N.C. DEPARTMENT OF ENVIRONMENT, HEALTH AND NATURAL RESOURCES
DIVISION OF SOLID WASTE
HAZARDOUS WASTE SECTION

Circle one:
G, I, P, GW, C, E

FILE DOCKET

DATE	ITEM
(1) 3-18-98	CEI Report

HAZARDOUS WASTE SECTION (Review 8/93)

G- General, I- Inspections
P- Permits, GW- Ground Water
C- Closure E-Enforcement

Submittal Information	Initial By-	Initial Date -	Corrected By-	Corrected Date -
RCRA Comp. Section:		__/__/__		__/__/__
Received:		__/__/__		__/__/__
Entered/ Returned:		__/__/__		__/__/__

FACILITY INFORMATION:

EPA ID Number: NCR000000180

Facility Name: Quality Cleaners City: Gallbsoro

EVALUATION DATA: New: ✓ Change: __ Delete: __ (═══ : Required)

Agency: S Date: Mo. 03 / Day 18 / Year 98 Type: 4EIA

Control Number Data Entry Personnel: 0101

Person: 021 Reason: __

Evaluation Comments:
(74) 1 : _____
2 : _____

MAR 1998 ENTERED RCRIS

SNC DETERMINATION: If this evaluation resulted in a SNC determination, fill in this block. (NOTE: SNC determinations are SNY/SNN evaluations. The SNY/SNN evaluation can also be submitted later on a separate form.)

Facility is (Check one)
- a SNC (SNY evaluation) ☐
or-
- no longer a SNC (SNN eval.) ☐

Date of determination:
Same as above eval.: ☐ - or - __/__/__

VIOLATION DATA: New: __ Change: __ Delete: __

#__ Agency: ☐ Type: ☐ Date (mdy) Determined: __/__/__ Class: ☐
Priority: ☐ Branch: ☐ Person: ☐ Seq. Number (Data Entry) ☐
Return to Compliance: -- Scheduled -- __/__/__ --- Actual --- __/__/__
Reg. Type: ☐ Reg. Description (30): _____
Comment (72): _____

#__ Agency: ☐ Type: ☐ Date (mdy) Determined: __/__/__ Class: ☐
Priority: ☐ Branch: ☐ Person: ☐ Seq. Number (Data Entry) ☐
Return to Compliance: -- Scheduled -- __/__/__ --- Actual --- __/__/__
Reg. Type: ☐ Reg. Description (30): _____
Comment (72): _____

#__ Agency: ☐ Type: ☐ Date (mdy) Determined: __/__/__ Class: ☐
Priority: ☐ Branch: ☐ Person: ☐ Seq. Number (Data Entry) ☐
Return to Compliance: -- Scheduled -- __/__/__ --- Actual --- __/__/__
Reg. Type: ☐ Reg. Description (30): _____
Comment (72): _____

Continue violation date on Side B if necessary -

STATE OF NORTH CAROLINA
DEPARTMENT OF ENVIRONMENT, AND NATURAL RESOURCES
DIVISION OF WASTE MANAGEMENT
HAZARDOUS WASTE SECTION

COMPLIANCE INSPECTION

Facility Name: Quality Cleaners

EPA ID: NCR000001800

Contact: Vicki Foster

Address: 1801 Wayne Memorial Dr.
Goldsboro, NC 27530

Status: Small Generator

Ownership: One Hour Cleaners and Laundry of Wilson, Inc.

Facility Description: Dry cleaning & laundry facility

Waste Generation Processes: Waste tetrachloroethylene generated from dry cleaning operation
Waste filters

Waste Types: F002, D039, _____, _____, _____
_____, _____, _____, _____, _____

Facility Name: Quality Cleaner ID# NCR 000001800 Pg. 2

Transporters: MCF Systems Atlanta, Inc. GAD981269085

TSDF: MCF Systems Atlanta, Inc. GAD981269085

Accumulation Areas: Adjacent to cleaning machine

Storage Areas: Rear of facility

Waste Minimization: On-site recycling

Deficiencies: Facility is in compliance with applicable RCRA regulations.

Recommendations: NONE

Waste Management Specialist: Michael Williford

Facility Contact: J.K. Fordham

Date: 3/18/98