



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

November 28, 2012

RE: MP BIOMEDICALS, LLC
OHD987033958
CUYAHOGA COUNTY
LQG > CESQG- RTC

Robert Beattie, VP Materials Management
MP Biomedicals, LLC
29525 Fountain Parkway
Solon, OH 44139

Dear Mr. Beattie:

On November 20, 2012, we received your response to my October 25, 2012 notice of violation letter regarding our September 25, 2012 hazardous waste inspection. Your response included a waste inventory, a hazardous waste determination for each of these wastes, and pictures of storage boxes for your universal waste lamps.

Based on the information you submitted, it appears you are operating as a conditionally exempt small quantity hazardous waste generator, both in terms of hazardous and acute hazardous wastes. The appropriate checklists were completed and are attached. No further violations were noted. The information also documents that you have returned to compliance with all of the rules cited in my October 25th letter.

One concern was noted. One of the pictures of Universal Waste lamps shows two different accumulation start dates on the same container. When dating the containers please make sure the dates are correct and consistent.

If you have any questions concerning this letter, please contact me by telephone at (330) 963-1226 or by e-mail at sherry.slone@epa.ohio.gov.

Sincerely,

Sheryl K. Slone, P.E.
District Engineer
Division of Materials and Waste Management

SKS:ddw

ec: Natalie Oryshkewych, DMWM, NEDO
Nyall McKenna, DMWM, NEDO
Jeff Mayhugh, DMWM, CO
Marc Stermer: mdstermer@mpbio.com
cc: Marlene Kinney, DMWM, NEDO

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 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:		Website: (Optional)	
	Name: <u>MP BIOMEDICAL</u>		Street Address: <u>29525 FORDMAN PARKWAY</u>	
City, Town, or Village: <u>SOLOON</u>		State: <u>OH</u>		
County Name: <u>CUYAHOGA</u>		Zip Code: <u>44139</u>		
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: <u>ROBERT BEATTIE</u> MI: <u>W</u> Last Name: <u>BEATTIE</u>	
	Title: <u>VICE PRESIDENT WW PURCHASING</u>	
	Phone Number: <u>440 337 1200</u> Phone Number Extension: <u>7711</u>	
	E-Mail Address: <u>RWBEATTIE@MPBio.COM</u>	
	Fax Number: <u>440 337 1280</u> Fax Number Extension:	
	Street or P.O. Box: <u>SAME</u>	
	City, Town or Village:	

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): <u>7959</u>	
	Owner Type: <input checked="" type="checkbox"/> 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			
	Street or P.O. Box: <u>3 HUTTON PLACE</u>		Owner Phone #: <u>949-833-2500</u>	
	City, Town or Village: <u>SANTA ANA</u>		Country: <u>USA</u> Zip Code: <u>92702</u>	
	State: <u>CA</u>			
	Name of Site's Operator:		Date Became Operator (mm/dd/yyyy):	
	Operator Type: <input type="checkbox"/> 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			

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 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"/> Large Quantity Generator (LQG) <input type="checkbox"/> Small Quantity Generator (SQG) <input checked="" 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

Batteries
 Pesticides
 Mercury containing equipment
 Lamps

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

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

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

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

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

D001, D002, D003, P016, P018, U112

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

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

Name of Inspector(s)	Name of Inspector(s)	Date of Inspection/Time (mm/dd/yyyy) (hh:mm)
<u>SHERBY SONE</u>	<u>MARLENE KINNEY</u>	<u>09/25/2012 10:20</u>

Comments: This is a Biomedical Lab Supply Company so types & quantities of HW change constantly.

PROCESS, WASTE, P2 SUMMARY SHEET

Facility Name:	Facility Type: LQG/SGQ/CESQG/TSD	Date of Inspection:	EPA ID #:
MP BIOMEDICAL		9.25.12	OHID 987 033 958

Waste Generated			On- or Off-Site Management		P2 Activities	
Process/Activity Generating Waste <small>(e.g. plating bath, machining, baghouse, painting, general maintenance, etc)</small>	Waste Description <small>(e.g. sludge, solvent, ash, used oil, spent lamps, etc.) and EPA Waste Code, if applic.</small>	QTY Generated per Month, Type of Accumulation <small>(container, tank, etc) and location of waste accumulation area</small>	Type of On-Site Treatment <small>(recycle, wwt, etc)</small>	Name, state, and type of activity occurring at the off-site facility.	Current P2 Activities	P2 Opportunities
1	LAB SUPPLIES	VARIES	NONE	VARIES		
2	LIGHTING	“	“	VEOLIA RECYCLING		
3						
4						
5						

6							
7							
8							
9							

REMARKS-GENERAL INFORMATION

General Process Information:

Regulatory/Enforcement History (if applicable):

Additional P2 remarks and information:

Would this facility be interested in a P2 assessment? Yes* _____ No _____

*If yes, refer promptly to your district P2 coordinator. Office of Compliance Assistance and Pollution Prevention – 1-800-329-7518 or p2mail@epa.state.oh.us or www.epa.state.oh.us/ocapp/ocapp.html

Other:

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

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

Safety Equipment Used: NONE

WASTE EVALUATION

1.	Have all wastes generated at the facility been adequately evaluated? [3745-52-11] <u>RTC 11-20-2012</u>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
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GENERATOR CLASSIFICATION

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

OFF-SITE SHIPMENT OF HAZARDOUS WASTE

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

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

NOTE: Complete appropriate checklist for each unit.

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

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

MIX HAZARDOUS WASTE WITH USED OIL

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

SMALL QUANTITY UNIVERSAL WASTE HANDLER REQUIREMENTS – BATTERIES AND LAMPS

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 *N/A*

3.	Are batteries that show evidence of leakage, spillage or damage that could cause leaks contained? [3745-273-13(A)(1)]	Yes <input 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 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 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 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 - Batteries" or "Waste Battery(ies)" or "Used Battery(ies)"? [3745-273-14(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

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)] <i>SOME BOXES OF SPENT LAMPS WERE OPEN</i>	Yes <input type="checkbox"/> No <input checked="" 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"/>

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.

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>BOXES OF SPENT LAMPS WERE NOT LABELED</i>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
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ACCUMULATION TIME

11.	Is the waste accumulated for less than one year? [3745-273-15(A)] <i>*</i>	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 <i>UNKNOWN SINCE NOT DOC. ACCUM DATE</i>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

[Facility Name/Inspection Date]
[ID number]

	proper recovery, treatment or disposal? (Burden of proof is on the handler to demonstrate) [3745-273-15(B)]	
<i>NOTE: Accumulation is defined as date generated or date received from another handler.</i>		
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: PUTTING ACCUM START DATE ON BOXES NOW (RTC 11-20-2012)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
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"/>
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		
<i>NOTE: If a SQUWH self-transport waste, then the handler must comply with the Universal Waste transporter requirements.</i>		
17.	Are universal wastes sent to either another handler, destination facility or foreign destination? [3745-273-18(A)] VEOLIA	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? If no, make aware of 49 CFR 171-180.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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		
<i>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]</i>		

[Facility Name/Inspection Date]

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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.

[Facility Name/Inspection Date]
[ID number]