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G-000-104.177

NOTIFICATION OF REGULATED WASTE ACTIVITY

08/16/95

OEPA
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LETTER

DOE-FN



State of Ohio Environmental Protection Agency

P.O. Box 1049, 1800 WaterMark Dr.
Columbus, Ohio 43266-0149
(614) 644-3020
FAX (614) 644-2329

FERNALD
LOG I-3395

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AUG 23 10 39 AM '95

George V. Voinovich
Governor

FILE:
LIBRARY:

Date: AUG 16 1995

Dear Sir/Madam:

Please find a copy the United States Environmental Protection Agency (U.S. EPA) Identification (ID) number that was assigned. The identification number issued by the agency can be used for only this specific *one-time event*. The use of the provisional number for any other purpose is illegal. After completion of the job, please notify the Ohio EPA **in writing**, at the address below, to have the number deactivated from our list. Please indicate the following: *Facility Name, Facility's Physical Address, and the U.S. EPA ID number* requesting to be deactivated. If there is a possibility of regular hazardous waste generation in the future at the same site, it is recommended that you obtain a permanent U.S. EPA ID number for your site. A permanent number is obtained by completing a Notification of Regulated Waste Activity (8700-12) form. The form and booklet can be obtained from the Ohio EPA at the address below.

It is possible that, depending on the type of waste and the quantity that was shipped, you may be subject to reporting requirements. Ohio hazardous waste rules require anyone who generates 1000 kg (or 2200 lbs, or approximately 263 liquid gallons) of non-acute hazardous waste in a calendar month to submit a *Generator Annual Report* to the Ohio EPA. It is **your responsibility** to determine if the reporting requirements are applicable to you and to notify the Ohio EPA. Failure to submit reports may result in enforcement action. If there are any questions regarding reporting requirements, contact Ms. Paula Canter at the phone number listed below.

If you have any questions regarding the identification number, please contact the Data Management Section at 614/644-2977. The mailing address is:

**Ohio EPA
Division of Hazardous Waste Management
Data Management Section
1800 WaterMark Drive
Columbus, Ohio 43215-1099**

Thank you for your cooperation in the hazardous waste program.

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

Please refer to the instructions for Filling Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received
(For Official Use Only)

AUG 09 1995

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)

A. First Notification B. Subsequent Notification
(Complete Item C)

C. Installation's EPA ID Number:

0 HR 0000 05850

II. Name of Installation (Include company and specific site name)

KIMBLE PROPERTY

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street:

4090 STILLWELL ROAD

Street (Continued)

City or Town

HAMILTON

State

OH

Zip Code

45013-

County Code

017

County Name

BUTLER

IV. Installation Mailing Address (See Instructions)

Street or P.O. Box

4090 STILLWELL ROAD

City or Town

HAMILTON

State

OH

Zip Code

45013-

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (Last)

ETKIND

(First)

HOWARD

Job Title

SAFETY ENGR

Phone Number (Area Code and Number)

513-648-3158

VI. Installation Contact Address (See Instructions)

A. Contract Address Location: Mailing: Other

B. Street or P.O. Box

7400 WILLEY ROAD

City or Town

FERNALD

State

OH

Zip Code

45030-

VII. Ownership (See Instructions)

A. Name of installation's Legal Owner

DAN KIMBLE

Street, P.O. Box, or Route Number

4090 STILLWELL RD

City or Town

HAMILTON

State

OH

Zip Code

45013-

Phone Number (Area Code and Number)

513-863-3052

B. Land Type

P

C. Owner Type

P

D. Change of Owner Indicator

Yes No

(Date Changed)

Month: Day: Year:

N/P

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8/14/95

ID - For Official Use Only									

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes; Refer to Instructions)

A. Hazardous Waste Activity		B. Used Oil Recycling Activities	
<p>1. Generator (See Instructions)</p> <p><input checked="" type="checkbox"/> a. Greater than 1000kg/mo (2,200 lbs.)</p> <p><input type="checkbox"/> b. 100 to 1000 kg/mo (200-2,200 lbs.)</p> <p><input type="checkbox"/> c. Less than 100 kg/mo (220 lbs.)</p> <p>2. Transporter (Indicate Mode in boxes 1-5 below)</p> <p><input type="checkbox"/> a. For own waste only</p> <p><input type="checkbox"/> b. For commercial purposes</p> <p>Mode of Transportation</p> <p><input type="checkbox"/> 1. Air</p> <p><input type="checkbox"/> 2. Rail</p> <p><input type="checkbox"/> 3. Highway</p> <p><input type="checkbox"/> 4. Water</p> <p><input type="checkbox"/> 5. Other - specify</p>	<p><input type="checkbox"/> 3. Treater, Storer, Disposer (at Installation) Note: A permit is required for this activity; see instructions.</p> <p>4. Hazardous Waste Fuel</p> <p><input type="checkbox"/> a. Generator Marketing to Burner</p> <p><input type="checkbox"/> b. Other Marketers</p> <p><input type="checkbox"/> c. Boiler and/or Industrial Furnace</p> <p><input type="checkbox"/> 1. Smelter Deferral</p> <p><input type="checkbox"/> 2. Small Quantity Exemption</p> <p>Indicate Type of Combustion Device(s)</p> <p><input type="checkbox"/> 1. Utility Boiler</p> <p><input type="checkbox"/> 2. Industrial Boiler</p> <p><input type="checkbox"/> 3. Industrial Furnace</p> <p><input type="checkbox"/> 5. Underground Injection Control</p>	<p>1. Used Oil Fuel Marketer</p> <p><input type="checkbox"/> a. Marketer Directs Shipment of Used Oil to Off-Specification Burner</p> <p><input type="checkbox"/> b. Marketer Who First Claims the Used Oil Meets the Specifications</p> <p>2. Used Oil Burner - Indicate Type(s) of Combustion Device(s)</p> <p><input type="checkbox"/> a. Utility Boiler</p> <p><input type="checkbox"/> b. Industrial Boiler</p> <p><input type="checkbox"/> c. Industrial Furnace</p> <p>3. Used Oil Transporter - Indicate Type(s) of Activity(ies)</p> <p><input type="checkbox"/> a. Transporter</p> <p><input type="checkbox"/> b. Transfer Facility</p> <p>4. Used Oil Processor/Re-refiner - Indicate Type(s) of Activity(ies)</p> <p><input type="checkbox"/> a. Process</p> <p><input type="checkbox"/> b. Re-refine</p>	

IX. Description of Hazardous Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. (Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles; See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001)	2. Corrosive (D002)	3. Reactive (D003)	4. Toxicity Characteristic (List specific EPA hazardous waste number(s) for the Toxicity characteristic contaminant(s))
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> D004 D007

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33; See instructions if you need to list more than 12 waste codes.)

1	2	3	4	5	6
7	8	9	10	11	12

C. Other Wastes. (State or other wastes requiring a handler to have an I.D. number; See instructions.)

1	2	3	4	5	6

X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature <i>Howard W. Etkind</i>	Name and Official Title (Type or print) Howard W. Etkind, Safety Engineer	Date Signed 8/4/95
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XI. Comments

ONE-TIME GENERATOR - REMEDIATION
EPA ID NUMBER CONTACT - HOLLY CLANCY (615) 241-6031

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)