



**Environmental
Protection Agency**

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

September 21, 2012

**BELMONT COUNTY
GENERAL FILE
(ELECTRONICS RECYCLING
SERVICES, INC.)
DMWM/SEDO
NON NOTIFIER**

Mr. Dan Brown
Vice President
Electronics Recycling Services, Inc.
1731 Belmont Street
Bellaire, Ohio 43906

Dear Mr. Brown:

On August 20, 2012, Ohio EPA received a complaint alleging that Electronics Recycling Services, Inc. was storing large quantities of broken televisions outside. On September 11, 2012, Erika Jackson and I performed a complaint investigation to determine the validity of the complaint and to determine its compliance with Ohio's hazardous waste laws and regulations as found in Chapter 3734 of the Ohio Revised Code (ORC) and Chapter 3745 of the Ohio Administrative Code (OAC).

During the investigation, we found that several broken television CRTs were outside and understand that these came in already broken and that your policy is to take these broken CRTs into the building and wrap and label them or process them as soon as possible. We also observed many pallets of wrapped, unbroken CRTs stored outside and at a separate property across State Route 7 from this site. We also viewed the processing areas and equipment inside the building (although no processing was actually taking place at the time of our visit). We observed that the containers of the broken CRT glass, the pulverized glass and the "tube necks" were not properly labeled; therefore, ERS was in violation of the following hazardous waste regulation:

- i. OAC 3745-51-39 Conditional exclusion for used, broken CRTs and processed CRT glass undergoing recycling.

On September 20, 2012, I received photographs of the broken CRTs, the leaded glass, and the tube necks properly labeled, therefore you have returned to compliance with the above-cited rule. I have also attached a fact sheet on e-waste and recycling, it was written before the rules on CRTs became effective, but other portions of it may be helpful.

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

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

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You have now abated all violations cited from the September 11, 2012 investigation. If you have any questions, please call me at (740) 380-5278.

Sincerely,



Richard Stewart
District Representative
Division of Materials & Waste Management

RS/mr

Enclosures

cc: w/o enc.: Erika Jackson, DMWM, SEDO

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

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

Site EPA ID No. Site Name	EPA ID Number: Non-Notifier	
	Name: Electronics Recycling Services, Inc.	Website: (Optional)
Site Location Information	Street Address: 1731 Belmont St.	
	City, Town, or Village: Bellaire	State: OH
	County Name: Belmont	
Site Land Type (check only one) NAICS code(s) www.census.gov/epcd/www/naics.html	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"/>

Facility Representative Additional names can be recorded in number 12 Only provide address information if it is different than the site address	First Name: Dan		MI:	Last Name: Brown	
	Title: Vice President				
	Phone Number: 740 671-9877			Phone Number Extension:	
	E-Mail Address:				
	Fax Number:			Fax Number Extension:	
	Street or P.O. Box:				
	City, Town or Village:				
State:			Zip Code:		

Legal Owner And Operator of the Site. List Additional Owners and/or Operators in the Comment Section or on another copy of this form page	Name of Site's Legal Owner:				Date Became Owner (mm/dd/yyyy):				
	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:								
	City, Town or Village:				Owner Phone #:				
	State:				Country:		Zip Code:		
	Name of Site's Operator:				Date Became Operator (mm/dd/yyyy):				
	Operator Type:	Private <input type="checkbox"/>	County <input type="checkbox"/>	District <input type="checkbox"/>	Federal <input type="checkbox"/>	Indian <input type="checkbox"/>	Municipal <input type="checkbox"/>	State <input type="checkbox"/>	Other <input type="checkbox"/>
	Street or P.O. Box:								
	City, Town or Village:				Operator Phone #:				
	State:				Country:		Zip Code:		

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

<input checked="" type="checkbox"/> Not a HW Generator	<input type="checkbox"/> UNKNOWN: Cited for violation of 3745-52-11	<input type="checkbox"/> Large Quantity Generator (LQG)
	<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 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 type="checkbox"/> Treater, Storer or Disposer of Hazardous Waste	<input type="checkbox"/> Smelting, Melting, Refining Furnace Exemption
<input type="checkbox"/> Recycler of Hazardous Waste	<input type="checkbox"/> Underground Injection Control Facility
<input type="checkbox"/> 72-Hour Recycler	<input type="checkbox"/> Receives Hazardous Waste from Off-site

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

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

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

Batteries
 Pesticides
 Mercury containing equipment
 Lamps

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

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

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

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

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

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

Announced Yes No Additional Facility Representatives:
Tanks Yes No
Containers Yes No

Name of Inspector(s)	Name of Inspector(s)	Date of Inspection/Time (mm/dd/yyyy) (hh:mm)
Rich Stewart	Erika Jackson	09/11/2012 10:00

Comments: