



State of North Carolina  
Department of Environment,  
Health and Natural Resources  
Division of Solid Waste Management



James B. Hunt, Jr., Governor  
Jonathan B. Howes, Secretary  
William L. Meyer, Director

February 13, 1995

MOTORWORKS  
PO BOX 80848  
RALEIGH, NC 27623

RE: EPA ID No. NCR000000026

Dear Sir:

Listed above is your EPA ID number which has been assigned by the EPA. As an Exempt Small Generator, you should be familiar with N.C. Hazardous Waste Management Regulations 15A NCAC 13A .0002 Definitions; contained in 40 CFR 260.10 (Subpart B), 15A NCAC 13A .0006 Identification and Listings of Hazardous Waste; contained in 40 CFR 261.1 (Subpart A-D) and 15A NCAC 13A .0007 Standards for Hazardous Waste Generations; contained in 40 CFR 262.10 - 262.40 (Subpart A-D).

You can contact the Hazardous Waste Management Section at (919) 733-2178 for information.

NCSU provides a training program for generators which you may want to attend. Call Mac McKenzie or Kathryn Murray at 919-515-2261 or write to the Office of Continuing Education and Professional Development , P.O. Box 7401, Mckimmon Center, N. C. State University, Raleigh, NC 27695-7401.

You will be inspected at a future date to insure compliance with the above rules. To obtain a complete copy of rules contact the Hazardous Waste Management Section, Division of Solid Waste Management, Box 27687, Raleigh, 27611-7687. There is a 16.00 printing charge for complete copy of the rules.

Sincerely,

R.J. Edwards, Administrative Officer  
Division of Solid Waste Management

cc: MIKE WILLIFORD

Please refer to the instructions for Filing 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)

1  
RECEIVED  
FEB 1 1995  
HHS  
WASTE

**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

NCR0000000026

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

MOTORWORKS

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

Street

6901 M T HERMAN RD

Street (Continued)

City or Town

RALEIGH

State

NC

Zip Code

27623-0848

County Code

22 183

County Name

WAKE

**IV. Installation Mailing Address (See Instructions)**

Street or P.O. Box

PO BOX 80848

City or Town

RALEIGH

State

NC

Zip Code

27623-0848

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

Name (Last)

DRESNOK

(First)

JOE

Job Title

PRES

Phone Number (Area Code and Number)

919-420-0422

**VI. Installation Contact Address (See Instructions)**

A. Contact Address

Location Mailing Other

B. Street or P.O. Box

City or Town

State

Zip Code

-

**VII. Ownership (See Instructions)**

A. Name of Installation's Legal Owner

RDU AIRPORT AUTHORITY

Street, P.O. Box, or Route Number

PO BOX 80001

City or Town

RDU AIRPORT

State

NC

Zip Code

27623-0001

Phone Number (Area Code and Number)

919-840-2100

B. Land Type

C

C. Owner Type

P

D. Change of Owner Indicator

Yes  No

(Date Changed)

Month Day Year

owns land.

SIC 5015  
1538

SIC code

LD - For Official Use Only											

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

A. Hazardous Waste Activity

1. Generator (See instructions)
- a. Greater than 1000kg/mo (2,200 lbs.)
  - b. 100 to 1000 kg/mo (200-2,200 lbs.)
  - c. Less than 100 kg/mo (220 lbs.)
2. Transporter (Indicate Mode in boxes 1-5 below)
- a. For own waste only
  - b. For commercial purposes
- Mode of Transportation
- 1. Air
  - 2. Rail
  - 3. Highway
  - 4. Water
  - 5. Other - specify
3. Treater, Storage Installation (If required for instructions)
4. Hazardous Waste
- a. Generator Mark
  - b. Other Mark
  - c. Doller and/or
  - 1. Smaller
  - 2. Small C
  - Indicate Type Device(s)
  - 1. Utility De
  - 2. Industria
  - 3. Industria
  - 5. Underground b

Owner Company  
 JOE DRESNOR  
 P.O. Box 99369  
 RALEIGH 27624  
 919-848-8328

Ries  
 if Used  
 or  
 he Used  
 pe(s) of  
 Type(s)  
 Indicate

IX. Description of Hazardous Wastes (Use additional sheets if need

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 (In specific EPA hazardous waste number(s) for the Toxicity characteristic contaminant(s))
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			D004, 5, 6, 10, 11

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 LD 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 fines and imprisonment for knowing violations.

Signature <i>J. Dresnor</i>	Name and Official Title (Type or print) JOE DRESNOR, PRES	Date Signed 1/28/95
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XI. Comments

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