

File Room Document Transmittal Sheet

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Your Name: MEL DEAVER
EPA ID: NCD980710602
Facility Name: MERCHANTS METALS
Document Group: General (G)
Document Type: Notification 8700 (8700)
Description:
Date of Doc: 1/12/2016
Author of Doc: NATHAN BROWN

File Room Use Only

Date Recieved by File Room:

Date Scanned:

Month	Day	Year
3	15	16

NCD980710602

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January 28, 2016

BRIAN DICK
MERCHANTS METALS
165 FANJOY RD
STATESVILLE, NC 28625

RE: EPA ID # NCD980710602 - MERCHANTS METALS

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: January 28, 2016

NCD980710602 MERCHANTS METALS

County: IREDEU Source Type: Seq. Number: 30 Receive Date: 12/12/2016

Location 165 FANJOY RD Address: STATESVILLE, NC 28625	Mailing 165 FANJOY RD Address: STATESVILLE, NC 28625
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Contact Person BRIAN DICK For Source (713) 213-7057 Information	165 FANJOY RD STATESVILLE, NC 28625 US
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Owner (current) MERCHANTS METALS LLC	900 ASHWOOD PKWY STE 600 ATLANTA, GA 30338	Type: P
From: 03/23/2015	To:	Phone: (770) 741-0300

Operator (current) MERCHANTS METALS LLC	900 ASHWOOD PKWY STE 600 ATLANTA, GA 30338	Type: P
From: 03/23/2015	To:	Phone: (770) 741-0300

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

Hazardous Waste Activities

Hazardous Waste Generator Status - Federal: Not a Generator; State: Not a Generator

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

Operator Information

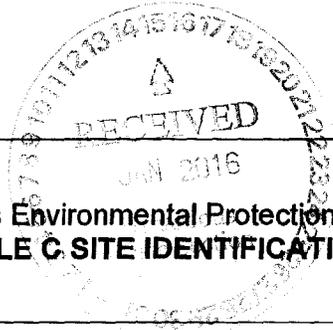
First Name : NATHAN	Title AUTHORIZED REP
Last Name : BROWN	Date Signed 01/12/2016

NAICS Codes

332618

Comments

UPDATED 8700-12 DATED 1/12/2016 SITE CONTACT PERSON INFOR. MD 1/26/2016



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

**United States Environmental Protection Agency
RCRA SUBTITLE C SITE IDENTIFICATION FORM**

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

3. Site Name

Name: MERCHANTS METALS

4. Site Location Information

Street Address: 165 FANJOY RD

City, Town, or Village: STATESVILLE County: IREDELL

State: NORTH CAROLINA Country: USA Zip Code: 28625

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. C.

B. D.

7. Site Mailing Address

Street or P.O. Box: 165 FANJOY RD

City, Town, or Village: STATESVILLE

State: NORTH CAROLINA Country: USA Zip Code: 28625

8. Site Contact Person

First Name: BRIAN MI: Last: DICK

Title: PLANT MANAGER

Street or P.O. Box: 165 FANJOY RD

City, Town or Village: STATESVILLE

State: NORTH CAROLINA Country: USA Zip Code: 28625

Email: BDICK@MERCHANTSMETALS.COM

Phone: 713-213-7057 Ext.: Fax:

9. Legal Owner and Operator of the Site

A. Name of Site's Legal Owner: MERCHANTS METALS LLC Date Became Owner: 3/23/15

Owner Type: Private County District Federal Tribal Municipal State Other

Street or P.O. Box: 900 ASHWOOD PKWY, SUITE 600

City, Town, or Village: ATLANTA Phone: 770-741-0300

State: GA Country: USA Zip Code: 30338

B. Name of Site's Operator: MERCHANTS METALS LLC Date Became Operator: 03/23/2015

Operator Type: Private County District Federal Tribal Municipal State Other

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.

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.

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.

- | | |
|--|---|
| <p>1. Generator of Hazardous Waste
 If "Yes," mark only one of the following – a, b, or c.</p> <p><input type="checkbox"/> 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.</p> <p><input type="checkbox"/> b. SQG: 100 to 1,000 kg/mo (220 – 2,200 lbs/mo) of non-acute hazardous waste.</p> <p><input type="checkbox"/> c. CESQG: Less than 100 kg/mo (220 lbs/mo) of non-acute hazardous waste.</p> <p>If "Yes" above, indicate other generator activities in 2-10.</p> <p><input type="checkbox"/> 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.</p> <p><input type="checkbox"/> 3. United States Importer of Hazardous Waste</p> <p><input type="checkbox"/> 4. Mixed Waste (hazardous and radioactive) Generator</p> | <p><input type="checkbox"/> 5. Transporter of Hazardous Waste
 If "Yes," mark all that apply.</p> <p><input type="checkbox"/> a. Transporter</p> <p><input type="checkbox"/> b. Transfer Facility (at your site)</p> <p><input type="checkbox"/> 6. Treater, Storer, or Disposer of Hazardous Waste Note: A hazardous waste Part B permit is required for these activities.</p> <p><input type="checkbox"/> 7. Recycler of Hazardous Waste</p> <p><input type="checkbox"/> 8. Exempt Boiler and/or Industrial Furnace
 If "Yes," mark all that apply.</p> <p><input type="checkbox"/> a. Small Quantity On-site Burner Exemption</p> <p><input type="checkbox"/> b. Smelting, Melting, and Refining Furnace Exemption</p> <p><input type="checkbox"/> 9. Underground Injection Control</p> <p><input type="checkbox"/> 10. Receives Hazardous Waste from Off-site</p> |
|--|---|

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

- 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 | <input type="checkbox"/> |
| b. Pesticides | <input type="checkbox"/> |
| c. Mercury containing equipment | <input type="checkbox"/> |
| d. Lamps | <input type="checkbox"/> |
| e. Other (specify) _____ | <input type="checkbox"/> |
| f. Other (specify) _____ | <input type="checkbox"/> |
| g. Other (specify) _____ | <input type="checkbox"/> |
- 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.

- 1. Used Oil Transporter**
 If "Yes," mark all that apply.
- a. Transporter
- b. Transfer Facility (at your site)
- 2. Used Oil Processor and/or Re-refiner**
 If "Yes," mark all that apply.
- a. Processor
- b. Re-refiner
- 3. Off-Specification Used Oil Burner**
- 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

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

NOT A GENERATOR

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)
	NATHAN BROWN	01/12/16