

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

October 30, 1996

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MARK HORTON, PRESIDENT
INOTEXX CORP
5259 PIT RD S
HARRISBURG, NC 28075
RE EPA ID NO.: NCR000001214

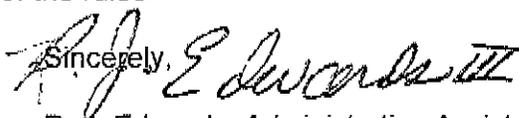
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Dear Sir/Madam:

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. The State of North Carolina provides a training program for generators which you may want to attend.

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 Waste Management, P. O. Box 27687, Raleigh, 27611-7687. There is a \$25.00 printing charge for complete copy of the rules.

Sincerely,


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

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)

OCT 7

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

NC RRD 000001214

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

INOTEXX CORPORATION

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

Street

5259 PIT RD SOUTH

Street (Continued)

City or Town

HARRISBURG

State

NC

Zip Code

28075-

County Code

025

County Name

CABARRUS

25

IV. Installation Mailing Address (See Instructions)

Street or P.O. Box

5259 PIT RD SOUTH

City or Town

HARRISBURG

State

NC

Zip Code

28075-170

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

Name (Last)

HORTON

(First)

MARK

Job Title

PRESIDENT

Phone Number (Area Code and Number)

704-455-6000

VI. Installation Contact Address (See Instructions)

A. Contract 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

MARK E HORTON

Street, P.O. Box, or Route Number

7787 HWY 601 SOUTH

City or Town

CONCORD

State

NC

Zip Code

28025-

Phone Number (Area Code and Number)

704-788-4454

B. Land Type

P

C. Owner Type

P

D. Change of Owner Indicator

Yes No

(Date Changed)

Month Day Year

SIC code -----

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 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 D001	2 D018	3 F003	4	5	6
7	8	9	10	11	12

C. Other Wastes. (State or other wastes requiring a handler to have an ID number; See instructions.)

1	2	3	4	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>Susan M. Grosse</i>	Name and Official Title (Type or print) <i>Vice President</i>	Date Signed <i>10.2.96</i>
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Comments

NAME AND LOCATION CHANGE

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

STATE OF
NORTH
CAROLINA



Department of The
Secretary of State

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To all whom these presents shall come, Greetings:

I, Rufus L. Edmisten, Secretary of State of the State of North Carolina, do hereby certify the following and hereto attached to be a true copy of

ARTICLES OF AMENDMENT

OF

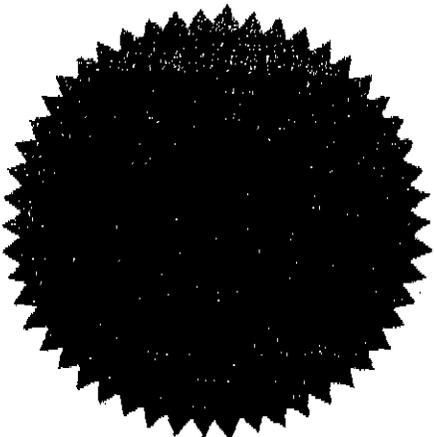
FAIRFINISH CORPORATION

Which changed its name to:

INOTEXX CORPORATION

the original of which was filed in this office on the 28th day of December, 1995.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 28th day of December, 1995.



Rufus L. Edmisten

Secretary of State

C-0050880

FILED

10:30 am

DEC 20 1995

EFFECTIVE 12/01/96

RUFUS L. EDMISTEN
SECRETARY OF STATE
NORTH CAROLINA

(1)

State of North Carolina
Department of the Secretary of State

ARTICLES OF AMENDMENT

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Drawn by and mail to:
Thomas B. Rallings, Jr.
Mitchell & Rallings, Attorneys
1800 Carillon
227 West Trade St.
Charlotte, North Carolina 28202
Telephone: 704-376-6574
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Pursuant to Section 55-10-06 of the General Statutes of North Carolina, The undersigned corporation hereby submits the following Articles of Amendment for the purpose of amending its Articles of Incorporation.

1. The name of the corporation is FAIRFINISH CORPORATION.
2. The following amendment to the articles of the corporation was adopted by its shareholders and the Board of Directors on the 21st day of December, 1995, in the manner prescribed by law:

The name of the corporation shall be changed to:

INOTEXX CORPORATION
3. The Amendment does not provide for an exchange, reclassification, or cancellation of issued shares.
4. The Amendment was approved by shareholder action as required by NCGS 55 Article 10.
5. These articles will be effective 12:01 A.M., January 1, 1996.

This the 21st day of December, 1995.

FAIRFINISH CORPORATION

By: Mark E. Horton
Mark E. Horton
President