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) 1.18.96	CEI report

HAZARDOUS WASTE SECTION (Review 8/93)

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

Region IV CM&E Form Side A

EPA ID: NCR000002143

DATA ENTRY PERSONNEL
Submitted by: ____ Date: ____
Entered by: ____ Date: ____

Facility Name: Jakes Transmissions City: Durham

EVALUATION DATA: New: __ Change: __ Delete: __ (—— : Required)

Agency: 2 Date: Mo. 01 / Day 12 / Year 98 Type: CEI

Control Number Data Entry Personnel

Person: 035 BRANCH ____ REASON ____

Coverage Areas: (E: Evaluated NE: Not Evaluated NA: Not Applic. D: Del.)

Generators: GBF, GER, GGR, GLB, GMR, GOR, GPT, GRR, GSC, GSQ

Transporters: TGR, TMR, TOR, TRR, TWD

USED OIL: TUO, TFO, BUO, MUO, PUO, RUO

TSD's: DBF, DCH, DCL, DCP, DFR, DGS, DGH, DIN, DLB, DLF, DLT, DMC, DMR, DOR, DOT, DPB, DPP, DSI, DTR, DTT, DWP

COMPLIANCE SCHEDULE (TSD, GEN, TRANS.)
FEA ____ CAS ____

Evaluation Comments: (72) 1 : ____

2 : No violations noted!

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): ____

FEB 1999 ENTERED BORIS

#__ 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 data if necessary -

State of North Carolina
Department of Environment, Health, and Natural Resources

SMALL QUANTITY GENERATOR INSPECTION FORM

Facility Name: Jakes Transmission Inspection Date: 1/18/96

Address: 4533 Hillsboro Rd. Durham, NC

Contact: Charles B. Jacobs ID#: NCR 000002113

Present at Inspection: Charles

Processes: Transmission Repair Type of Business: Automotive

Wastes Generated: D001, D039

Transporters: Safety Kleen TSD's Safety Kleen

Manifests/Signed Copies: Yes ✓ No___ Comments: No violations Noted!

Inspection Records: Yes___ No ✓ N/A Example Issued: Yes___ No___
Emergency #'s Posted? Yes ✓ No___ Example Issued: Yes ✓ No___
Emergency Coordinator? Charles Jacobs Personnel trained? Yes ✓ No___
Local Authorities Contacted: Yes ✓ No___

Accumulation Areas: Description: Wash Areas, Parts washing machines.

Closed/labled/dated/ <55 gallons?

Storage Areas: Description: N/A

Closed/labled/dated/ <180 days/good condition?

Signature Robert D Harding Facility/Contact Charles B Jacobs

Date 1/18/96

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