

LARGE QUANTITY GENERATOR REQUIREMENTS

COMPLETE AND ATTACH A PROCESS DESCRIPTION SUMMARY

CESQG:< 100 Kg. (approximately 25-30 gallons) of waste in a calendar month

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*

POLLUTION PREVENTION

Note to the Inspector: This checklist has been developed to help the division in gathering general information about the pollution prevention (P2) practices that the company may have initiated or attempted to initiate. The checklist is also used to:

- ◇ Facilitate P2 discussions;
- ◇ Identify barriers to P2;
- ◇ Define the P2 universe;
- ◇ Identify the need for future P2 initiatives;
- ◇ Identify partnership opportunities; and
- ◇ Link companies with better P2 resources.

As a prelude to completing this checklist the inspector should use the following list of questions as a way to initiate a dialogue concerning P2:

1. Have you tried to reduce the volume of waste (hazardous and nonhazardous) that you generate?
2. What is the largest waste stream that you generate?
3. How important would it be to you to eliminate that waste stream?
4. Does your company understand the reduced regulatory burden and cost saving benefits that eliminating or reducing a waste stream can have?
5. Could you use better housekeeping practices to reduce the amount of waste that you generate?

If the company responds with one of the answers below, the appropriate box should be checked. If the company's response does not correspond to one of the options below, please record the answer in the space provided in the remarks section.

1. Has the company undertaken any P2 activities to reduce the amount of waste generated? Yes No N/A RMK#

a. If so, what has the company done to minimize waste generation?

- A change in the process resulting in less waste.
- A change in the product resulting in less waste.
- Use of fewer and less toxic hazardous raw materials.
- Better operations/improved housekeeping.
- On-site recycling/reuse of hazardous materials.
- Sending waste off-site for recycling/reuse.
- Other activities (specify):

b. **If so**, what wastes have been addressed?

- | | |
|--|--|
| <ul style="list-style-type: none"><input type="checkbox"/> Solvents<input type="checkbox"/> Paint related wastes<input type="checkbox"/> Industrial process wastes (sludges, slags, contaminated wastes waters, etc.)<input type="checkbox"/> Contaminated oils/hydraulic fluids<input type="checkbox"/> Off-spec chemicals<input type="checkbox"/> Shop rags<input type="checkbox"/> Other (specify): | <ul style="list-style-type: none"><input type="checkbox"/> Waste water<input type="checkbox"/> Solid waste (paper, plastic, metal, wood, blasting material)<input type="checkbox"/> Air emissions<input type="checkbox"/> Energy use<input type="checkbox"/> Fluorescent light bulbs<input type="checkbox"/> Used batteries |
|--|--|

c. If they haven't minimized waste are there barriers that are preventing them from doing it?

- Lack of information about practical alternatives.
- Lack of capital to make process changes.
- Lack of internal management support.
- The company does not generate enough waste to consider P2.
- Other reason given (specify):

- | | | |
|----|---|-----------------------------|
| 2. | Does the company plan to do P2 activities in the future? | ___Yes ___No ___N/A ___RMK# |
| 3. | Would the company be interested in receiving additional information from Ohio EPA about P2? | ___Yes ___No ___N/A ___RMK# |
| 4. | Did you give the company information about P2 during the inspection? | ___Yes ___No ___N/A ___RMK# |

5. Would the company like a P2 assessment? Yes No N/A RMK#

A. If yes, provide information that makes the company a good candidate for an assessment (i.e., known specific P2 opportunities exist, the company is willing to cooperate and commit resources to the assessment, the company fully understands DHWM's P2 assessment process, etc.)

B. If no, list the reasons the facility representative gave for not wanting an assessment.

If the company would like a P2 assessment done at their facility, the inspector must give the company representative a copy of the Pollution Prevention Assessments for Hazardous Waste Generators document and discuss it with them (Attachment III of the P2 Assessment Procedures Manual at: <http://www.epa.state.oh.us/dhwm/pdf/P2AssesmentHWGeneraotrs.pdf>).

REMARKS

LARGE QUANTITY GENERATOR REQUIREMENTS

GENERAL REQUIREMENTS

1. Have all wastes generated at the facility been adequately evaluated? [3745-52-11] Yes ___ No N/A ___RMK#___
2. Has the generator obtained a U.S. EPA identification number? [3745-52-12] Yes ___ No N/A ___RMK#___
3. Were annual reports filed with Ohio EPA on or before March 1st? [3745-52-41] Yes ___ No N/A ___RMK#___

WASTE IMPORT/EXPORT REQUIREMENTS

4. Does the generator import or export hazardous waste? If so: Yes___ No___ N/A ___RMK#___
- a. Has the generator notified U.S. EPA of export/import activity? [3745-52-53] Yes ___ No N/A ___RMK#___
- b. Has the generator complied with special manifest requirements? [3745-52-54] Yes ___ No N/A ___RMK#___
- c. For manifests that have not been returned to the generator: has an exception report been filed? [3745-52-55] Yes ___ No N/A ___RMK#___
- d. Has an annual report been submitted to U.S. EPA? [3745-52-56] Yes ___ No N/A ___RMK#___
- e. Are export related documents being maintained on-site? [3745-52-57] Yes ___ No N/A ___RMK#___

GENERATOR CLOSURE REQUIREMENTS

5. Has the generator closed any <90-day accumulation unit(s) since the date of the last inspection? If so: Yes___ No___ N/A ___RMK#___
- a. Describe the unit(s) which the generator has closed.

b. Does closure appear to have met the closure performance standard of 3745-66-11? [3745-52-34(A)(1)]

Yes ___ No N/A ___ RMK# ___

c. Please provide a description of the documentation provided by the generator to demonstrate that closure was completed in accordance with the closure performance standards.

NOTE: *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]*

REMARKS

MANIFEST REQUIREMENTS

You must start this part of the inspection by telling the company representative about the certification statement on the hazardous waste manifest using the following question and statement:

Are you aware of what the statement that you sign on the manifest says? Yes___ No___

If the answer is no, show them what the statement says using a signed manifest.

NOTE: While the statement is a certification that a P2 strategy is in place, signing the statement does not establish any legal obligations with which the company must comply. In other words, there is no violation of the hazardous waste rules if they sign the manifest and they don't have a program in place.

1. Have all hazardous wastes shipped off-site been accompanied by a manifest? (U.S. EPA Form 8700-22) [3745-52-20(A)] Yes ___ No N/A ___RMK#___

2. Have items (1) through (20) of each manifest been completed? [3745-52-20(A)] Yes ___ No N/A ___RMK#___

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)]

3. Does each manifest designate at least one permitted disposal facility? [3745-52-20(B)] Yes ___ No N/A ___RMK#___

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)].

4. Since the date of the last inspection, has the transporter been unable to deliver a shipment of hazardous waste to the designated facility? If so: Yes___ No___ N/A ___RMK#___

a. Did the generator designate an alternate TSD facility or give the transporter instructions to return the waste? [3745-52-20(D)] Yes ___ No N/A ___RMK#___

5. Have the manifests been signed by the generator and initial transporter? [3745-52-23(A)(1)(2)] Yes ___ No N/A ___RMK#___

6. Has the generator received a return copy of each completed manifest within 35 days of being accepted by the transporter? If not: Yes___ No___ N/A ___RMK#___

a. Did the generator contact the transporter and/or TSD facility to check on the status of the waste? [3745-52-42(A)(1)] Yes ___ No N/A ___ RMK# ___

b. If the manifest was not received within 45 days, did the generator file an exception report with Ohio EPA? [3745-52-42(A)(2)] Yes ___ No N/A ___ RMK# ___

7. Are signed copies of all manifests and any exception reports being retained for at least three years? [3745-52-40] Yes ___ No N/A ___ RMK# ___

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.*

REMARKS

PERSONNEL TRAINING

1. Does the generator keep records required by 3745-65-16(D) including:
- a. Job titles, as they relate to hazardous waste management, and the name of each employee filling each job? Yes ___ No N/A ___ RMK# ___
 - b. Job descriptions, including requisite skill, education, or other qualifications, and duties of facility personnel assigned to each position? Yes ___ No N/A ___ RMK# ___
 - c. Type and amount of both introductory and continuing training to be given to each person filling a position? Yes ___ No N/A ___ RMK# ___
 - d. Documentation that personnel have completed the training or job experience required under 3745-65-16(A)(B) & (C)? Yes ___ No N/A ___ RMK# ___

NOTE: *If the facility's business practices precludes written job titles/descriptions, they should be able to identify, by name, all personnel who are involved with hazardous waste management, and the training/experience that they receive initially and annually. Item 9 on the next page can be used to document that all necessary employees have been trained.*

2. 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 ___ No N/A ___ RMK# ___
3. Does the personnel training program include instruction in the following areas to ensure that facility personnel are able to respond effectively to emergencies by familiarizing them with: [3745-65-16(A)(3)]
- a. Emergency procedures? Yes ___ No N/A ___ RMK# ___
 - b. Emergency equipment? Yes ___ No N/A ___ RMK# ___
 - c. Emergency systems? Yes ___ No N/A ___ RMK# ___
4. Does emergency training described in 3(a), (b) and (c) above include, *where applicable*: [3745-65-16(A)(3)(a-f)]

- a. Procedures for using, inspecting, repairing and replacing emergency and monitoring equipment? Yes ___ No N/A ___ RMK# ___
- b. Key parameters for automatic waste feed cut-off systems? Yes ___ No N/A ___ RMK# ___
- c. Communication or alarm system? Yes ___ No N/A ___ RMK# ___
- d. Response procedures for fire/explosions? Yes ___ No N/A ___ RMK# ___
- e. Response to groundwater contamination incidents? Yes ___ No N/A ___ RMK# ___
- f. Shutdown procedures? Yes ___ No N/A ___ RMK# ___
5. Is the personnel training program directed by a person trained in hazardous waste management procedures? [3745-65-16(A)(2)] Yes ___ No N/A ___ RMK# ___
6. Do new employees receive training within six months after the date of hire (or assignment to a new position)? [3745-65-16(B)] Yes ___ No N/A ___ RMK# ___
7. Does the generator provide annual refresher training to employees? [3745-65-16(C)] Yes ___ No N/A ___ RMK# ___
8. Are training records for current personnel kept until closure of the facility? [3745-65-16(E)] Yes ___ No N/A ___ RMK# ___
9. 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 ___ No N/A ___ RMK# ___
10. **Optional:** 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 manifests, etc.

Job Performed

Name of Employee

Date(s) Trained

REMARKS

CONTINGENCY PLAN

1. Does the generator have a contingency plan which describes the following: [3745-65-52(A) through (F)]
- a. Actions to be taken in response to fires, explosions or any unplanned release of hazardous waste? Yes ___ No N/A ___RMK#___
- b. Arrangements with emergency authorities? [3745-65-37] Yes ___ No N/A ___RMK#___
- c. A current list of names, addresses and telephone numbers (office and home) of all persons qualified to act as emergency coordinator? Yes ___ No N/A ___RMK#___
- d. A list of all emergency equipment, including: location, physical description and brief outline of capabilities? Yes ___ No N/A ___RMK#___
- e. An evacuation plan for facility personnel where there is a possibility that evacuation may be necessary? Yes ___ No N/A ___RMK#___

NOTE: If the facility already has a "Spill Prevention, Control and Countermeasures Plan" under 40 CFR Part 112 or 40 CFR Part 1510, 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. [3745-65-52(B)]

2. Is the plan designed to minimize hazards to human health or the environment from fires, explosions or any unplanned release of hazardous waste? [3745-65-51(A)] Yes ___ No N/A ___RMK#___
3. 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 ___ No N/A ___RMK#___
4. Has the generator revised the plan in response to rule changes, facility, equipment and personnel changes, failure to the plan or as required by the Director? [3745-65-54] Yes ___ No N/A ___RMK#___

EMERGENCY COORDINATOR

5. Is an emergency coordinator available at all times
(on-site or on-call)? [3745-65-55]

Yes ___ No N/A ___ RMK# ___

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

6. Has there been a fire, explosion or release of hazardous waste or hazardous waste constituents since the last inspection? If so: Yes ___ No ___ N/A ___ RMK# ___
- a. Was the contingency plan implemented? [3745-65-51(B)] Yes ___ No N/A ___ RMK# ___
- b. Did the facility follow the emergency procedures in 3745-65-56(A) through (H)? Yes ___ No N/A ___ RMK# ___
- c. Did the facility submit a report to the Director within 15 days of the incident as required by 3745-65-56(J)? Yes ___ No N/A ___ RMK# ___

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.

REMARKS

PREPAREDNESS AND PREVENTION [3745-52-34(A)(4)]

- 1. Is the facility operated to minimize the possibility of fire, explosion, or any unplanned release of hazardous waste? [3745-65-31] Yes ___ No N/A ___RMK#___

- 2. Does the generator have the following equipment at the facility, if it is required due to actual hazards associated with the waste: [3745-65-32(A)(B)(C)(D)]
 - a. Internal alarm system? Yes ___ No N/A ___RMK#___
 - b. Emergency communication device? Yes ___ No N/A ___RMK#___
 - c. Portable fire control, spill control and decon equipment? Yes ___ No N/A ___RMK#___
 - d. Water of adequate volume/pressure? Yes ___ No N/A ___RMK#___

- 3. Is emergency equipment tested (inspected) as necessary to ensure its proper operation in time of emergency? [3745-65-33] Yes ___ No N/A ___RMK#___

- 4. Are emergency equipment tests (inspections) recorded in a log or summary: [3745-65-33] Yes ___ No N/A ___RMK#___

- 5. Do personnel have immediate access to a communication device when handling hazardous waste (*unless the device is not required under 3745-65-32*)? [3745-65-34] Yes ___ No N/A ___RMK#___

- 6. Is adequate aisle space provided for unobstructed movement of emergency or spill control equipment? [3745-65-35] Yes ___ No N/A ___RMK#___

- 7. Has the generator attempted to familiarize emergency authorities with possible hazards and facility layout? [3745-65-37(A)] Yes ___ No N/A ___RMK#___
 - a. Where authorities have declined to enter into arrangements or agreements, has the generator documented such a refusal? [3745-65-37(B)] Yes ___ No N/A ___RMK#___

REMARKS

GENERATOR ACCUMULATION

1. Has the generator accumulated hazardous wastes on-site in excess of 90 days without a permit or an extension from the director? [3745-52-34; ORC §3734.02(E)(F)] Yes No ___ N/A ___ RMK# ___
2. Is the facility a metal finisher that generates waste water treatment sludge with a F006 waste code? If yes: Yes ___ No ___ N/A ___ RMK# ___

NOTE: If yes, they may accumulate F006 waste on-site for up to 180 days; or up to 270 days if they must transport the F006 waste over 200 miles for off-site metals recovery; without an Ohio hazardous waste permit, provided that they meet these special conditions (OAC 3745-52-34(G) and (H)):

- a. The generator has implemented pollution prevention practices that reduce the amount of any hazardous substances, pollutants or contaminants entering F006 or otherwise released to the environment prior to its recycling (see your P2 coordinator for a copy of Federal Register 3/00 for a listing of examples of P2 measures, the facility should be prepared to demonstrate this request); Yes ___ No N/A ___ RMK# ___
- b. The F006 waste is legitimately recycled through metals recovery. Yes ___ No N/A ___ RMK# ___
- c. No more than 20,000 kg. of F006 is accumulated on-site at any one time. Yes ___ No N/A ___ RMK# ___
- d. The facility complies with the applicable management standards for containers, tanks or containment buildings for LQGs. Yes ___ No N/A ___ RMK# ___

SATELLITE ACCUMULATION AREA REQUIREMENTS [3745-52-34(C)(1)]

3. Does the generator ensure that satellite accumulation area(s):
- a. Are at or near a point of generation? Yes ___ No N/A ___ RMK# ___
- b. Are under the control of the operator of the process generating the waste? Yes ___ No N/A ___ RMK# ___
- c. Do not exceed a total of 55 gallons of hazardous waste? Yes ___ No ___ N/A ___ RMK# ___

- d. Do not exceed one quart of acutely hazardous waste at any one time? Yes ___ No N/A ___ RMK# ___
Yes ___ No N/A ___ RMK# ___
- e. Containers are marked with the words "Hazardous Waste" or other words identifying the contents? Yes ___ No N/A ___ RMK# ___

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. The inspector should refer to Guidance Document #DHWM-008, Satellite Accumulation Under Ohio Hazardous Waste Rules.

4. Is the generator accumulating hazardous waste(s) in excess of the amounts listed in either 2(c) or 2(d)? If so: Yes ___ No ___ N/A ___ RMK# ___
- a. Did the generator comply with 3745-52-34(A) or other applicable generator requirements within three days? Yes ___ No N/A ___ RMK# ___
- b. Did the generator mark the container(s) holding excess with the accumulation date when the 55 gallon (one quart) limit was exceeded? Yes ___ No N/A ___ RMK# ___

USE AND MANAGEMENT OF CONTAINERS

5. Has the generator marked containers with the words "Hazardous Waste?" [3745-52-34(A)(3)] Yes ___ No N/A ___ RMK# ___
6. Is the accumulation date on each container? [3745-52-34(A)(2)] Yes ___ No N/A ___ RMK# ___
7. Are hazardous wastes stored in containers which are:
- a. Closed (except when adding/removing wastes)? [3745-66-73(A)] Yes ___ No N/A ___ RMK# ___
- b. In good condition? [3745-66-71] Yes ___ No N/A ___ RMK# ___
- c. Compatible with wastes stored in them? [3745-66-72] Yes ___ No N/A ___ RMK# ___

- d. Handled in a manner which prevents rupture/leakage? [3745-66-73(B)] Yes ___ No N/A ___ RMK# ___
8. Is the container accumulation area(s) inspected weekly? [3745-66-74] (*Note location in general information section of checklist*) Yes ___ No N/A ___ RMK# ___
- a. Are inspections recorded in a log or summary? [3745-66-74] Yes ___ No N/A ___ RMK# ___
9. For ignitable and/or reactive hazardous waste(s):
- a. Are containers located at least 50 feet (15 meters) from the facility's property line? [3745-66-76] Yes ___ No N/A ___ RMK# ___
- b. Are containers stored separately from other materials which may interact with the waste in a hazardous manner? [3745-66-77(C)] Yes ___ No N/A ___ RMK# ___

PRE-TRANSPORT REQUIREMENTS

10. Does the generator package/label its hazardous waste in accordance with the applicable DOT regulations? [3745-52-30, -52-31 and -52-32(A)] Yes ___ No N/A ___ RMK# ___
11. Does each container <110 gallons have a completed hazardous waste label? [3745-52-32(B)] Yes ___ No N/A ___ RMK# ___
12. Before off-site transportation, does the generator placard or offer the appropriate DOT placards to the initial transporter? [3745-52-33] Yes ___ No N/A ___ RMK# ___

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