

Hazardous Waste Section
File Room Document Transmittal Sheet

##

Your Name: MEL DEAVER
EPA ID: NCR000141325
Facility Name: NCDSCA DC260004 (KORE-O-MAT LAUDROMAT)
Document Group: General (G)
Document Type: Notification 8700 (8700)
Description:
Date of Doc: 1/5/2016
Author of Doc: SCOTT STUPAK

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Date Recieved by File Room:

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NCR000141325

Scanner's Initials:

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Waste Management
ENVIRONMENTAL QUALITY

PAT MCCRORY
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DONALD R. VAN DER VAART
Secretary

LINDA CULPEPPER
Director

January 21, 2016

DIANNE THOMAS
NCDSCA DC260004 (KORE-O-MAT LAUNDROMAT)
1646 MAIL SERVICE CTR
RALEIGH, NC 27699-1646

RE: EPA ID # NCR000141325 - NCDSCA DC260004 (KORE-O-MAT LAUNDROMAT)

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 21, 2016

NCR000141325 NCDSCA DC260004 (KORE-O-MAT LAUNDROMAT)

County: CUMBERLAND Source Type: S Seq. Number: 10 Receive Date: 05-Jan-2016

Location 3311 BRAGG BLVD, STE 100
Address: FAYETTEVILLE, NC 283033954

Mailing 1646 MAIL SERVICE CTR
Address: RALEIGH, NC 276991646

Contact Person DIANNE THOMAS 1646 MAIL SERVICE CTR
For Source (919) 707-8362 RALEIGH, NC 276991646
Information US

Owner (current) PO BOX 57192
 EBL&S PROPERTY MANAGEMENT PHILADELPHIA, PA 191117192 **Type: P**
From: 08/01/1997 **To:** **Phone:**

Operator (current) 1646 MAIL SERVICE CENTER
 PETITIONER(S) FOR DSCA SITE DC260004 RALEIGH, NC 276991646 **Type: P**
From: 05/14/2002 **To:** **Phone:**

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

Regulatory Activities

Hazardous Waste Generator Status - Federal: Large Quantity Generator; State: Large Quantity Generator

Transfer Facility:
Other Hazardous Waste Generator Activities
Importer Activity: No
Mixed Waste Generator: No
Transporter Activity: No
TSD Activity: No
Recycler Activity: No
Exempt Boiler and/or Industrial Furnace
Small Quantity Onsite Burner Exemption: No
Smelting, melting, Refining Furnace Exemption: No

Used Oil Activities
Used Oil Transport Activity **Off-Specification Used Oil Burner:** No
Transporter: No **Used Oil Fuel Marketer Activity**
Transfer Facility: No **Marketer who direct shipment off-specification used oil to off-specification used oil burner:** No
Used Oil Processor and/or Re-refiner Activity
Processor: No **Marketer who first claims the used oil meets the specifications:** No
Refiner: No
Underground Injection Control: No **Destination Facility for Universal Waste:** No

Certification Information

First Name : SCOTT **Title** PROJ MGR
Last Name : STUPAK **Date Signed** 01/05/2016

NAICS Codes

812320

Comments

UPDATED 8700-12 DATED 1/5/2016 SQG TO LQG AS OF 12/31/2015 MD 1/15/2016



Waste Management
ENVIRONMENTAL QUALITY

2015 INVOICE

FACILITY LOCATION ADDRESS:

ATTENTION: ACCOUNTS PAYABLE
NCDSCA DC260004 (KORE-O-MAT LAUNDROMAT)
1646 MAIL SERVICE CTR
RALEIGH, NC 27699-1646

DIANNE THOMAS
NCDSCA DC260004 (KORE-O-MAT LAUNDROMAT)
3311 BRAGG BLVD, STE 100
FAYETTEVILLE NC 283033954

FACILITY EPA ID #	INVOICE #	INVOICE DATE	AMOUNT DUE	DUE DATE	ENTER AMOUNT PAID
NCR000141325	HW70308.1	1/21/2016	\$ 1,225.00	02/20/2016	

- A. Fee Requirements: Pursuant to North Carolina General Statute 130A-294.1, a Facility must pay fee(s) based on its hazardous waste management activities. The fees are used to support government programs that ensure the safe management of hazardous waste. Failure to pay the required fees could result in an enforcement action with a penalty.
- B. Invoice amount is based on the registered status as of the invoice date and includes any past-due balances. A 10% late-payment penalty has been assessed for Fiscal Year 2014 if the annual fee was not paid by June 30, 2015.
- C. If Fiscal Year 2015 annual fees are not paid by June 30, 2016, the facility must pay a late-payment penalty of 10% of the total amount due.
- D. In accordance with N.C.G.S. § 147-86.23, a facility may petition for waiver of any late-payment penalty but the Hazardous Waste Section will only grant a waiver for good cause shown.

FACILITY STATUS	FEE	TONNAGE	AMOUNT DUE
LARGE QUANTITY GENERATOR	\$1400.00	-----	\$1,400.00
		PAST DUE	\$0.00
		CREDIT	\$-175.00
		TOTAL AMOUNT DUE	\$1,225.00

E. Remit Payment :

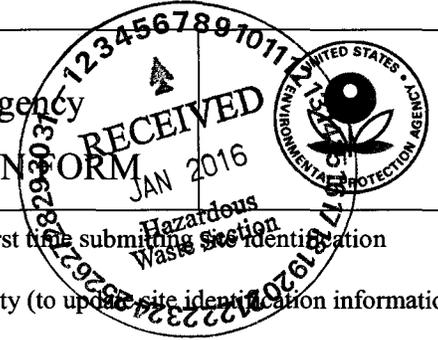
To pay via electronic bank transfer (e-check), go to <http://portal.ncdenr.org/web/wm/hw/epayment>. You will need your EPA facility ID# and invoice number, as well as your bank routing and account numbers. There is no fee for electronic transfers. Partial payments are not allowed with this payment method.

To pay via mail with a paper check or money order, please make payable to **N.C. Hazardous Waste Section**. Include EPA ID# and Invoice # on check. Please note per NC General Statute (G.S. 25-3-506), a \$25.00 processing fee will be charged on all returned checks. Please return a copy of this invoice with your payment to:

ATTN: PATRICIA DAVALOS
NC HAZARDOUS WASTE SECTION
1646 MAIL SERVICE CENTER
RALEIGH, NC 27699-1646



United States Environmental Protection Agency
 RCRA SUBTITLE C SITE IDENTIFICATION FORM



<p>1. Reason for Submittal</p> <p>MARK ALL BOX(ES) THAT APPLY</p>	<p><input type="checkbox"/> To provide Initial Notification of Regulated Waste Activity (first time submitting site identification information / to obtain an EPA ID number for this location)</p> <p><input checked="" type="checkbox"/> To provide Subsequent Notification of Regulated Waste Activity (to update site identification information for this location)</p> <p><input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application</p> <p><input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____)</p> <p><input type="checkbox"/> As a component of the Hazardous Waste Report (If marked, see sub-bullet below)</p> <p><input type="checkbox"/> Site was a TSD facility and/or generator of $\geq 1,000$ kg of hazardous waste, > 1 kg of acute hazardous waste, or >100kg of acute hazardous waste spill cleanup <u>in one or more months</u> of the report year (or State equivalent LQG regulations)</p>	
<p>2. Site EPA ID</p>	<p>NCR000141325</p>	
<p>3. Site Name</p>	<p>NCDSCA DC260004(Kore-o-mat Laundromat)</p>	
<p>4. Site Location Information</p>	<p>3311 Bragg Blvd, Suite100 Bragg Plaza Shopping Center Fayetteville, North Carolina 28303-3954, Cumberland County</p>	
<p>5. Site Land Type</p>	<p><input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Tribal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p>	
<p>6. NAICS Code(s)</p>	<p>812320</p>	
<p>7. Site Mailing Address</p>	<p>1646 Mail Service Center Raleigh, NC, USA 27699-1646</p>	
<p>8. Site Contact Person</p>	<p>Dianne Thomas, Project Manager 1646 Mail Service Center Raleigh, North Carolina, USA 27699-1646 Dianne.Thomas@ncdenr.gov (919)707-8362</p>	
<p>9. Legal Owner and Operator of the Site</p>	<p>A. Name of Site's Legal Owner EBL&S Property Management</p>	<p>Date Became Owner 8/1/1977</p>
	<p>Owner Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Tribal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p>	
	<p>EBL&S PROPERTY MANAGEMENT PO BOX 57192 PHILADELPHIA PA 19111-7192</p>	
	<p>B. Name of Site's Operator Petitioner(s) for DSCA Site ID DC260004</p>	<p>Date Became Operator 05/14/2002</p>
<p>Operator Type: <input type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Tribal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input checked="" type="checkbox"/> Other</p>		

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 CRF 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 Wastes

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.

F002

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

Update Site Information:
SQG to LQG as of 12/31/2015

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 operator, owner, or an authorized representative	Name and Official Title	Date Signed (mm/dd/yyyy)
	Scott Stupak, on behalf of Petitioners for DSCA Site ID DC260004	1/5/2016

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

- | | |
|---|---|
| <p>Y <input checked="" type="checkbox"/> N <input type="checkbox"/> 1. Generator of Hazardous Waste</p> <p><input checked="" 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>Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 5. Transporter of Hazardous Waste</p> <p><input type="checkbox"/> a. Transporter
<input type="checkbox"/> b. Transfer Facility (at your site)</p> <p>Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 6. Treater, Storer, or Disposer of Hazardous Waste Note: A hazardous waste Part B permit is required for these activities.</p> <p>Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 7. Recycler of Hazardous Waste</p> <p>Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 8. Exempt Boiler and/or Industrial Furnace</p> <p><input type="checkbox"/> a. Small Quantity On-site Burner Exemption
<input type="checkbox"/> b. Smelting, Melting, and Refining Furnace Exemption</p> <p>Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 9. Underground Injection Control</p> <p>Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 10. Receives Hazardous Waste from Off-site</p> |
|---|---|

If "Yes" above, indicate other generator activities.

- 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**

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

- Y N **1. Large Quantity Handler of Universal Waste (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"/> |
- 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**
- a. Transporter
 b. Transfer Facility (at your site)
- Y N **2. Used Oil Processor and/or Re-refiner**
- a. Processor
 b. Re-refiner
- Y N **3. Off-Specification Used Oil Burner**
- Y N **4. Used Oil Fuel Marketer**
- 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