

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



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

SOc

Leonard Garner, Plant Mgr
 ELK SPINNERS INC
 Po Box 386
 Hope Mills, NC 28348

May 29, 1996

RE EPA ID NO.: NCR000000158

Dear Sir/Madam:

Listed above is your EPA ID number which has been assigned to you by the State. As a handler of Used Oil, you should be familiar with North Carolina Hazardous Waste Management, Regulations 15A NCAC 13A. 0018 Standards for the Management of Used Oil, contained in 40 CFR 279.

Effective October 1, 1993, all handlers of used oil were required by G.S. 130A-294(b),(c); 150B-21.6 to pay an annual fee, and submit an annual report listing the type of used oil transported, collected, and recycled during the preceding calendar year by JULY 1 of each year. You can contact the Hazardous Waste Management Section at (919)733-2178 for information.

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 Section, Division of Waste Management, PO Box 27687, Raleigh N.C. 27611-7687. There is a \$ 25.00 printing charge for a complete copy of the rules.

Sincerely,

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

Current Computer Record -

'X' indicates used oil status of your facility.

Fuel Marketer	Burner- Combustion Devices	Transporter Activities	Processor/ Re-refiner Activities
<input type="checkbox"/> Marketer directs shipment of used oil to off-specification burner	<input type="checkbox"/> Utility Boiler	<input type="checkbox"/> Transporter	<input type="checkbox"/> Process
<input type="checkbox"/> Marketer who first claims the used oil meets specifications	<input type="checkbox"/> Industrial Boiler	<input type="checkbox"/> Transfer facility	<input type="checkbox"/> Re-refine
	<input type="checkbox"/> Industrial Furnace		

Company name: ELK SPINNERS INC
 Owner:
 Contact: GARNER LEONARD, PLANT MGR
 Phone number: 910/425-3150
 Location address: 3363 LEGION RD
 City, St & ZIP: HOPE MILLS, NC 28348-

Please notify us if there is any further change in your operation which would affect your status namely
Company's Name, Ownership, Address, Contact or Telephone Number.

Your EPA ID number is currently active.

CC: FLINT WORRELL



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

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March 10, 1995

ELK SPINNERS INC HOPE MILLS RD
PO BOX 386
HOPE MILLS, NC 28348

RE: EPA ID No. NCR000000158

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: FLINT WORRELL

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March 10, 1995

ELK SPINNERS INC HOPE MILLS RD
PO BOX 386
HOPE MILLS, NC 28348

RE: EPA ID No. NCR000000158

Dear Sir:

Listed above is your EPA ID number which has been assigned by the EPA. As a marketer or burner of hazardous waste fuel, you should be familiar with 15A NCAC 13A North Carolina Hazardous Waste Management Rules .002 Definitions; .0006 Identification and Listing of Hazardous Waste Part 261; and .0007 Standards for Hazardous Waste Generators - Part 262; and .0011 Standards for the Management of Specific Types of Hazardous Waste Management Facilities - Part 266 (Subpart D, E and H).

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: FLINT WORRELL



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)

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)

<input checked="" type="checkbox"/> A. First Notification	<input type="checkbox"/> B. Subsequent Notification (Complete item C)	C. Installation's EPA ID Number NCR0000000158
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II. Name of Installation (Include company and specific site name)

E L K S P I N N E R S I N C H o p e M i l l s P

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

Street:

3 3 6 3 L e g i o n R o a d

Street (Continued)

City or Town: H o p e M i l l s State: N C Zip Code: 2 8 3 4 8 -

County Code: 051 County Name: C u m b e r l a n d

IV. Installation Mailing Address (See Instructions)

Street or P.O. Box:

P O B o x 3 8 6

City or Town: H o p e M i l l s State: N C Zip Code: 2 8 3 4 8 -

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

Name (Last): G a r n e r (First): L e o n a r d

Job Title: P l a n t M a n a g e r Phone Number (Area Code and Number): 9 1 0 - 4 2 5 - 3 1 5 0

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: U n i b l e n d S p i n n e r s I n c

Street, P.O. Box, or Route Number: 2 0 1 N E n t e r p r i s e S t r e e t

City or Town: U n i o n State: S C Zip Code: 2 9 3 7 9 -

Phone Number (Area Code and Number): 8 0 3 - 4 2 7 - 7 6 8 1	B. Land Type: P	C. Owner Type: P	D. Change of Owner Indicator: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	(Date Changed) Month: 0 2 Day: 1 3 Year: 9 5
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ID - For Official Use Only									

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

A. Hazardous Waste Activity		B. Used Oil Recycling Activities
<p>1. Generator (See Instructions)</p> <p><input type="checkbox"/> a. Greater than 1000kg/mo (2,200 lbs.)</p> <p><input type="checkbox"/> b. 100 to 1000 kg/mo (200-2,200 lbs.)</p> <p><input checked="" type="checkbox"/> c. Less than 100 kg/mo (220 lbs.)</p> <p>2. Transporter (Indicate Mode in boxes 1-5 below)</p> <p><input type="checkbox"/> a. For own waste only</p> <p><input type="checkbox"/> b. For commercial purposes</p> <p>Mode of Transportation</p> <p><input type="checkbox"/> 1. Air</p> <p><input type="checkbox"/> 2. Rail</p> <p><input type="checkbox"/> 3. Highway</p> <p><input type="checkbox"/> 4. Water</p> <p><input type="checkbox"/> 5. Other - specify</p>	<p><input type="checkbox"/> 3. Treater, Storer, Disposer (at Installation) Note: A permit is required for this activity; see Instructions.</p> <p>4. Hazardous Waste Fuel</p> <p><input type="checkbox"/> a. Generator Marketing to Burner</p> <p><input type="checkbox"/> b. Other Marketers</p> <p><input type="checkbox"/> c. Boiler and/or Industrial Furnace</p> <p><input type="checkbox"/> 1. Smelter/Deferral</p> <p><input type="checkbox"/> 2. Small Quantity Exemption</p> <p>Indicate Type of Combustion Device(s)</p> <p><input type="checkbox"/> 1. Utility Boiler</p> <p><input type="checkbox"/> 2. Industrial Boiler</p> <p><input type="checkbox"/> 3. Industrial Furnace</p> <p><input type="checkbox"/> 5. Underground Injection Control</p>	<p>1. Used Oil Fuel Marketer</p> <p><input type="checkbox"/> a. Marketer Directs Shipment of Used Oil to Off-Specification Burner</p> <p><input checked="" type="checkbox"/> b. Marketer Who First Claims the Used Oil Meets the Specifications</p> <p>2. Used Oil Burner - Indicate Type(s) of Combustion Device(s)</p> <p><input type="checkbox"/> a. Utility Boiler</p> <p><input type="checkbox"/> b. Industrial Boiler</p> <p><input type="checkbox"/> c. Industrial Furnace</p> <p>3. Used Oil Transporter - Indicate Type(s) of Activity(ies)</p> <p><input type="checkbox"/> a. Transporter</p> <p><input type="checkbox"/> b. Transfer Facility</p> <p>4. Used Oil Processor/Re-refiner - Indicate Type(s) of Activity(ies)</p> <p><input type="checkbox"/> a. Process</p> <p><input type="checkbox"/> b. Re-refine</p>

IX. Description of Hazardous Wastes (Use additional sheets if necessary)

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 (List specific EPA hazardous waste number(s) for the Toxicity characteristic contaminant(s))
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33; See Instructions if you need to list more than 12 waste codes.)

1 F 0 0 1	2 D 0 3 9	3 D 0 4 0	4 D 1 0 1 1 2	5 D 1 0 1 1 2	6
7 	8 	9 	10 	11 	12

C. Other Wastes. (State or other wastes requiring a handler to have an I.D. number; See Instructions.)

1 	2 	3 	4 ENTERED STATE	5 	6
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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 fine and imprisonment for knowing violations.

Signature <i>Randy Jenkins</i>	Name and Official Title (Type or print) Randy Jenkins Vice President of Operations	Date Signed 2-24-95
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XI. Comments

1. OPERATION RUN BY ELK SPINNERS, INC SUBSIDIARY OF UNIBLEND SPINNERS, INC.
2. CUMBERLAND COUNTY, N.C. - Property Owner

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