



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

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



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February 5, 1997

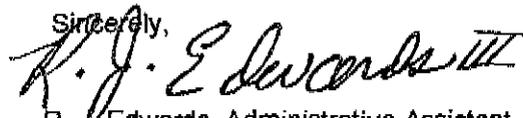
C E HICKS, DIRECTOR ENV OP  
CSX TRANSPORTATION INC  
500 WATER ST (J340)  
JACKSONVILLE, FL 32202

RE EPA ID NO.: NCR000000695

Dear Sir/Madam:

Based on information received by this office for the site identified with the EPA ID number, the state has accepted and processed the change in RCRA classification or information for the above site.

Please verify the computer generated information below and notify us of any corrections. We are advising EPA of the changes.

Sincerely,  
  
R. J. Edwards, Administrative Assistant  
Division of Waste Management

Your EPA ID number is currently active.

(X' indicates operation status of your facility.)

Current Computer Record

<input type="checkbox"/> LARGE GENERATOR	<input type="checkbox"/> STORER	<input type="checkbox"/> TRANSPORTER
<input type="checkbox"/> SMALL QNTY GENERATOR	<input type="checkbox"/> TREATER	<input type="checkbox"/> SMALL QTY BURNER
<input checked="" type="checkbox"/> EXEMPT SMALL QNTY	<input type="checkbox"/> DISPOSER	<input type="checkbox"/> USED OIL
<input type="checkbox"/> LG QNTY. UNIVERSAL		

Company name:	CSX TRANSPORTATION INC
Owner:	CSX TRANSPORTATION INC
Contact:	HICKS C E, DIRECTOR ENV OP
Phone number:	904/359-4800
Location address:	105 SUTTON RD
City, St & ZIP:	ROCKY MOUNT, NC 27801-

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.

cc: MIKE WILLIFORD

P.O. Box 27687,  
Raleigh, North Carolina 27611-7687  
Voice 919-733-4996



FAX 919-715-3605  
An Equal Opportunity Affirmative Action Employer  
50% recycled/10% post-consumer paper

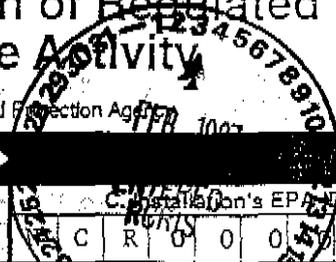
Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



# Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received  
(For Official Use Only)



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

<input type="checkbox"/> A. First Notification	<input checked="" type="checkbox"/> B. Subsequent Notification (Complete Item C)	C. Installation's EPA ID Number
		C R 0 0 0 0 0 0 6 9 5

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

C S X T R A N S P O R T A T I O N , I N C .

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

Street  
1 0 5 S U T T O N R O A D

Street (Continued)

City or Town	State	Zip Code
R O C K Y M O U N T	N C	2 7 8 0 4 -

County Code	County Name
	E D G E C O M B E

IV. Installation Mailing Address (See Instructions)

Street or P.O. Box  
5 0 0 W A T E R S T R E E T - J 3 4 0

City or Town	State	Zip Code
J A C K S O N V I L L E	F L	3 2 2 0 2 -

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

Name (Last)	(First)
H I C K S	C . E .

Job Title	Phone Number (Area Code and Number)
D I R . E N V . O P E R .	9 0 4 - 3 5 9 - 4 8 0 0

VI. Installation Contact Address (See Instructions)

A. Contact Address Location: Mailing Other	B. Street or P.O. Box
<input type="checkbox"/> <input checked="" type="checkbox"/>	5 0 0 W A T E R S T R E E T - J 3 4 0

City or Town	State	Zip Code
J A C K S O N V I L L E	F L	3 2 2 0 2 -

VII. Ownership (See Instructions)

A. Name of installation's Legal Owner  
C S X T R A N S P O R T A T I O N , I N C .

Street, P.O. Box, or Route Number  
5 0 0 W A T E R S T R E E T - J 3 4 0

City or Town	State	Zip Code
J A C K S O N V I L L E	F L	3 2 2 0 2 -

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

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 1000 kg/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 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 container(s))
<input type="checkbox"/>	<input checked="" 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	2	3	4	5	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	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 fine and imprisonment for knowing violations.

Signature <i>Charles E. Hicks</i>	Name and Official Title (Type or print) C. E. Hicks Director Environmental Operations	Date Signed 1-29-97
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**XI. Comments**

THIS LOCATION IS NOW A CONDITIONALLY EXEMPT SMALL QUANTITY GENERATOR OF HAZARDOUS WASTE. BATTERIES ARE STAGED HERE FOR RECYCLING AS UNIVERSAL WASTE.

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