

File Room Document Transmittal Sheet

##

Your Name: MEL DEEVER
EPA ID: NCD060299765
Facility Name: TRANSCONTINENTAL GAS PIPE LINE 155
Document Group: General (G)
Document Type: Notification 8700 (8700)
Description:
Date of Doc: 1/13/2016
Author of Doc: TYE RAGLE

File Room Use Only

Date Recieved by File Room:

Date Scanned:

Month	Day	Year
3	15	16

NCD060299765

Scanner's Initials:

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Waste Management
ENVIRONMENTAL QUALITY

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Director

February 19, 2016

MICHAEL BARRON
TRANSCONTINENTAL GAS PIPE LINE 155
650 BECKY HILL RD
LEXINGTON, NC 27295

RE: EPA ID # NCD060299765 - TRANSCONTINENTAL GAS PIPE LINE 155

Dear Facility Contact:

The North Carolina Hazardous Waste Section has received Subsequent Notification from your facility. Our office has accepted and processed the changes. Attached is a RCRA Site Detail Report for your review to ensure that the information is accurate.

If you have any questions or need assistance, please feel free to contact Melodi Deaver at (919)-707-8204.

Sincerely,

Julie Woosley, Chief
Hazardous Waste Section

cc: Central Files (General)

IBEAM - RCRA Site Detail

Report run on: February 19, 2016

NCD060299765 TRANSCONTINENTAL GAS PIPE LINE 155

County: DAVIDSON Source Type: S Seq. Number: 41 Receive Date: 26-Jan-2016

Location 650 BECKY HILL RD Address: LEXINGTON, NC 27295	Mailing 650 BECKY HILL RD Address: LEXINGTON, NC 27295
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Contact Person MICHAEL BARRON For Source Information (336) 787-5582X2223	650 BECKY HILL RD LEXINGTON, NC 27295 US
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Owner (current) TRANSCONTINENTAL GAS PIPE LINE CO	PO BOX 1396 HOUSTON, TX 77251	Type: P
From: 12/05/1950	To:	Phone: (713) 215-2000

Operator (current) TRANSCONTINENTAL GAS PIPE LINE CO	PO BOX 1396 HOUSTON, TX 77251	Type: P
From: 12/05/1950	To:	Phone: (713) 215-2000

Land Type: P	Non Notifier : E	Commercial Availability:	Tsd Date:
Accessibility:	No. Employees : 0	State District:	

Regulated Waste Activities

Hazardous Waste Generator Status - Federal: Conditionally Exempt SQG; State: Conditionally Exempt SQG

Transfer Facility:	No	Used Oil Activities	
Other Hazardous Waste Generator Activities		Used Oil Transport Activity	Off-Specification Used Oil Burner: No
Importer Activity:	No	Transporter:	No
Mixed Waste Generator:	No	Transfer Facility:	No
Transporter Activity:	No	Used Oil Processor and/or Re-refiner Activity	Marketer who direct shipment off-specification used oil to off-specification used oil burner: No
TSD Activity:	Yes	Processor:	No
Recycler Activity:	No	Refiner:	No
Exempt Boiler and/or Industrial Furnace		Underground Injection Control:	No
Small Quantity Onsite Burner Exemption:	No	Destination Facility for Universal Waste:	No
Smelting, melting, Refining Furnace Exemption:	No		

Certification Information

First Name : TYF	Title	MGR OPER
Last Name : RAGLE	Date Signed	01/13/2016

NAICS Codes

486210

Comments

UPDATED 8700-12 DATED 1/13/2016 SITE CONTACT PERSON INFOR, WASTE CODES. MD 2/19/2016

Katharine

KLO
1-28-2016

RECEIVED
JAN 2016
Hazardous Waste Section



United States Environmental Protection Agency
RCRA SUBTITLE C SITE IDENTIFICATION FORM

SEND COMPLETED FORM TO:
The Appropriate State or Regional Office.

1. Reason for Submittal

MARK ALL BOX(ES) THAT APPLY

- Reason for Submittal:**
- To provide an Initial Notification (first time submitting site identification information / to obtain an EPA ID number for this location)
 - To provide a Subsequent Notification (to update site identification information for this location)
 - As a component of a First RCRA Hazardous Waste Part A Permit Application
 - As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____)
 - As a component of the Hazardous Waste Report (If marked, see sub-bullet below)
 - Site was a TSD facility and/or generator of >1,000 kg of hazardous waste, >1 kg of acute hazardous waste, or >100 kg of acute hazardous waste spill cleanup in one or more months of the report year (or State equivalent LQG regulations)

2. Site EPA ID Number
EPA ID Number [N][C][D][0][6][0][2][9][9][7][6][5]

3. Site Name
Name: Transcontinental Gas Pipe Line Company, LLC - Compressor Station 155

4. Site Location Information
Street Address: 650 Becky Hill Road
City, Town, or Village: Lexington **County:** Davidson
State: NC **Country:** USA **Zip Code:** 27295

5. Site Land Type Private County District Federal Tribal Municipal State Other

6. NAICS Code(s) for the Site (at least 5-digit codes)

A.	[4][8][6][2][1][0]	C.	[][][][][][]
B.	[][][][][][]	D.	[][][][][][]

7. Site Mailing Address
Street or P.O. Box: Same as Item 4
City, Town, or Village:
State: **Country:** **Zip Code:**

8. Site Contact Person

First Name: Michael **MI:** T **Last:** Barron
Title: Supervisor Operations
Street or P.O. Box: 650 Becky Hill Road
City, Town or Village: Lexington
State: NC **Country:** USA **Zip Code:** 27295
Email: michael.t.barron@williams.com
Phone: 336-787-5582 **Ext.:** 2223 **Fax:** ~~787-787-4982~~ 336

9. Legal Owner and Operator of the Site

A. Name of Site's Legal Owner: Transcontinental Gas Pipe Line Company, LLC **Date Became Owner:** 12/05/1950

Owner Type: Private County District Federal Tribal Municipal State Other

Street or P.O. Box: P.O. Box 1396
City, Town, or Village: Houston **Phone:** 713-215-2000
State: TX **Country:** USA **Zip Code:** 77251

B. Name of Site's Operator: Transcontinental Gas Pipe Line Company, LLC **Date Became Operator:** 12/05/1950

Operator Type: Private County District Federal Tribal Municipal State Other

10. Type of Regulated Waste Activity (at your site)
 Mark "Yes" or "No" for all current activities (as of the date submitting the form); complete any additional boxes as instructed.

A. Hazardous Waste Activities; Complete all parts 1-10.

- Y N **1. Generator of Hazardous Waste**
 If "Yes," mark only one of the following – a, b, or c.
- a. LQG: Generates, in any calendar month, 1,000 kg/mo (2,200 lbs/mo.) or more of hazardous waste; or Generates, in any calendar month, or accumulates at any time, more than 1 kg/mo (2.2 lbs/mo) of acute hazardous waste; or Generates, in any calendar month, or accumulates at any time, more than 100 kg/mo (220 lbs/mo) of acute hazardous spill cleanup material.
- b. SQG: 100 to 1,000 kg/mo (220 – 2,200 lbs/mo) of non-acute hazardous waste.
- c. CESQG: Less than 100 kg/mo (220 lbs/mo) of non-acute hazardous waste.

If "Yes" above, indicate other generator activities in 2-10.

- Y N **2. Short-Term Generator** (generate from a short-term or one-time event and not from on-going processes). If "Yes," provide an explanation in the Comments section.
- Y N **3. United States Importer of Hazardous Waste**
- Y N **4. Mixed Waste (hazardous and radioactive) Generator**

- Y N **5. Transporter of Hazardous Waste**
 If "Yes," mark all that apply.
- a. Transporter
- b. Transfer Facility (at your site)
- Y N **6. Treater, Storer, or Disposer of Hazardous Waste** Note: A hazardous waste Part B permit is required for these activities.
- Y N **7. Recycler of Hazardous Waste**
- Y N **8. Exempt Boiler and/or Industrial Furnace**
 If "Yes," mark all that apply.
- a. Small Quantity On-site Burner Exemption
- b. Smelting, Melting, and Refining Furnace Exemption
- Y N **9. Underground Injection Control**
- Y N **10. Receives Hazardous Waste from Off-site**

B. Universal Waste Activities; Complete all parts 1-2.

- Y N **1. Large Quantity Handler of Universal Waste (you accumulate 5,000 kg or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste managed at your site. If "Yes," mark all that apply.**
- a. Batteries
- b. Pesticides
- c. Mercury containing equipment
- d. Lamps
- e. Other (specify) _____
- f. Other (specify) _____
- g. Other (specify) _____

- Y N **2. Destination Facility for Universal Waste**
 Note: A hazardous waste permit may be required for this activity.

C. Used Oil Activities; Complete all parts 1-4.

- Y N **1. Used Oil Transporter**
 If "Yes," mark all that apply.
- a. Transporter
- b. Transfer Facility (at your site)
- Y N **2. Used Oil Processor and/or Re-refiner**
 If "Yes," mark all that apply.
- a. Processor
- b. Re-refiner
- Y N **3. Off-Specification Used Oil Burner**
- Y N **4. Used Oil Fuel Marketer**
 If "Yes," mark all that apply.
- a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner
- b. Marketer Who First Claims the Used Oil Meets the Specifications

D. Eligible Academic Entities with Laboratories—Notification for opting into or withdrawing from managing laboratory hazardous wastes pursuant to 40 CFR Part 262 Subpart K

❖ You can ONLY Opt into Subpart K if:

- you are at least one of the following: a college or university; a teaching hospital that is owned by or has a formal affiliation agreement with a college or university; or a non-profit research institute that is owned by or has a formal affiliation agreement with a college or university; AND
- you have checked with your State to determine if 40 CFR Part 262 Subpart K is effective in your state

Y N 1. Opting into or currently operating under 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories
See the item-by-item instructions for definitions of types of eligible academic entities. Mark all that apply:

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

Y N 2. Withdrawing from 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories

11. Description of Hazardous Waste

A. Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.

D001	D018					

B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-Regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed.

12. Notification of Hazardous Secondary Material (HSM) Activity

Y N Are you notifying under 40 CFR 260.42 that you will begin managing, are managing, or will stop managing hazardous secondary material under 40 CFR 261.2(a)(2)(ii), 40 CFR 261.4(a)(23), (24), or (25)?

If "Yes," you must fill out the Addendum to the Site Identification Form: Notification for Managing Hazardous Secondary Material.

13. Comments

This Subsequent Notification is provided to update the Site Contact Person in Item 8.

14. 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 fines and imprisonment for knowing violations. For the RCRA Hazardous Waste Part A Permit Application, all owner(s) and operator(s) must sign (see 40 CFR 270.10(b) and 270.11).

Signature of legal owner, operator, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)
	Tye Ragle, Manager Operations	01/13/2016

By Federal Express



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January 21, 2016

Ms. Patricia Davalos
North Carolina Department of Environmental Quality
Division of Waste Management
Hazardous Waste Section
1646 Mail Service Center
Raleigh, North Carolina 27699-1646



ATLANTIC - GULF
TRANSCO
345 Greenbrier Drive
Charlottesville, VA 22901-1618
434-973-4384
434-964-2130 fax

Reference: Subsequent Notification
RCRA Subtitle C Site Identification Form
Transcontinental Gas Pipe Line Company, LLC – Station 155
NCD060299765

Dear Ms. Davalos:

Transcontinental Gas Pipe Line Company, LLC (Transco) is submitting the enclosed RCRA Subtitle C Site Identification Form to update site information for Compressor Station 155 located in Lexington, North Carolina. This submittal updates the Site Contact Person in Item 8.

If additional information is required, please contact me at (434) 964-2107.

Sincerely,

Richard C. Lutz
Environmental Specialist V

Enclosure

cc: M. Barron – Station 155

File: OMS Activity 1238