



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

April 29, 2013

Mr. Frank Simcic  
EH&S Manager  
Hukill Environmental Services  
7013 Krick Road  
Bedford, OH 44146

**RE: HUKILL ENVIRONMENTAL SERVICES, TSD/LQG/TRANSPORTER  
OHD001926740/02-18-0315, CUYAHOGA COUNTY, NOV/PRTC**

Dear Mr. Simcic:

On April 10 and 17, 2013, I conducted a compliance evaluation inspection at Hukill Environmental Services (Hukill), located at 7013 Krick Road, Bedford, Ohio. I inspected Hukill to determine its compliance with Ohio's hazardous waste laws as found in Chapter 3734. of the Ohio Revised Code (ORC) and Chapter 3745. of the Ohio Administrative Code (OAC). Hukill was represented by you and Brent Foreman, and the Ohio EPA was represented by me.

Hukill is a permitted hazardous waste treatment and storage facility and a registered transporter of hazardous waste. This inspection included a facility walk through, review of inbound and outbound manifests, waste data sheets, weekly and daily inspection checklists, the daily drum inventory log, the daily bulk solvent inventory sheets, waste tracking, and personnel training rule requirements. The contingency plan has previously been reviewed and found to be acceptable. I have enclosed copies of the inspection checklists for your records.

Based on this inspection, Hukill is in violation of the following hazardous waste rules:

**1. Ohio Administrative Code (OAC) 3745-55-93(C)(4)-Containment and detection of releases.**

Secondary containment systems must be sloped or otherwise designed or operated to drain and move liquids resulting from leaks, spills or precipitation. Spilled or leaked waste and accumulated precipitation must be removed from the secondary containment system.

On the second day of the inspection I noted that the three outdoor concrete hazardous waste storage tank dikes, the 7-tank dike, the fuels tank dike, and the bottoms tank dike, contained significant amounts of water and some debris within them. I also noted that the metal drip pan, which is attached to the wall of the bottoms storage tank dike, was filled with rain water. While we were looking at that drip pan, we noticed a valve next to tank 54 was open and slowly dripping. The valve was closed while we were standing there.

On April 19 and 23, 2013 you emailed me pictures showing that the water had been pumped out of the drip pan and tank dikes, and that the excess debris had been removed from them. On April 25, 2013 I spoke with Brent Foreman who stated that the water that was removed from the tank dikes had been sampled and was non-hazardous. Based on the pictures you submitted, Hukill has been returned to compliance with this violation.

**2 & 3. OAC 3745-55-93(E)(1)(c)&(f)-Tank external liner systems.**

External liner systems must be free of cracks and gaps (OAC 3745-55-93(E)(1)(f)) and provided with an impermeable interior coating or lining that is compatible with the stored waste and that will prevent migration of wastes into the concrete (OAC 3745-55-93(E)(1)(c)).

The three outdoor, concrete tank dikes' secondary containment coating is starting to flake off the walls and all the dikes have some cracks in their floor and walls. There is also a buildup of debris within the tank dikes.

During this inspection we discussed the condition of the concrete hazardous waste tank dikes. I was told that Hukill has received two quotes for their repair and will be choosing one of the vendors soon. To abate this violation, please submit information that discusses how the tank dikes will be repaired and a timeline for the repairs.

During the inspection we talked about the following items:

**1. Loss of permitted storage capacity, former tanks 57 and 59.**

Tanks T-57 and T-59, were permitted 14,000 gallon storage tanks. The tanks were certified closed and taken out of service in February 2010. After approval of several modifications to delay their installation, Hukill was given until December 31, 2012, to replace the tanks and not lose the combined 28,000 gallons of tank volume. The tanks have not been replaced; therefore Hukill will need to pursue a class 3 permit modification should the facility wish to install replacement tanks.

**2. New tank level monitoring system.**

The new level indicators have been installed on tanks 52, 53, 56 and 60, but have not been electronically hooked up yet. During this inspection I was told that the electrician was there working on the wiring. The 4 remaining tanks, 55, 58, 61 and 62 will have high level radar alarms installed at a later date.

**Concern:**

1. Hukill conducts weekly inspections of the fuels dike system, 7 tank dike system, and the bottoms tank dike system. I reviewed the weekly inspection logs for these areas, and although I did note that comments were made for action items, I don't recall reading any comments regarding precipitation in the tank dikes needing to be removed. This is something that you will want to make note of during future inspections.

2. Water leaking from LUWA cooling water tanks. Although the leaking water from the cooling tanks is non-hazardous, it is running onto the east pad area where it forms puddles of water and areas of mud when mixes with dirt. Hukill may wish to find a way to contain the water so the mud/water mixture doesn't flow into the 15,000 gallon underground containment tank.

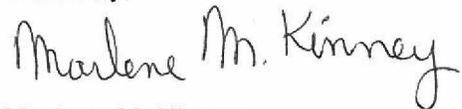
Hukill needs to immediately take the necessary measures to return to compliance with Ohio's environmental laws. Within 14 days of receipt of this letter, Hukill is requested to provide documentation to this office including the steps taken to abate the violations cited above. Documentation of steps taken to return to compliance includes written correspondence, updated policies, and photographs, as appropriate, and may be submitted via the postal service or electronically to [marlene.kinney@epa.ohio.gov](mailto:marlene.kinney@epa.ohio.gov)

Please be advised that violations cited above will continue until the violations have been properly abated. Failure to comply with Chapter 3734 of the Ohio Revised Code and rules promulgated thereunder may result in a civil penalty of up to \$10,000 per day for each violation. It is imperative that you return to compliance. If circumstances delay the abatement of violations, Hukill is requested to submit written correspondence of the steps that will be taken by date certain to attain compliance.

You can find copies of the rules and other information on the division's web page at <http://www.epa.state.oh.us/dmwm.aspx>

Should you have any questions, please feel free to call me at (330) 963-1162 or email me at [marlene.kinney@epa.state.oh.us](mailto:marlene.kinney@epa.state.oh.us)

Sincerely,



Marlene M. Kinney  
Environmental Specialist  
Division of Materials and Waste Management

MMK:ddw

Enclosure

ec: Jeff Mayhugh, DMWM, CO  
Nyall McKenna, DMWM, NEDO  
Natalie Oryshkewych, DMWM, NEDO

Send to Central Office <input checked="" type="checkbox"/>	<b>Ohio Environmental Protection Agency</b> <b>RCRA SUBTITLE C SITE</b> <b>IDENTIFICATION/VERIFICATION FORM</b>	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](mailto:brad.hauser@epa.state.oh.us).

<b>Site EPA ID No.</b>	EPA ID Number: <b>OHD001926740</b>	
<b>Site Name</b>	Name: <b>Hukill Environmental Services</b>	Website: (Optional)
<b>Site Location Information</b>	Street Address: <b>7013 Krick Road</b>	
	City, Town, or Village: <b>Bedford</b>	State: <b>OH</b>
<b>Site Land Type</b> (check only one)	County Name: <b>Cuyahoga</b>	
<b>NAICS code(s)</b> <a href="http://www.census.gov/epcd/www/naics.html">www.census.gov/epcd/www/naics.html</a>	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"/>
	Zip Code: <b>44146</b>	

<b>Facility Representative</b>	First Name: <b>Frank</b>	MI:	Last Name: <b>Simcic</b>
Additional names can be recorded in number 12	Title: <b>Envrionmental Health and Safety Manager</b>		
Only provide address information if it is different than the site address	Phone Number: <b>440-232-9400</b>		Phone Number Extension:
	E-Mail Address:		
	Fax Number:		Fax Number Extension:
	Street or P.O. Box:		
	City, Town or Village:		
	State:	Zip Code:	

<b>Legal Owner And Operator of the Site.</b> List Additional Owners and/or Operators in the Comment Section or on another copy of this form page	Name of Site's Legal Owner: <b>Hukill Chemical Corporation</b>		Date Became Owner (mm/dd/yyyy): <b>07/14/1965</b>	
	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: <b>Hukill Chemical Corporation dba Hukill Environmental Services</b>		Date Became Operator (mm/dd/yyyy):	
	Operator 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:		Operator Phone #:	
	State:	Country:		Zip Code:

<b>VIOLATIONS CITED?</b>	<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 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 checked="" 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<br>(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: **Brent Foreman**  
 Tanks  Yes  No  
 Containers  Yes  No

Name of Inspector(s) **Marlene Kinney**      Name of Inspector(s) \_\_\_\_\_      Date of Inspection/Time (mm/dd/yyyy) (hh:mm) **4/10 and 17/2013**

**Comments:**  
**Permitted TSD. See 2011 annual report for the waste codes the facility is permitted to accept.**

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

<b>FACILITY</b>	<i>Hubell Environmental Services</i>	<b>OHIO PERMIT #</b>	<i>02-18-0315</i>
<b>STREET ADDRESS</b>	<i>7013 Kruik Rd</i>	<b>US EPA ID#</b>	<i>OH001926740</i>
<b>CITY, STATE AND ZIP CODE</b>	<i>Bedford, OH 44146</i>	<b>PHONE NUMBER</b>	<i>440-232-9400</i>
<b>COUNTY</b>	<i>Cuyahoga</i>	<b>INSPECTION DATE</b>	<i>4/10, 17/2013</i>

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

If So, How Far In Advance?

	<b>NAME</b>	<b>AGENCY/TITLE</b>	<b>PHONE</b>
<b>INSPECTORS</b>	<i>Marlene Kenney</i>	<i>Ohio EPA -</i>	<i>330-963-1162</i>
<b>FACILITY REPS</b>	<i>Frank Lemeic, Brent Foreman</i>		<i>HES 440-232-9400</i>

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:	<i>Dec 28, 2006</i>	LDR Checklist Attached:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Permit Effective Date:	<i>12/28/06</i>	Used Oil Checklist Attached:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
Permit Expiration Date:	<i>12/26/16</i>	Generator Checklist Attached:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Permit Renewal Date:			
Permit Modification Date(s):			

**AUTHORIZED ACTIVITIES**

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

Post-Closure Care       Corrective Action

*Monitored Natural Attenuation  
Monitoring wells tested 2x per year*

## Table of Contents

GENERAL PERMIT COMPLIANCE AND ACTIVITIES .....	3
PERMIT MODIFICATION, REVISION, REVOCATION .....	4
SITE ENTRY - AVAILABILITY OF RECORDS .....	5
INSPECTION ITEMS FROM PART B APPLICATION .....	5
RECORDKEEPING/OPERATING REQUIREMENTS .....	5
OPERATING RECORD .....	5
DOCUMENTS TO BE MAINTAINED AT FACILITY .....	5
ANNUAL REPORT REQUIREMENT .....	6
SAMPLING/MONITORING RECORDKEEPING REQUIREMENTS .....	6
INSPECTION ITEMS FROM THE PART B APPLICATION .....	7
WASTE MINIMIZATION REQUIREMENTS .....	7
GROUND WATER MONITORING .....	7
INSPECTION ITEMS FROM THE PART B APPLICATION .....	7
WASTE ACCEPTANCE AND GENERATION .....	7
INSPECTION ITEMS FROM THE PART B APPLICATION .....	7
OFF-SITE SHIPMENTS/MANIFEST REQUIREMENTS .....	8
WASTE ANALYSIS/WASTE ANALYSIS PLAN .....	9
INSPECTION ITEMS FROM THE PART B APPLICATION .....	10
GENERAL INSPECTION REQUIREMENTS .....	10
INSPECTION ITEMS FROM THE PART B APPLICATION .....	10
SECURITY REQUIREMENTS .....	10
FACILITY OPERATIONS .....	11
INSPECTION ITEMS FROM THE PART B APPLICATION .....	11
PERSONNEL TRAINING .....	11
INSPECTION ITEMS FROM THE PART B APPLICATION .....	11
REQUIRED EQUIPMENT .....	11
INSPECTION ITEMS FROM THE PART B APPLICATION .....	12
CONTINGENCY PLAN - EMERGENCY PROCEDURES .....	12
IMPLEMENTATION OF CONTINGENCY PLAN .....	13
INSPECTION ITEMS FROM THE PART B APPLICATION .....	14
CLOSURE REQUIREMENTS .....	14
POST-CLOSURE MAINTENANCE .....	15
INSPECTION ITEMS FROM THE PART B APPLICATION .....	15
STORAGE OF HAZARDOUS WASTES IN CONTAINERS .....	16
CONDITION OF CONTAINERS .....	16
INSPECTIONS .....	16
CONTAINMENT SYSTEM .....	21
AISLE SPACE .....	22
INSPECTION ITEMS FROM THE PART B APPLICATION .....	22
LAND DISPOSAL RESTRICTION REQUIREMENTS .....	22
INSPECTION ITEMS FROM THE PART B APPLICATION .....	22
CORRECTIVE ACTION .....	22

[Facility Name/Inspection Date]

[ID number]

TSD Baseline Checklist/May 2012

Page 2 of 22

GENERAL PERMIT COMPLIANCE AND ACTIVITIES			
1.	Has the expiration date of the permit passed? If so:		Yes <input type="checkbox"/> No <input checked="" 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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 checked="" 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 checked="" 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 checked="" 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. Date, time and type of incident?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
		D. Name and quantity of material(s) involved?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
		E. The extent of injuries, if any?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
		F. 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"/>
		G. Estimated quantity and disposition of recovered material that resulted from the incident?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 checked="" type="checkbox"/>

[Facility Name/Inspection Date]

[ID number]

TSD Baseline Checklist/May 2012

Page 3 of 22

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

*NOTE: Such notification does not waive the permittee's duty to comply with the permit. [Condition A.17]*

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 checked="" 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 checked="" type="checkbox"/> <i>HES is in the process of being sold to Tri Environmental LLC, Class 3 mod. received 4/15/13</i>
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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input 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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input 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 type="checkbox"/> No <input checked="" 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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

[Facility Name/Inspection Date]

[ID number]

TSD Baseline Checklist/May 2012

Page 4 of 22

**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"/>	

**INSPECTION ITEMS FROM PART B APPLICATION**

*NOTE: The inspector or permit writer may add questions pertaining to the permittee's application, as appropriate.*

**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 checked="" 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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
h.	<b>For disposal facilities</b> , 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 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"/>	

[Facility Name/Inspection Date]

[ID number]

TSD Baseline Checklist/May 2012

Page 5 of 22

	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] <i>Done</i>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	e.	Personnel training plan and records required by OAC rule 3745-54-16(E)? [Condition B.6]	Yes <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	g.	Operating record in accordance with OAC rule 3745-54-73? [Condition B.22]	Yes <input checked="" type="checkbox"/> 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 checked="" 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 <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> 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: <i>Not since last inspection</i>	Yes <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<b>ANNUAL REPORT REQUIREMENT</b>			
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 <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<b>SAMPLING/MONITORING RECORDKEEPING REQUIREMENTS</b>			
24.		In compliance with Condition A.12(b) of the permit, do the permittee's records of monitoring information specify the: <i>- G.W monitoring</i>	
	a.	Date(s), exact place(s), time(s) and method(s) of sampling or measurement?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b.	Individual(s) who performed the sampling or measurement?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c.	Date(s) analyses were performed?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d.	Individual(s) who performed the analyses?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	e.	Analytical technique(s) or method(s) used?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	f.	Results of such analyses?	Yes <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

[Facility Name/Inspection Date]

[ID number]

TSD Baseline Checklist/May 2012

Page 6 of 22

27.	Has Ohio EPA requested submittal of any reports or other information from the permittee? If so:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
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"/>

**INSPECTION ITEMS FROM THE PART B APPLICATION**

NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.

**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"/> <i>Submitted to Michael Kelley 7/8/2011</i>
29.	Did the permittee submit the waste minimization report to Ohio EPA, Office of Compliance Assistance & Pollution Prevention and _____ 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"/>
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? If so, what amount of waste has the permittee reduced this year?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/>
31.	Has the permittee saved money this year by implementing pollution prevention (reducing raw material usage, disposal fees, energy savings, etc.)? If so, how much money has the permittee's company saved this year?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>

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.

**GROUND WATER MONITORING**

32.	Has the permittee conducted sampling of their monitoring wells? [Condition J.9 & J.10] <i>2 times a year</i>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
33.	Have they reported the results in the Annual Report to the director by March 1 <sup>st</sup> as required by Condition B.25 of the permit?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

**INSPECTION ITEMS FROM THE PART B APPLICATION**

NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.

**WASTE ACCEPTANCE AND GENERATION**

34.	Is the permittee storing any containers of hazardous waste received from any off-site source that permittee is not permitted to store? [Condition A.1.]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
35.	Has the permittee arranged to receive hazardous waste from a foreign or off-site source that the permittee is not permitted to store? [Condition A.1.]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
36.	Has the permittee notified the regional administrator of U.S. EPA at least four weeks prior to the date the permittee expects to receive hazardous waste from a foreign source, as required by OAC rule 3745-54-12(A)? [Condition B.2(b)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

**INSPECTION ITEMS FROM THE PART B APPLICATION**

NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.

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 type="checkbox"/> No <input checked="" 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"/>
<b>TRANSPORTERS:</b>		
40.	Does the permittee give one copy of the manifest to the transporter, send one copy to the generator within 30 days, and keep one copy for at least 3 years? [3745-54-71(A)(2)(c)(d)(e)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	If shipping papers are used in lieu of manifests (bulk shipments, etc.), are the same requirements met? [3745-54-71(B)(3)(4)(5)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Are any significant discrepancies in the manifest, as defined in OAC rule 3745-54-72(A) and (B) noted in writing on the manifest or shipping paper? [3745-54-71(A)(2)(b)] & [3745-54-71(B)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
41.	Have any manifest discrepancies been reconciled within 15 days as required by OAC rule 3745-54-72(C)? [Condition B.24(b)] If not:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	Has the permittee submitted the required information to the director?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
42.	Has the permittee rejected any hazardous waste load or identified a container residue that exceeds the quantity limits for "empty" containers? [Condition B.24] If so:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
a.	Did the permittee consult with the generator prior to forwarding the rejected waste to an alternate facility? [3745-54-72(D)(1)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
b.	Did the permittee send the rejected waste to an alternate facility or return the rejected waste to the generator within 60 days after the rejection? [3745-54-72(D)(1)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
c.	While the permittee is making arrangements for forwarding rejected waste to another facility, did the permittee ensure that either the delivering transporter retained custody of the waste or did the	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

[Facility Name/Inspection Date]

[ID number]

TSD Baseline Checklist/May 2012

Page 8 of 22

	permittee provide for secure, temporary custody of the waste? [3745-54-72(D)(2)]	
d.	Did the permittee prepare a manifest in accordance with OAC rules 3745-54-71(E)(1) through (7) for rejected waste to be sent to an alternate facility? [3745-54-72(E)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
e.	Did the permittee prepare a manifest in accordance with OAC rules 3745-54-72(F)(1) through (7) for rejected waste to be sent back to the generator? [3745-54-72(F)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
f.	Did the permittee comply with the exception reporting requirements in OAC rule 3745-52-42(A) for full or partial load rejections and container residues contained in non-empty containers that are returned to the generator? [3745-54-72(F)(8)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
43.	If the permittee receives hazardous waste imported from a foreign source, has the permittee mailed a copy of the manifest and documentation confirming U.S. EPA's consent to the import of hazardous waste to U.S. EPA within 30 days after a delivery? [3745-54-71(A)(3)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
44.	Does the permittee provide a copy of the movement document bearing all required signatures to the exporter, to the U.S. EPA, and to competent authorities of all other concerned countries within 3 working days after the receipt of a shipment subject to 40 CFR 262 subpart H? [3745-54-71(D)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
45.	Does the permittee send a hazardous waste shipment to a consignment state ( <i>i.e.</i> , the state in which the hazardous waste shipment will be transported and subsequently managed)? If so:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	Has the permittee determined whether the consignment state for a shipment regulates any additional wastes (beyond those regulated federally) as hazardous wastes under its state hazardous waste program? [3745-54-71(E)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Has the permittee determined whether the consignment state requires the permittee to submit any copies of the manifest to the state? [3745-54-71(E)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
46.	If the permittee has accepted any unmanifested hazardous wastes from off-site sources for treatment, storage, or disposal, has an unmanifested waste report containing all the information required by OAC rule 3745-54-76(A) been submitted to the director within 15 days?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<b>WASTE ANALYSIS/WASTE ANALYSIS PLAN</b>		
47.	Does the permittee have a detailed chemical and physical analysis of waste streams which contains all information of the waste in accordance with OAC Chapters 3745-54 to 3745-57, 3745-205 and 3745-270 and the terms and conditions of the permit? [Condition B.3(a)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
48.	Does the permittee follow the procedures described in the WAP (Section _____ of the approved permit application)? [Condition B.3(b)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
49.	In accordance with OAC rule 3745-54-13(A)(3), does the permittee repeat the waste analysis when the process or operation generating the hazardous waste has changed, or at least annually? [Condition B.3]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
50.	<b>FOR OFF-SITE FACILITIES:</b> Are the sampling methods and procedures specified in the permittee's WAP that will be used to inspect and, if necessary, analyze each movement of hazardous waste received at the facility to ensure that it matches the identification of the waste on the manifest [3745-54-13(C)]?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
51.	<b>FOR FACILITIES OPERATING SURFACE IMPOUNDMENTS EXEMPT FROM LAND DISPOSAL RESTRICTIONS UNDER OAC rule 3745-270-04(A):</b>	
	Does the waste analysis plan include procedures and schedules for:	
a.	The sampling of impoundment contents? [3745-54-13(B)(7)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

[Facility Name/Inspection Date]

[ID number]

TSD Baseline Checklist/May 2012

Page 9 of 22

	b.	The analysis of test data? [3745-65-13(B)(7)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	<input checked="" type="checkbox"/>
	c.	The annual removal of residues which are not delisted or which exhibit the characteristic of a hazardous waste and either does not meet treatment standards (OAC rules 3745-270-40 to 3745-270-49) or where no treatment standards have been established? [3745-54-13(B)(7)]	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	<input type="checkbox"/>
52.	<b>Where applicable:</b> The methods which will be used to meet additional waste analysis requirements for specific waste management methods specified in OAC rules 3745-54-17, 3745-57-14, 3745-57-41 and 3745-270-07? [3745-54-13(B)(6)]		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	<input type="checkbox"/>
53.	Does the permittee place the results of all waste analyses in the facility operating record in accordance with OAC rule 3745-54-73?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	<input type="checkbox"/>

**INSPECTION ITEMS FROM THE PART B APPLICATION**

*NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.*

**GENERAL INSPECTION REQUIREMENTS**

*NOTE: Inspector may attach a copy of the inspection procedures and schedules. If so, the attached document is referenced as Appendix \_\_\_\_\_.*

54.	Is the permittee following the inspection procedures and schedules as set forth in the permit (Section ____ of the approved permit application) and the requirements of OAC rules 3745-54-15(A),(C) and (D)? [Condition B.5]		Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	<input type="checkbox"/>
55.	Is the permittee following the approved inspection schedule for inspecting monitoring equipment, safety equipment, emergency equipment, security devices and operating and structural equipment as specified in OAC rule 3745-54-15(B)?		Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	<input type="checkbox"/>
	a.	Is the schedule kept at the facility? [3745-54-15(B)(2)]	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	<input type="checkbox"/>
56.	Does the permittee remedy deterioration or any malfunctions discovered by an inspection as required by OAC rule 3745-54-15(C)? [Condition B.5]		Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	<input type="checkbox"/>
57.	In accordance with OAC rule 3745-54-15(D) and Condition B.5 of the permit, do inspection records contain the following information:					
	a.	Date and time of inspection?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	<input type="checkbox"/>
	b.	Name of inspector?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	<input type="checkbox"/>
	c.	Notation of observations made?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>	<input type="checkbox"/>
	d.	Date and nature of any repairs or other remedial actions?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	<input type="checkbox"/>

**INSPECTION ITEMS FROM THE PART B APPLICATION**

*NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.*

**SECURITY REQUIREMENTS**

58.	Is the permittee complying with the following security provisions of OAC rule 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 type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	<input checked="" type="checkbox"/>
	b.	An artificial or natural barrier (in good repair) which completely	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	<input type="checkbox"/>

[Facility Name/Inspection Date]

[ID number]

TSD Baseline Checklist/May 2012

Page 10 of 22

	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"/>
59.	In accordance with OAC rule 3745-54-14(C), does the permittee have signs reading "Danger - Unauthorized Personnel Keep Out" posted at entrances of the hazardous waste container storage building number _____ ?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

**FACILITY OPERATIONS**

60.	Are 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"/> <i>However, water is leaking from unit cooling H<sub>2</sub>O tanks causing a mess on East Pad</i>
61.	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"/> <i>Area</i>
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"/>

**INSPECTION ITEMS FROM THE PART B APPLICATION**

NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.

**PERSONNEL TRAINING**

*New employees have been trained*

62.	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)? <i>April 1, 2013</i>	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 1<sup>st</sup> to December 31<sup>st</sup>. Each training must occur within 15 months after the previous training. [3745-54-16(C)]

63.	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 type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
-----	---	---

**INSPECTION ITEMS FROM THE PART B APPLICATION**

NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.

**REQUIRED EQUIPMENT**

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

64.	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	
-----	--	--

[Facility Name/Inspection Date]

[ID number]

TSD Baseline Checklist/May 2012

Page 11 of 22

	permit:	
a.	An internal communications or alarm system?	Yes <input checked="" 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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
65.	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"/>
66.	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"/>

### INSPECTION ITEMS FROM THE PART B APPLICATION

*NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.*

### CONTINGENCY PLAN - EMERGENCY PROCEDURES

67.	In compliance with Condition B.13 of the permit and OAC rule 3745-54-37(A), 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"/>
68.	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"/>
69.	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"/>
70.	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"/>
71.	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"/>
72.	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.*

[Facility Name/Inspection Date]

[ID number]

TSD Baseline Checklist/May 2012

Page 12 of 22

<b>EMERGENCY COORDINATOR</b>		
73.	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"/>
74.	In accordance with OAC rule 3745-54-55 and Condition B.19 of the permit, is/are the emergency coordinator(s) at the facility familiar with the following:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	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"/>
75.	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"/>
76.	Does the permittee have a contingency plan for the facility that: [Condition B.15]	
	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 evacuation 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>		
<b>IMPLEMENTATION OF CONTINGENCY PLAN</b>		
77.	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</i></p>		

[Facility Name/Inspection Date]

[ID number]

TSD Baseline Checklist/May 2012

Page 13 of 22

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](http://epa.ohio.gov/portals/32/pdf/Contingency_Plan_and_Incident_Reporting.pdf). Facility specific scenarios are included in the permittee's contingency plan.

	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 checked="" 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 after 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(I)? [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(I)? [Condition B.23]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

#### INSPECTION ITEMS FROM THE PART B APPLICATION

NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.

#### CLOSURE REQUIREMENTS

78.		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"/>
79.		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"/>
80.		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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
81.		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 checked="" type="checkbox"/>
	b.	Was closure conducted in accordance with the closure performance	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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.

[Facility Name/Inspection Date]

[ID number]

TSD Baseline Checklist/May 2012

Page 14 of 22

		standard of OAC rule 3745-55-11? [Condition B.26]	
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 checked="" 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 checked="" type="checkbox"/>
e.		Has the permittee decontaminated and/or disposed of all contaminated equipment, structures and soils as required by OAC rule 3745-55-14 and the approved closure plan? [Condition B.32]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
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 checked="" 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 checked="" type="checkbox"/>

**POST-CLOSURE MAINTENANCE**

*- overlaps to corrective action requirements*

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

82.		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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> <i>- concrete on tank farm</i>
83.		Has the permittee conducted and recorded an inspection of at least the following? [Condition B.35]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input 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.	
84.		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 type="checkbox"/>
85.		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"/>
86.		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"/>
87.		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"/>

*Visual insp of integrity of the tank dikes*

**INSPECTION ITEMS FROM THE PART B APPLICATION**

NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.

**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**

88.	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 waste in a manner that complies with the conditions of the permit? [Condition C.4]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
89.	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"/>
90.	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**

*NOTE: Inspector may attach a container inspection checklist. If so, the attached document is referenced as Appendix \_\_\_\_\_.*

91.	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**

92.	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"/>
93.	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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

**TANK SYSTEMS - INSPECTIONS**

94.	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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
95.	Has the permittee documented the inspections required in OAC rules 3745-55-95, in the operating record, including inspection of the following:	

[Facility Name/Inspection Date]

[ID number]

TSD Baseline Checklist/May 2012

Page 16 of 22

	[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 type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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"/>
96.	For ancillary equipment NOT provided with secondary containment, has the permittee documented inspections of such equipment each operating day? [3745-99-95(F)] <i>In the air neg checklists</i>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
NOTE: "Each operating day" is each day that the tank system is being used to manage (store or treat) hazardous waste.		
NOTE: Ancillary equipment required to be provided with secondary containment are described in OAC 3745-55-93(F).		
97.	For tank systems using leak detection systems to alert facility personnel to leaks or implementing established workplace practices to ensure leaks are promptly identified, has the permittee documented: [3745-55-95(D)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	Inspections of above ground portion of tank weekly?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Inspections of construction materials and area immediately surrounding the tanks for signs of erosion or release of hazardous waste weekly?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Use of the alternate inspection schedule, including a description of the established workplace practices at the facility?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
98.	Where applicable, does the permittee inspect the cathodic protection system to confirm proper operation within six months of initial installation and annually thereafter, as required by OAC rule 3745-55-95(G)(1)? [Condition D.6(d)(i)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
99.	Where applicable, does the permittee inspect all sources of impressed current at least bi-monthly as required by OAC rule 3745-55-95(G)(2)? [Condition D.6(d)(ii)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
<b>TANK SYSTEMS – CLOSURE REQUIREMENTS</b>		
100.	If the permittee has closed a tank, was closure completed in accordance with OAC rule 3745-55-97? [Condition D.9]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<b>TANK SYSTEMS – STORING IGNITABLE OR REACTIVE WASTES</b>		
101.	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 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 type="checkbox"/> N/A <input type="checkbox"/>
102.	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 (2008)? [Condition D.10(b)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
103.	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	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>

[Facility Name/Inspection Date]

[ID number]

TSD Baseline Checklist/May 2012

Page 17 of 22

	same tank system, or into a tank system that has not been decontaminated and which previously held an incompatible waste or material?	
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**

*- Found in Part B Permit Application*

104.	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 type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
------	---	---

*NOTE: 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 a qualified 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 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 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 checked="" 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 type="checkbox"/>

*NOTE: CO-DHWM Engineering staff are available to assist you with evaluation of the written assessment.*

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

**TANK SYSTEMS – SECONDARY CONTAINMENT**

106.	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"/>
------	--	--

NOTE: Secondary containment must be provided for tank systems that store or treat materials that become hazardous wastes within two years after the hazardous waste listing, or when the system has reached 15 years of age, whichever comes later. [3745-55-93(A)(2)].

107.	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 excess 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? <i>Have quotes for repair. Some cracking in tank debris</i>	Yes <input type="checkbox"/>	No <input checked="" 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 type="checkbox"/>	N/A <input checked="" 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 or the collection system has excess 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 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 checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
		ii. <b>If metal</b> , 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 type="checkbox"/>	N/A <input type="checkbox"/>

*Collect rain H<sub>2</sub>O*

**TANK SYSTEMS – SECONDARY CONTAINMENT DESIGN/OPERATION/INSTALLATION**

108.	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 detecting and	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
------	--	---	-----------------------------	------------------------------

	collecting releases and accumulated liquids?	
109.	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 type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>

*All leak dates must be purged*

<b>TANK SYSTEMS – ANCILLARY EQUIPMENT REQUIREMENTS</b>		
110.	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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	<b>If not</b> , 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 type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Sealless or magnetic coupling pumps and/or sealless valves?	Yes <input 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 type="checkbox"/>

<b>TANK SYSTEMS – TANK SYSTEMS FOUND TO BE LEAKING OR UNFIT FOR USE</b>		
111.	Has there been a leak or spill from any tank system or has any tank system been found unfit for use? <b>If so</b> , 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"/>

<i>NOTE: If the tank is found to be unfit for use, inspector should explain why.</i>		
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	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

		unless it was less than one pound and was cleaned up immediately?						
	h.	For a release to the environment, submit a written report of the incident to the director within 30 days after 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.								
	112.	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 a qualified professional engineer 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 type="checkbox"/>
	113.	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 type="checkbox"/>
	114.	If the permittee was unable to repair and return the unit to service as described in Questions 110.i and 110.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 type="checkbox"/>
	115.	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 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"/>
	116.	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 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"/>
<b>CONTAINMENT SYSTEM</b>								
	117.	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"/>
	118.	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 checked="" 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)]								

slip hazard  
 6 months  
 Drip pan needs to be pumped  
 Leaking LUWA cooling H<sub>2</sub>O tanks  
 sludge / H<sub>2</sub>O

<b>AISLE SPACE</b>		
119.	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"/>
<b>INSPECTION ITEMS FROM THE PART B APPLICATION</b>		
<i>NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.</i>		
<b>LAND DISPOSAL RESTRICTION REQUIREMENTS</b>		
<i>NOTE: In order to determine compliance with all applicable LDR requirements the inspector may need to complete the separate LDR TSD checklist:</i>		
120.	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"/>
121.	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"/>
122.	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"/>
123.	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 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)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
124.	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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<b>INSPECTION ITEMS FROM THE PART B APPLICATION</b>		
<i>NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.</i>		
<b>CORRECTIVE ACTION</b>		
125.	Has the permittee submitted the monthly progress report for all corrective action activities? (This report is due by the 15 <sup>th</sup> of the month following the reporting period.) [Condition _____]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
126.	Has the permittee identified any new WMUs or releases at the facility? [Condition E.10]? If so:	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 checked="" type="checkbox"/>
<b>INSPECTION ITEMS FROM THE PART B APPLICATION</b>		
<i>NOTE: The inspector or permit writer may add inspection items based on the permittee's application, as appropriate.</i>		

**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: *Amount in gallons x Specific Gravity x 8.345 = 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 <sup>st</sup> ? [3745-52-41(A)] 2012	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 <b>other</b> 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 <b>on-site without a permit</b> or at another facility <b>other</b> 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"/>
----	--	--

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)] - Permitted facility	
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"/>

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 checked="" 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 checked="" 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 checked="" 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 checked="" 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 checked="" 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 checked="" type="checkbox"/>
<b>MANIFEST REQUIREMENTS</b>		
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"/>
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)]		
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"/>
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)]		
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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input 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"/>
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.		
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) - rejected heels; didn't note any this inspection]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Provide the transporter a copy of the manifest? [3745-52-23(F)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input 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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input 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"/>
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)]		
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.		
<b>PERSONNEL TRAINING</b>		
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 <sup>st</sup> to December 31 <sup>st</sup> 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
Utility Worker (2)	Kris Williams, Carlton Knaley	yes
Transportation Manager	Clayton Booth	yes
Driver	Jeff Stock	yes

#### 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"/>
-----	--	--

[Facility Name/Inspection Date]  
 [ID number]  
 LQG & Generator LDR/May 2012  
 Page 3 of 9

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"/>
<p><i>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.</i></p> <p style="text-align: center;"><i>No spills or any type of emergency</i></p>		
<b>EMERGENCY PROCEDURES</b>		
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(I)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
<p><i>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.</i></p>		
<b>PREPAREDNESS AND PREVENTION</b>		
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"/>
<p><i>NOTE: Verify that the equipment is listed in the contingency plan.</i></p>		
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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input 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 checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	f.	Containers are marked with words "Hazardous Waste" or <u>other words</u> identifying the contents? [3745-52-34(C)(1)(b)] <u>PCU</u>
		Yes <input checked="" type="checkbox"/> 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:	
	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 checked="" 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 checked="" 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.		
<b>USE AND MANAGEMENT OF CONTAINERS IN &lt;90 DAY ACCUMULATION AREAS</b>		
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"/>
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 <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 checked="" type="checkbox"/> 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 <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"/>
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.		
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"/>
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]		
<b>PRE-TRANSPORT REQUIREMENTS</b>		
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"/>
NOTE: Continue with the generator LDR requirements on the next page.		

**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"/>
<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 &gt;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 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?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

[Facility Name/Inspection Date]

[ID number]

LQG & Generator LDR/May 2012

Page 7 of 9

	[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"/>
<b>NOTIFICATION FORM</b>		
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"/>
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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
NOTE: Not required if the TSD tests its treatment residues for all underlying hazardous constituents.		
<b>PROHIBITED DILUTION</b>		
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"/>
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 <b>one</b> 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 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"/>

[Facility Name/Inspection Date]

[ID number]

LQG & Generator LDR/May 2012

Page 8 of 9

	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 &amp; 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>		

**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**

3.	Are batteries that show evidence of leakage, spillage, or damage that could cause leaks contained? [3745-273-13(A)(1)] <i>All batteries are contained</i>	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 type="checkbox"/> N/A <input checked="" 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 checked="" 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 checked="" 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 checked="" 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)]	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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input 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)]	Yes <input checked="" type="checkbox"/> No <input 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	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input 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)]	
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: <i>Last shipment of universal waste was to: Environmental Recycling, Bowling Green Jan 2013</i>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>  <i>1/14/13</i>
<b>EMPLOYEE TRAINING</b>		
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"/>
<b>RESPONSE TO RELEASES</b>		
14.	Are releases of universal waste and other residues immediately contained? [3745-273-17(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input 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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<b>OFF-SITE SHIPMENTS</b>		
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?  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</u> of the following:	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"/>
<b>EXPORTS</b>		
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]		

*Zena - Lyons*

[Facility Name/Inspection Date]  
[ID number]

*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.*

## HAZARDOUS WASTE TRANSPORTER REQUIREMENTS

### GENERAL INFORMATION

Please provide a brief description of site activity/waste handling procedures:

1.	Has the transporter registered with and obtained a permit (i.e., a credential) from the Public Utilities Commission of Ohio? [3745-53-11(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<p><i>Note: Credentials issued by PUCO are on its website at <a href="http://www.puco.ohio.gov/apps/HazmatSearch/">http://www.puco.ohio.gov/apps/HazmatSearch/</a>. PUCO's Transportation Division at 614-466-3392 also provides information on issued credentials or credential applications. Example of a credential ID number: UPW0028633OH</i></p>		
2.	Has the transporter received a U.S. EPA ID number? [3745-53-11(B)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<p><b>NOTE: A transporter who has a mailing address in Ohio without a U.S. EPA I.D. number may obtain one by applying to Ohio EPA by using Ohio EPA form EPA9029. [3745-53-11(C)]</b></p>		
3.	Have all hazardous wastes accepted been accompanied by a manifest? [3745-53-20(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	If no, was the waste generated by a CESQG or by a SQG shipped under a reclamation agreement? [3745-53-20(H)(1)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
4.	Has the transporter signed and dated the manifest and left a copy with generator or prior transporter and carried the manifest with the waste shipment? [3745-53-20(B)&(C)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
5.	Are manifests with all required signatures retained for at least three years? [3745-53-22(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
6.	Has the transporter delivered the entire quantity of waste accepted from the generator/transporter in accordance with OAC 3745-53-21(A)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	If the hazardous waste cannot be delivered in accordance with OAC 3745-53-21(A) other than rejection of the waste by the designated facility, did the transporter contact the generator for further instructions and revise the manifest accordingly? [3745-53-21(B)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> <i>If necessary - this is done</i>
b.	Was the transporter on the designated facility's premises when the facility rejected a partial load of the shipment or regulated quantities of container residues? If so:	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
i.	Did the transporter obtain a copy of the original manifest including the rejecting facility's date and signature, the manifest tracking number that will accompany the shipment, and a description of the partial rejection or container residue in the "Discrepancy" block? [3745-53-21(B)(2)(a)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
ii.	Has the transporter retained the original manifest for at least three years? [3745-53-21(B)(2)(a)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
iii.	Did the transporter obtain a new manifest if the transporter was forwarding the rejected part of the shipment or a regulated container residue to an alternate facility or returning it to the generator? [3745-53-21(B)(2)(a)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Was the transporter on the designated facility's premises when the facility rejected a full load of the shipment? If so:	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
i.	Did the transporter obtain the original manifest including the rejecting facility's signature and date attesting to the rejection, a description of the rejection in the "Discrepancy" block of the manifest, and the name, address, phone number, and U.S. EPA identification number for the alternate facility or the generator? [3745-53-21(B)(2)(b)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
ii.	Has the transporter retained the original manifest for at least three years? [3745-53-21(B)(2)(b)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
iii.	Did the transporter obtain a new manifest if the original manifest was not used? [3745-53-21(B)(2)(b)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
7.	<b>For hazardous waste delivered by the original transporter to a rail or</b>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

Facility Name/Inspection Date]

[ID Number]

Hazardous Waste Transporter Requirements Checklist/May 2012

Page 1 of 3

	<b>water transporter:</b> Did the original transporter comply with the manifest handling requirements of 3745-53-20(E)&(F)?	
<i>NOTE: OAC 3745-53-20(C) and (D) do not apply to water (bulk shipment) transports or shipments involving rail transportation.</i>		
8.	<b>For hazardous waste shipped out of the country:</b> Has the transporter retained signed copies of the manifest for at least three years indicating that the waste left the U.S.A.? [3745-53-22(D)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
9.	Has the transporter ever had a discharge of hazardous waste during the time that the waste was under the transporter's control? If so:	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	a. Was immediate action taken? [3745-53-30(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b. Was Ohio EPA's Office of Emergency Response immediately notified? [3745-53-30(C)(1)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c. Did the transporter report in writing to Ohio EPA's Office of Emergency Response? [3745-53-30(C)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d. Was the discharge cleaned up as required by Ohio EPA or a federal agency to remove hazard to protect human health or the environment? [3745-53-31]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
10.	Does the transporter store manifested containerized hazardous wastes at a specific location en route to the destination facility? If so:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	a. Are wastes stored for ten days or less at a transfer facility? [3745-53-12]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	b. Do containers used for waste storage meet DOT requirements? [3745-53-12]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
<i>NOTE: Temporary storage in tanks is not permitted under transfer facility rules and tank storage requires a RCRA permit. Any storage by the transporter which is not authorized under OAC 3745-53-12 transfer facility requirements is subject to full RCRA regulations. A "transfer facility" means any transportation-related facility, including loading docks, parking areas, storage areas and other similar areas where hazardous waste is held during the normal course of transportation. (This does not include storage at the designated facility.) DOT regulations on packaging are contained in 40 CFR 176, 178 and 179.</i>		
11.	Does the transporter import hazardous waste into the United States? If so:	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	a. Did the transporter comply with the generator standards of OAC Chapter 3745-52? [3745-53-10(C)(1)] (Complete generator checklist)	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
<i>NOTE: Transporters of hazardous wastes that are imported from the countries listed in 40 CFR 262.58(a)(1) for recovery operations are subject to 40 CFR 262 subpart H. [3745-53-10(D)]</i>		
12.	Does the transporter accept exports of hazardous waste NOT subject to 40 CFR 262 subpart H? If so:	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	a. Did the transporter accept only hazardous waste that conforms to the U.S. EPA "Acknowledgement of Consent"? [3745-53-20(A)(2)(a)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
13.	Does the transporter accept exports of hazardous waste subject to 40 CFR 262 subpart H? If so:	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	a. Was the transporter provided with a "EPA Acknowledgment of Consent" which, except for shipments by rail, was attached to the manifest/shipping paper? [3745-53-20(A)(2)(b)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	b. Was the transporter provided with a tracking document including all information required by 40 CFR 262.84? [3745-53-20(A)(2)(b)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
<i>NOTE: Transporters of hazardous wastes that are destined for recovery operations in the countries listed in 40 CFR 262.58(a)(1) are subject to 40 CFR 262 subpart H. [3745-53-10(D)]</i>		
14.	Does the transporter mix hazardous wastes of different U.S. DOT descriptions by placing them into a single container? If so:	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	a. Did the transporter comply with the generator standards of OAC	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

Facility Name/Inspection Date]

[ID Number]

Hazardous Waste Transporter Requirements Checklist/May 2012

Page 2 of 3

		Chapter 3745-52? [3745-53-10(C)(2)] (Complete generator checklist)	
15.	Does the transporter receive SQG wastes for transport pursuant to a reclamation agreement?		Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	If so, was the following information recorded in a log or shipping paper carried with the shipment as required by 3745-53-20(H):		
	a.	Name, address and U.S. EPA ID # of SQG?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b.	Quantity of waste?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c.	DOT required shipping information?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d.	Date waste was accepted?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
16.	If the transporter receives SQG wastes for transport as described in Question No. 15:		
	a.	Is the record carried when transporting these wastes to the reclamation facility? [3745-53-20(H)(3)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b.	Are records related to the shipments retained for at least three years following expiration of the reclamation agreement? [3745-53-20(H)(4)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
17.	Does the transporter transport waste military munitions? If so:		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	a.	Are the standards applicable to the transportation of waste military munitions in OAC 3745-266-203 met? [3745-53-10(F)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<i>Note: Complete the Transportation of Waste Military Munitions section in the Military Munition Checklist.</i>			