requirements of OAC rule 3745-55-93 for the unit prior to putting it back into service?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

NOTE: The requirements noted in 108.j do not apply if the release was from an above ground component of the tank which can be inspected visually after being put back into service.

109.	In the event that the repairs to the tank system were major (e.g., replacement of liner, repair of ruptured primary or secondary containment structure), did the permittee obtain a certification from an independent, registered P.E. attesting that the repaired unit is capable of handling hazardous waste, as required by OAC rule 3745-55-96(F)? [Condition D.7(c)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
110.	Was a copy of the certification submitted to the director within seven days after returning the system to use, as required by OAC rule 3745-55-96(F)? [Condition D.7(c)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
111.	If the permittee was unable to repair and return the unit to service as described in Questions 108.i and 108.j, was the tank system closed in accordance with OAC rule 3745-55-97?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

112.	Does the permittee have a tank system with a variance from secondary containment from which a release has occurred but <u>has not</u> migrated beyond the zone of engineering control? If so, did the permittee take following actions as required by OAC rule 3745-55-93(G)(3)? [Condition D.7(b)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
a.	Has the permittee complied with OAC rules 3745-55-96(A) through (F) and decontaminated soils?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	If soils cannot be decontaminated/removed, has the permittee complied with OAC rule 3745-55-97(B)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
113.	Does the permittee have a tank system with a variance from secondary containment from which a release occurred and <u>has</u> migrated from the zone of engineering control? If so, did the permittee take following actions as required by OAC rule 3745-55-93(G)(4)? [Condition D.7(b)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
a.	Has the permittee complied with OAC rules 3745-55-96(A) through (D), prevented migration, and decontaminated soil?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	If soils cannot be decontaminated/removed, or if the groundwater has been contaminated, has the permittee complied with OAC rule 3745-55-97(B)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

CONTAINMENT SYSTEM

114.	Does the permittee maintain the containment system as described in Section ____ of the approved permit application, 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"/>
115.	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 type="checkbox"/>

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

AISLE SPACE

116.	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 <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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LAND DISPOSAL RESTRICTION REQUIREMENTS

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

117.	Does the permittee comply with all applicable regulations regarding land disposal prohibitions and restrictions as required by OAC Chapter 3745-270?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
118.	Does the permittee comply with the notification and certification requirements of OAC rule 3745-270-07(A)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
119.	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 <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
120.	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 <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	Are copies of all notices, certifications, demonstrations, waste	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

	analysis and other documentation produced pursuant to OAC Chapter 3745-270 retained for a period of 3 years as required by OAC rule 3745-270-07(A)?	
121.	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 <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
CORRECTIVE ACTION		
122.	Has the permittee submitted the monthly progress report for all corrective action activities? (This report is due by the 15 th of the month following the reporting period.) [Condition _____]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
123.	Has the permittee identified any new WMUs or releases at the facility? [Condition E.10]? If so:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
a.	Did the permittee follow the steps indicated in Conditions E.10(a), (b) and E.11?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>