

Environmental
Protection Agency

Governor
Lt. Governor
Director

September 7, 2012

Mr. Andrew Petty
Luxottica Optical Manufacturing
2150 Bixby Road
Lockbourne, OH 43137

Re: **[NOV] Luxottica Optical Manufacturing.**
OHR000041046 LQG, Franklin County

Dear Mr. Petty:

Thanks to Nick Ewing and other present staff for their time and assistance during my inspection visit to Luxottica's facility at 2150 Bixby Road in Lockbourne, Ohio on June 26, 2012. The purpose was to review your facility's generation and management of hazardous waste. Ohio's laws under Chapter 3745 of the Ohio Administrative Code and Chapter 3734 of the Ohio Revised Code establish a system for safe and responsible management of this waste. This letter summarizes the inspection findings.

! The following violations were noted:

1. **Hazardous Waste Contingency Plan—contact information, OAC rule 3745-65-52(D):** The contingency plan must include a current list of names, addresses, and telephone numbers of all persons qualified to act as emergency coordinator.

The plan included names but not phone numbers for these personnel.

Please update the plan to include this information and send copies of the amended page(s) showing this deficiency has been corrected.

2. **Hazardous Waste Contingency Plan—emergency equipment, OAC rule 3745-65-52(E):** The contingency plan must include a list of all emergency equipment including its location, physical description, and brief outline of each item's capabilities.

The contingency plan appeared to lack this required information.

Please update the plan to include this information and send copies of the amended pages showing this deficiency has been corrected.

3. **Hazardous Waste Satellite Accumulation Container Marking, OAC rule 3745-52-34(C)(1)(b):** Containers must be marked with the words "Hazardous Waste" or other words identifying the contents.

White metal sludge accumulation tubs on wheels located under the swarf separation process machines (in the coolant reclamation process area) were unmarked. Red safety cans for accumulating hazardous ink waste were also unmarked.

Provide marking on such containers which properly identifies the (hazardous waste) contents. Please send photos showing this problem has been corrected.

4. **Open Containers, OAC rule 3745-66-73(A):** Containers for accumulating hazardous waste must be kept closed when waste is not being added to them.

A 55-gallon steel drum for flammable hazardous waste ink solids, inside a safety cabinet, had a warped lid with obvious visible gaps that may allow evaporation of the contents.

Provide a lid that properly closes/seals on such containers. A red gasketed hinged lid may be used for this purpose, or the lid and retaining ring can be replaced each time after waste is placed in the drum. Please send a photo and description of steps taken to correct this problem.

5. **Universal Waste Lamp Marking, OAC rule 3745-273-14(E):** Containers or packages of universal waste lamps must be labeled with the words, "Universal Waste Lamps", "Waste Lamps" or "Used Lamps."

Packages of waste lamps in accumulation at the time of the inspection visit, lacked the required marking.

This problem was corrected at the time of the inspection visit. Please ensure that packages continue now to be properly marked.

Please send a response within 15 days, describing actions taken to resolve the violations noted above. Ohio EPA requires timely actions for compliance.

The following comments are also offered at this time:

- Employee training refresher classes were being updated shortly after my inspection visit, and I was pleased to be able to review and provide constructive feedback on the content. The goal of such training is simple: to ensure that employees have the information to do their jobs properly as far as any responsibilities for handling, generating or managing your hazardous waste(s). Records affirming that this training has been provided, must be kept available for review during any potential future inspections.

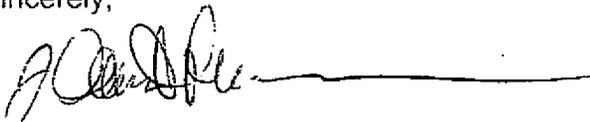
Mr. Andrew Petty

Page -3-

- It is obvious that your facility's most significant waste stream originates from the use of toxic metal alloys to attach the lenses to the tooling fixtures for the grinding process. If some other material that is not toxic could be identified that functions effectively for this purpose, your hazardous waste generation rate (both the spent coolant with cadmium and the grinding sludge with lead and cadmium) would plummet. I encourage you to keep seeking to identify or develop any such options over time.

I am enclosing a checklist completed during this inspection. If you have any questions about items discussed in this letter, do not hesitate to contact me by phone at (614) 728-3885.

Sincerely,



J. David Hohmann
Division of Materials and Waste Management
Central District Office

c: CDO File

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

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

Site EPA ID No. Site Name	EPA ID Number: OHR000041046		Website: www.luxotticaretail.com (Optional)	
Site Location Information	Name: Luxottica Optical Manufacturing		Street Address: 2150 Bixby Road	
Site Land Type (check only one)	City, Town, or Village: Lockbourne		State: OH	
NAICS code(s) www.census.gov/epcd/www/naics.html	County Name: Franklin		Zip Code: 43137	
	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"/>
	339115			

Facility Representative	First Name: Andrew		MI:	Last Name: Petty	
Additional names can be recorded in number 12	Title:				
Only provide address information if it is different than the site address	Phone Number:		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 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 type="checkbox"/> Not a HW Generator	<input type="checkbox"/> UNKNOWN: Cited for violation of 3745-52-11	<input checked="" type="checkbox"/> Large Quantity Generator (LQG)
	<input type="checkbox"/> Short-Term/Temporary Generator (generates from a short-term or one-time event and not from on-going processes). <i>Check the box for the applicable generator status and provide a comment.</i>	<input type="checkbox"/> 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 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

<input type="checkbox"/> Batteries
<input type="checkbox"/> Pesticides
<input type="checkbox"/> Mercury containing equipment
<input checked="" type="checkbox"/> Lamps

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

<input type="checkbox"/> Used Oil Generator
<input type="checkbox"/> Used Oil Transporter
<input type="checkbox"/> Used Oil Transfer Facility
<input type="checkbox"/> Used Oil Processor
<input type="checkbox"/> Used Oil Re-refiner
<input type="checkbox"/> Off-Specification Used Oil Burner
<input type="checkbox"/> Used Oil Fuel Marketer who directs shipment of Off-Spec Used Oil
<input type="checkbox"/> 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.

<input type="checkbox"/> College or University
<input type="checkbox"/> Teaching hospital that is owned by or has a formal written affiliation agreement with a college or university
<input type="checkbox"/> 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.

D006 D008 D001

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: **Scott Slanec, Paul Shaeffer, Dan Anderson**

Tanks Yes No
 Containers Yes No

Name of Inspector(s) J. David Hohmann Name of Inspector(s) _____ Date of Inspection/Time (mm/dd/yyyy) (hh:mm) 06/26/2012 14:15

Comments:
5 violations cited, NOV letter issued

LARGE QUANTITY GENERATOR REQUIREMENTS

-- COMPLETE AND ATTACH A PROCESS DESCRIPTION SUMMARY --

LQG: = 1,000 Kg. (~300 gallons) of waste in a calendar month or =1 Kg. of acutely hazardous waste in a calendar month.

NOTE: To convert from gallons to pounds: Amount in gallons x Specific Gravity x 8.345 = Amounts in pounds.

Safety Equipment Used: safety glasses

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 type="checkbox"/>	N/A <input checked="" 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 type="checkbox"/>	N/A <input checked="" type="checkbox"/>
8.	Does the generator accumulate hazardous waste?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
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 type="checkbox"/>	N/A <input checked="" type="checkbox"/>
10.	Does the generator treat hazardous waste in a: [ORC 3734.02(E)&(F)] <i>RMK: Grinding waste is recycled in a closed-loop system that repurifies the coolant and generates a hazardous waste sludge.</i>			
	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 type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
	c. Drip pads that meet 3745-69-40 to 3745-69-45?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
	d. Containment building that meets 3745-256-100 to 3745-256-102?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
11.	Does the generator export hazardous waste? If so: [a. to e. = N/A]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

MANIFEST REQUIREMENTS

12.	Have all hazardous wastes shipped off-site been accompanied by a manifest? (U.S. EPA Form 8700-22) [3745-52-20(A)(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"/>
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"/>
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"/>
17.	If the generator received a rejected load or residue, did the generator... {N/A}			
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"/>

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"/>
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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"/>
23.	Is the personnel training program directed by a person trained in hazardous waste management procedures? [3745-65-16(A)(2)] <i>RMK: Ryan Boldrin does this.</i>	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"/>

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)] <i>RMK: Names but not phone numbers were included.</i>	Yes <input type="checkbox"/> No <input checked="" 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)] <i>RMK: This appeared to be lacking in the plan that I reviewed.</i>	Yes <input type="checkbox"/> No <input checked="" 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"/>
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] <i>RMK: They are on site during all three work shifts.</i>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

NOTE: The emergency coordinator must 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) must 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 checked="" type="checkbox"/>
b.	Did the facility follow the emergency procedures in 3745-65-56(A) through (H)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

	c.	Did the facility submit a report to the Director within 15 days of the incident as required by 3745-65-56(l)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
NOTE: OAC 3745-65-51(B) requires that the contingency plan be implemented immediately whenever there is a fire, explosion, or release of hazardous waste or hazardous waste constituents, which could threaten human health and the environment.					
PREPAREDNESS AND PREVENTION					
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)] <i>RMK: Both a p.a. system and alarm are utilized.</i>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	b.	Emergency communication device? [3745-65-32(B)] <i>RMK: radios are used</i>	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)] <i>RMK: This is verified by annual inspections, I was told.</i>	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, and 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 <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	b.	Are under the control of the operator of the process generating the waste? [3745-52-34(C)(1)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	c.	Do not exceed a total of 55 gallons of hazardous waste per waste stream? [3745-52-34(C)(1)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	d.	Do not exceed one quart of acutely hazardous waste at any one time? [3745-52-34(C)(1)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
	e.	Containers are closed, in good condition and compatible with wastes stored in them? [3745-52-34(C)(1)(a)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	f.	Containers are marked with words "Hazardous Waste" or other words identifying the contents? [3745-52-34(C)(1)(b)]	Yes <input type="checkbox"/>	No <input checked="" 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 checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	a.	Did the generator comply with 3745-52-34(A)(1) through (4) or other applicable generator requirements within three days? [3745-52-34(C)(2)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	b.	Did the generator mark the container(s) holding excess with the accumulation date when the 55 gallon (one quart) limit was exceeded? [3745-52-34(C)(2)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

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 <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
46.	Is the accumulation date on each container? [3745-52-34(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
47.	Are hazardous wastes stored in containers which are:	
	a. Closed (except when adding/removing wastes)? [3745-66-73(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b. In good condition? [3745-66-71]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c. Compatible with wastes stored in them? [3745-66-72]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d. Handled in a manner which prevents rupture/leakage? [3745-66-73(B)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
48.	Is the container accumulation areas(s) inspected at least once during the period from Sunday to Saturday? [3745-66-74]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	a. Are inspections recorded in a log or summary? [3745-66-74]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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 <input checked="" type="checkbox"/> 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 <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
<p><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></p>		
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"/>
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"/>

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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

This is done by determining if the HW/soil contains levels of constituents greater than the levels given in its LDR treatment standard in 3745-270-40. However, if a specific treatment method is given in 3745-270-40 for the HW, no determination is required [3745-270-07(A)(1)(b)]. If soil, generator can choose to have soil treated to LDR levels given in 3745-270-49 (alternative treatment levels for soils).

3.	Does the generator have documentation of how he determined whether the HW/soil meets or does not meet the LDR treatment standard in 2, above? [3745-270-07(A)(6)(a) or 3745-270-07(A)(6)(b)] <i>RMK: testing and MSDS knowledge are used for this purpose</i>	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.... (N.A)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
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"/>

NOTE: This is done by evaluating which underlying hazardous constituents (UHC) are in the HW at levels above the universal treatment standards given in 3745-270-48. This requirement does not apply to high total organic carbon (i.e., contains >10% TOC) D001 wastes or listed HWs.

NOTE: Written documentation of this determination is not required.

7.	Did the generator treat his HW /soil on-site to meet the LDR treatment standard? <i>NOTE: If "Yes" see question #16.</i>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
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 checked="" type="checkbox"/>
ii.	Manifest number of the first shipment to the TSD?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 checked="" 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? [3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

		applicable)? [3745-270-07(A)(2)]	
	c.	A statement that conveys that the HW is subject to LDRs and must be treated to meet LDR treatment requirements? [3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d.	A designation whether the HW is a wastewater or non-wastewater? [3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
NOTE: A wastewater contains <1% by wt. total suspended solids (TSS) and <1% by wt. TOC. If you doubt the HW is a wastewater or non-wastewater, the HW can be tested using for example, Standard Methods (SM) 160.2 for TSS, SW-846 method 9060a for TOC.			
	e.	Designation of the waste subcategory when applicable? [3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
NOTE: Subcategories are found on the LDR treatment standards table under the applicable waste code. Not all HWs have subcategories			
	f.	A listing of the underlying hazardous constituents for which a characteristic waste must be treated? [3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
NOTE: Not required if the waste is high TOC D001 or the TSD tests its treatment residues for all underlying hazardous constituents.			
	g.	If the HW is F001-F005 or F039, did the generator note on the LDR form what solvents or constituents, respectively, the waste contains and must be treated for? [3745-270-07(A)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
NOTE: Not required if the TSD tests its treatment residues for all underlying hazardous constituents.			
PROHIBITED DILUTION			
12.		Is the HW treated by burning? If "No" go to #15.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
13.		Is the HW a metal-bearing HW? The waste treated by burning is D001-High TOC nonwastewater with >5,000 btu/lb.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
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.			
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 checked="" 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 checked="" 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"/>
NOTE: If "Yes", HW is improperly being treated by dilution.			
	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"/>
NOTE: If the answers to b & c are "yes" and "no", respectively, waste is improperly being treated by dilution and generator is in violation of [3745-270-03(B)] and 3745-270-40(A)(3)].			
NOTE: A list of separation/recovery processes are given in 3745-270-42 under RORG.			

SMALL QUANTITY UNIVERSAL WASTE HANDLER REQUIREMENTS - BATTERIES AND LAMPS

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 N/A

UNIVERSAL WASTE LAMPS

8.	Does the SQUWH contain lamps in containers or packages that are structurally sound, adequate to prevent breakage, and compatible with contents of the lamps? Are containers or packages closed and do they lack evidence of leakage, spillage or damage that could cause leakage? [3745-273-13(D)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
9.	Are lamps that show evidence of breakage, leakage or damage that could cause a release of mercury or hazardous constituents into the environment immediately cleaned up? Are they placed into a container that is closed, structurally sound, compatible with the contents of the lamps, and lack evidence of leakage, spillage or damage that could cause leakage or releases of mercury or hazardous waste constituents to the environment? [3745-273-13(D)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
10.	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)] <i>RMK: This problem was corrected during my inspection visit.</i>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>

ACCUMULATION TIME

11.	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"/>

NOTE: Accumulation is defined as date generated or date received from another handler.

12.	Is the handler able to demonstrate the length of time the universal waste has been accumulated? [3745-273-15(C)] If yes, describe below: records were sufficient to show this.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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EMPLOYEE TRAINING

13.	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"/>
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RESPONSE TO RELEASES

14.	Are releases of universal waste and other residues immediately contained? [3745-273-17(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
15.	Is the material released characterized? [3745-273-17(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
16.	If the material released is a hazardous waste, was it managed as required in OAC Chapters 3745-50 through 3745-69? (If the waste is hazardous, the handler is considered the generator of the waste and is subject to OAC Chapter 3745-52) [3745-273-17(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

OFF-SITE SHIPMENTS

NOTE: If a SQUWH self-transport waste, then the handler must comply with the Universal Waste transporter requirements.

17.	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"/>
18.	Is the handler aware of DOT requirements for packaging and shipping?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

Luxottica Optical Manufacturing
OHR000041046

	If no, make aware of 49 CFR 171-180.	
19.	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"/>
20.	Has the originating handler ever had an off-site shipment rejected by another handler or destination facility?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	a. If yes, did the originating handler receive the waste back or agree to where the shipment was sent? [3745-273-18(E)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
21.	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)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
22.	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.

Luxottica Optical Manufacturing
OHR000041046