Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

Form Approved OMB No. 2050-0028 Expires 5-30-88 GSA No. 0246-[illegible]

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EPA MoDNR

COMBINED NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

Send to: Missouri Department of Natural Resources, Waste Management Program, P.O. Box 176, Jefferson City, MO 65102

For Official Use Only

Comments

C
C

Installation's EPA ID Number	Approved	Date Received (yr. mo. day)
C F MO 621 0 022830 T/A C 1		

I. Name of Installation

WELDON SPRING SITE REMEDIAL ACTION PROJECT

II. Installation Mailing Address

Street or P.O. Box

C 3 Route 2 HIGHWAY 94 SOUTH

City or Town	State	ZIP Code
C 4 ST. CHARLES	MO	63303

III. Location of Installation

Street or Route Number

C 5 ROUTE 2 HIGHWAY 94 SOUTH

City or Town	State	ZIP Code
C 6 ST CHARLES	MO	63303

IV. Installation Contact

Name and Title (last, first, and job title)	Phone Number (area code and number)
C 7 RODNEY NELSON	314 441 8978

V. Ownership

A. Name of Installation's Legal Owner	B. Type of Ownership (enter code)
C 8 US DEPT of Energy	FC

VI. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)

A. Hazardous Waste Activity

- [x] 1a. Generator
- [ ] 1b. Less than 1,000 kg/mo.
- [ ] 2. Transporter
- [ ] 3. Treater/Storer/Disposer
- [ ] 4. Underground Injection
- [ ] 5. Market or Burn Hazardous Waste Fuel (enter 'X' and mark appropriate boxes below)
  - [ ] a. Generator Marketing to Burner
  - [ ] b. Other Marketer
  - [ ] c. Burner

B. Used Oil Fuel Activities

- [ ] 6. Off-Specification Used Oil Fuel (enter 'X' and mark appropriate boxes below)
  - [ ] a. Generator Marketing to Burner
  - [ ] b. Other Marketer
  - [ ] c. Burner
- [ ] 7. Specification Used Oil Fuel Marketer (or On site Burner) Who First Claims the Oil Meets the Specification

VII. Waste Fuel Burning: Type of Combustion Device (enter 'X' in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.)

[ ] A. Utility Boiler [ ] B. Industrial Boiler [ ] C. Industrial Furnace

VIII. Mode of Transportation (transporters only — enter 'X' in the appropriate box(es))

[ ] A. Air [ ] B. Rail [ ] C. Highway [ ] D. Water [ ] E. Other (specify)

IX. First or Subsequent Notification

Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below

[ ] A. First Notification [x] B. Subsequent Notification (complete item C)

C. Installation's EPA ID Number: MO 621 0 022830

EPA Form 8700-12/MDNR HWG-1 (Revised 7-87)

Continue on reverse

DOCUMENT NUMBER: ____

ID - For Official Use Only

C V | | |

HWG – 1A
Continuation Sheet for Combined Notification of Hazardous Waste Activity

(See reverse side of this form for specific instructions)

I. Name of Installation _____

II. Location of Installation _____

Street or Route Number

_____

City, State, and Zip Code

III. Identification Numbers If Previously Assigned

EPA # | | | | | | | | | | | | MISSOURI # | | | | | |

IV. Hazardous Waste Description

Enter the four-digit EPA waste number from 40 CFR Part 261 for each additional waste stream. Below each EPA waste number which is entered, enter the monthly generation amount in pounds and frequency code A, B, or C.

WASTE ID #				
AMOUNT AND FREQUENCY	lbs	lbs	lbs	lbs
WASTE ID #				
AMOUNT AND FREQUENCY	lbs	lbs	lbs	lbs
WASTE ID #				
AMOUNT AND FREQUENCY	lbs	lbs	lbs	lbs
WASTE ID #				
AMOUNT AND FREQUENCY	lbs	lbs	lbs	lbs
WASTE ID #				
AMOUNT AND FREQUENCY	lbs	lbs	lbs	lbs

V. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature	Name And Official Title(Type Or Print)	Date Signed

Instructions for Completion of HWG — 1A Form

General Instructions — Type or print in black ink. This form is to be used as additional space for "Description of Hazardous Waste" (Item X), of the EPA/DNR Combined Notification of Hazardous Waste Activity form (EPA 8700 —12/MDNR HWG —1), only if additional space is necessary. This form is valid only when attached to a completed EPA 8700 —12/MDNR HWG —1 form.
SPECIAL NOTE: When adding or deleting a waste, a new Combined Notification of Hazardous Waste Activity Form must be completed and submitted. Be certain to accurately reflect all waste streams each time you notify, as the most recent form in our files will be considered as your legal registration.

Item I — Name of Installation — Enter the name of your business or organization as you have on your completed and attached EPA 8700 —12/MDNR HWG —1, item I.

Item II — Location of Installation — Enter the location as you have on your completed and attached EPA 8700 — 12/MDNR HWG —1, item III.

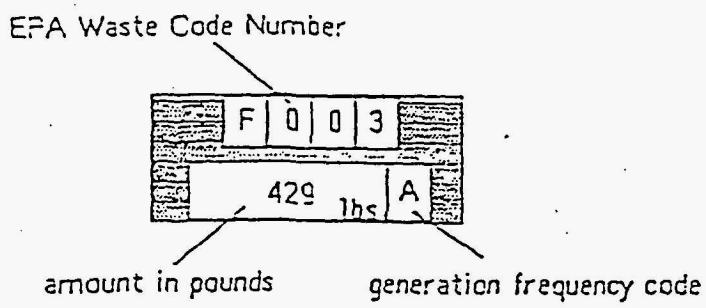
Item III — Identification Numbers — If previously assigned, enter your 12—digit EPA identification number and 5—digit Missouri identification number in the boxes provided.

Item IV — Hazardous Waste Description — Enter the four—digit EPA waste number from 40 CFR Part 261 for each waste stream. Below each EPA waste number which is entered, give the monthly generation rate in pounds and frequency code A, B, or C.

In completing this section use the following generation frequency codes:

A= Continual Generation
B= Intermittent Generation
C= One time only Generation

To assist you in the completion of this section note the following example:



Item V — Certification — This certification must be signed by the owner, operator, or an authorized representative of your installation. An "authorized representative" is a person responsible for the overall operation of the facility, i.e., a plant manager or superintendent, or a person of equal responsibility. *All notifications must include this certification to be complete.*

Instructions for Completion of Combined Notification of Hazardous Waste Activity
Form EPA 8700 –12 / MDNR HWG – 1

General Instructions – Type or print in black ink except item XI, "Signature". Leave a blank box between words. If you must use additional sheets, indicate clearly the number of the item on the form to which the information on the separate sheet applies. If you need additional space for item X, attach a completed form DNR HWG–1A (continuation sheet).

SPECIAL NOTE: When adding or deleting a waste, a new Combined Notification of Hazardous Waste Activity form must be completed and submitted. Be certain to accurately reflect all waste streams each time you notify, as the most recent form in our files will be considered your legal registration.

Items I–III – Name, Mailing Address, and Location of Installation – Complete Items I–III. Please note that the address you give for Item III, "Location of Installation", must be a physical address, *not a post office box or route number.* If the mailing address and physical facility location are the same, you can print "Same" in box for Item III.

Item IV – Installation Contact – Enter the name, title, and business telephone number of the person who should be contacted regarding information submitted on this form.

Item V – Ownership

A) Name: Enter the name of the legal owner(s) of the installation, including the property owner. Use additional sheets if necessary to list more than one owner.

B) Type: Using the codes listed below, indicate the legal status of the owner of the facility:

FF=Federally Owned, Federally Operated
FC=Federally Owned, Operated by a Private Contractor to Federal Government
FP=Federally Owned, Privately Operated
PF=Privately Owned, Constructed for Use by The Federal Government and Operated by The Federal Government
FL=Privately Owned, Leased and Operated by The Federal Government
PI=Privately Owned, Indian Land
FI=Federally Owned, Indian Land
C =County
D =District
M =Municipal
P =Private
S =State

Item VI – Type of Regulated Waste Activity

A) Hazardous Waste Activity: Mark the appropriate box(es) to show which hazardous waste activities are going on at this installation.

1) Generator:

a) If you generate a hazardous waste this is identified by characteristic or listed in 40 *CFR* Part 261, mark an "X" in this box.

b) In addition, *if you generate less than 1000 kilograms of non-acutely hazardous waste per calendar month, mark an "X" in this box.*

2) Transporter: If you move hazardous waste by air, rail, highway, or water mark an "X" in this box. All transporters must complete Item VIII. Transporters do not have to complete Item X of this form, but must sign the certification in Item XI. Refer to Part 263 of 40 *CFR* for an explanation of the federal regulations for hazardous waste transporters.

3) Treater/Storer/Disposer: If you treat, store, or dispose of regulated hazardous waste, mark an "X" in this box. You are reminded to contact the Missouri Department of Natural Resources, Waste Management Program, to request Part A of the RCRA permit application. Refer to Parts 264 and 265 of 40 *CFR* for an explanation of the federal regulations for hazardous waste facility owners/operators. Be sure to also check applicable state regulations.

4) Underground Injection: Persons who generate and/or treat, store, or dispose of hazardous waste must place an "X" in this box if an injection well is located at their installation. An injection well is defined as any hole in the ground, including septic tanks, that is deeper than it is wide and that is used for the subsurface placement of fluids.

5) Market or Burn Hazardous Waste Fuel: If you market or burn hazardous waste fuel, place an "X" in this box. Then mark the appropriate boxes to indicate your specific activity. *If you mark "Burner" you must complete Item VII- "Type of Combustion Device".*

Note: Generators are required to notify for waste-as-fuel activities only if they market directly to the burner.

"Other Marketer" is defined as any person, other than the generator marketing his hazardous waste, who markets hazardous waste fuel.

B) Used Oil Fuel Activities

Mark an "X" in the appropriate box(es) below to indicate which used oil fuel activities are taking place at this installation.

6) Off-Specification Used Oil Fuel: If you market or burn off-specification used oil, the place an "X" in this box. Then mark the appropriate boxes to indicate your specific activity. *If you mark "Burner" you must complete Item VII - "Type of Combustion Device".*

Note: Used oil generators are required to notify only if marketing directly to the burner.

"Other Marketer" is defined as any person, other than a generator marketing his or her used oil, who markets used oil fuel.

7) Specification Used Oil Fuel: If you are the first to claim that the used oil meets the specification established in 40 *CFR* Part 266.40(e) and is exempt from further regulation, you must mark an "X" in this box.

Item VII — Waste—Fuel burning. Type of Combustion Device — Enter an "X" in all appropriate boxes to indicate type(s) of combustion devices in which hazardous waste fuel or off—specification used oil fuel is burned. (Refer to definition section for complete description of each device.)

Item VIII — Mode of Transportation — Complete this item only if you are a transporter of hazardous waste. Mark an "X" in each appropriate box to indicate the method(s) of transportation you use.

Item IX — First or Subsequent Notification — Place an "X" in the appropriate box to indicate whether this is your first or a subsequent notification. If you have filed a previous notification, enter your EPA Identification Number in the boxes provided.

Note: When the owner of a facility changes, the new owner must notify of the change even if the previous owner has already received a U.S. EPA Identification Number. Because the U.S. EPA number is "site specific", the new owner will keep the existing ID number. If the facility moves to another location, the owner/operator must notify of this change. In this instance, a new U.S. EPA Identification Number will be assigned, since the facility has changed locations.

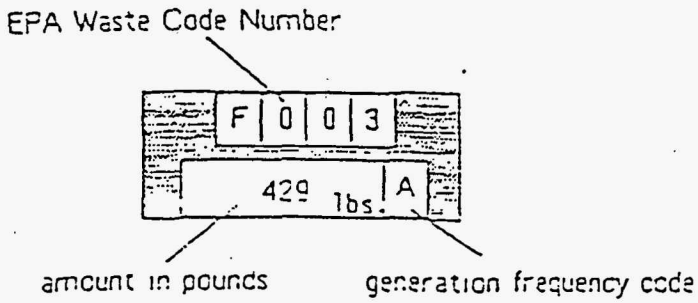
Item X — Description of Hazardous Waste — Only persons involved in hazardous waste activity [Item VI(A)] need to complete this item. Transporters requesting a U.S. EPA Identification Number do not need to complete this item, but must sign the "Certification" in Item XI.

You will need to refer to the federal regulations, Title 40 *CFR* Part 261 in order to complete this section. Part 261 identifies those wastes that EPA defines as hazardous. You must also refer to Missouri chapter 10 CSR 25—4.261 for any additional state listed waste streams.

In completing this section use the following generation frequency codes:

A= Continual Generation
B= Intermittent Generation
C= One time only Generation

To assist you in the completion of this section note the following example:



Section A — If you handle hazardous wastes that are listed in the "nonspecific sources" category in Part 261.31, enter the appropriate 4—digit numbers in the

boxes provided. Below each waste code number, enter the monthly generation rate in pounds, and, the generation frequency code.

Section B — If you handle hazardous wastes that are listed in the "specific industrial sources" category in Part 261.32, enter the appropriate four—digit numbers in the boxes provided. Below each waste code number, enter the monthly generation rate in pounds, and, the generation frequency code.

Section C — If you handle any of the "commercial chemical products" listed as wastes in Part 261.33, enter the appropriate four—digit numbers in the boxes provided. Below each waste code number, enter the monthly generation rate in pounds and, the generation frequency code.

Section D — Disregard, Since EPA has not yet published infectious waste regulations.

Section E — If you handle hazardous wastes which are not listed in any of the categories above, but do possess a hazardous characteristic, you should describe these wastes by their hazardous characteristic. An explanation of each characteristic is found in Part 261.21—261.24. Place an "X" in the box of each characteristic waste that you handle. Below each waste code number, enter the monthly generation rate in pounds and, the generation frequency code.

If you need space for additional waste streams use the Continuation Sheet Form MDNR HWG —1A.

Missouri Required Information

Missouri Generator ID Number — If your business has been previously assigned a 5—digit Missouri Generator Identification Number enter it here.

Principle Business Activity — Enter a description of the activity which best typlifies your business, i.e., manufacture steel chairs and related products.

Standard Industrial Classification Number — Enter the 4 — digit standard industrial classification number(s) in order of descending importance.

Generate Less Than 100 kilograms (220 pounds)/month — Check this box if the total of all hazardous waste streams is less than this amount.

Item XI — Certification — This certification must be signed by the owner, operator, or an authorized representative of your installation. An "authorized representative" is a person responsible for the overall operation of the facility, i.e., a plant manager or superintendent, or a person of equal responsibility. *All notifications must include this certification to be complete.*