

FACILITY INFORMATION:	Submittal Information	Initial By- Date -	Corrected By- Date -
	EPA ID Number: <u>NICR0000000414</u>	RCRA Comp. Section: Received: Entered/ Returned:	____/____/____ ____/____/____ ____/____/____

Facility Name: BRITE-SOL SERVICES, INC. City: CHARLOTTE

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

Agency: <u>S</u>	Date: <u>10/11/1999</u>	Mo. <u>10</u> Day <u>11</u> Year <u>1999</u>	Type: <u>CIEI</u>	Control Number Data Entry Personnel
Person: <u>01219</u>	Reason: <u>011</u>	<u>05</u> <u>11</u> <u>99</u>		<u> </u> <u> </u> <u> </u> <u> </u> <u> </u>

Evaluation Comments:

(74) 1: ~~LONG FORM NOT ISSUED DOCKET # 99-109~~
 2: Facility found in compliance with NOV DOCKET # 99-109

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) Date of determination: _____
 or no longer a SNC (SNN eval.) Same as above eval.: or _____/_____/_____

VIOLATION DATA: New: Change: Delete:

#1 Agency: S Type: GIPIT Date (mcy) Determined: 011/114/1999 Class:
 Priority: Branch: 011 Person: 0219 Seq. Number (Data Entry):
 Return to Compliance: 013/123/1999 015/111/1999 IN COMPLIANCE
 Reg. Type: SIR Reg. Description (30): 40 CFR 262.34(a)(4) ref. 40 CFR 265.16(c)
 Comment (72): Facility exceeded the 365 day time requirement on H.W. TRAINING

#2 Agency: S Type: GIPIT Date (mcy) Determined: 011/114/1999 Class:
 Priority: Branch: 011 Person: 0219 Seq. Number (Data Entry):
 Return to Compliance: 013/123/1999 015/111/1999 IN COMPLIANCE
 Reg. Type: SIR Reg. Description (30): 40 CFR 262.34(a)(4) ref. 40 CFR 265.16(d)(1)
 Comment (72): No Job Titles

#3 Agency: S Type: GIPIT Date (mcy) Determined: 011/114/1999 Class:
 Priority: Branch: 011 Person: 0219 Seq. Number (Data Entry):
 Return to Compliance: 013/123/1999 015/111/1999 IN COMPLIANCE
 Reg. Type: SIR Reg. Description (30): 40 CFR 262.34(a)(4) ref. 40 CFR 265.16(d)(2)
 Comment (72): No Job Descriptions

FACILITY INFORMATION:	Submittal Information	Initial Date -	Corrected Date -
	EPA ID Number: <u>NCR0000000414</u>	RCRA Comp. Section: Received: Entered/ Returned:	___/___/___ ___/___/___ ___/___/___

Facility Name: BRITE-SOL SERVICES, INC. City: CHARLOTTE

EVALUATION DATA: New: Change: ___ Delete: ___ (== : Required)

Agency: Date: / / Type: Control Number Data Entry Personnel:
 Person: Reason: 011

Evaluation Comments:
 (74) 1 : CONTINUED
 2 :

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) Date of determination:
 - a SNC (SNY evaluation) ___
 or - no longer a SNC (SNN eval.) ___ Same as above eval.: ___ / ___ / ___

VIOLATION DATA: New: Change: Delete: ___

#8 Agency: 5 Type: 6PIT Date (mdy) Determined: 011/114/1919 Class:
 Priority: Branch: 011 Person: 0219 Seq. Number (Data Entry):
 Return to Compliance: 013/123/1919 --- Scheduled --- Actual --- IN COMPLIANCE
 Reg. Type: SIR Reg. Description (30): 40 CFR 262.34(a)(4) ref. 40 CFR 265.52(d)
 Comment (72): Failed to list names + addresses of Emer. Coordinators in Cont. Plan.

#9 Agency: 5 Type: 6PIT Date (mdy) Determined: 011/114/1919 Class:
 Priority: Branch: 011 Person: 0219 Seq. Number (Data Entry):
 Return to Compliance: 013/123/1919 --- Scheduled --- Actual --- IN COMPLIANCE
 Reg. Type: SIR Reg. Description (30): 40 CFR 262.34(a)(4) ref. 40 CFR 265.53(d)
 Comment (72): Facility failed to submit copies of their cont. Plan to Em. Agencies

#10 Agency: 5 Type: 6PIT Date (mdy) Determined: 011/114/1919 Class:
 Priority: Branch: 011 Person: 0219 Seq. Number (Data Entry):
 Return to Compliance: 013/123/1919 --- Scheduled --- Actual --- IN COMPLIANCE
 Reg. Type: SIR Reg. Description (30): 40 CFR 262.34(a)(4) ref. 40 CFR 265.54(d)
 Comment (72): Facility failed to amend contingency plan to show change in em. lockdown

Continue violation date on Side B if necessary -

NORTH CAROLINA DEPARTMENT OF
ENVIRONMENT AND NATURAL RESOURCES
DIVISION OF WASTE MANAGEMENT



February 23, 1999

JAMES B. HUNT, JR.
GOVERNOR

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

NOTICE OF VIOLATION
Docket # 99-109

WAYNE MCDEVITT
SECRETARY

Mr. Gabby Smith
Brite-Sol Services, Inc.
1200 Exchange Street
Charlotte, N.C. 28108



NCR 000 000 414

WILLIAM L. MEYER
DIRECTOR

Dear Mr. Smith:

On December 18, 1980, the State of North Carolina, Hazardous Waste Section (Section) was authorized to operate the State Resource Conservation Recovery Act (RCRA) Hazardous Waste Program under the Solid Waste Management Act (Act), N.C.G.S. 130A, Article 9 and rules promulgated thereto at 15A NCAC 13A (Rules) in lieu of the federal RCRA program. Brite-Sol Services, Inc. of Charlotte, North Carolina, is classified as a generator of hazardous waste and is subject to the requirements of 40 CFR 262 adopted by reference at 15A NCAC 13A .0107 and 40 CFR 268 adopted by reference at 15A NCAC 13A .0112.

On December 8, 1998, Mr. Joseph Parker, Waste Management Specialist and Mr. Brent Rockett, Waste Management Specialist with this Office inspected your facility for compliance with the North Carolina Hazardous Waste Management Rules. During that inspection the following violations were noted:

- A. 40 CFR 262.34 (a)(4), adopted by reference at 15A NCAC 13A .0107, states that a generator may accumulate hazardous waste on-site for 90 days or less without a permit or without having interim status, provided that the generator complies with the requirements for owners and operators in Subparts C and D in 40 CFR Part 265, with Section 265.16, and with 40 CFR 268.7(a)(4).
1. 40 CFR 265.16(c), adopted by reference at 15A NCAC 13A .0110, states that facility personnel must take part in an annual review of the initial training required in paragraph (a) of this section.

Brite-Sol Services, Inc. is in violation of 40 CFR 262.34 (a)(4), adopted by reference at 15A NCAC 13A .0107, referenced at 40 CFR 265.16(c), adopted by reference at 15A NCAC 13A .0110, in that they

5. 40 CFR 265.16(e), adopted by reference at 15A NCAC 13A .0110, states that training records on current personnel must be kept until the closure of the facility. Training records on former employees must be kept for at least three years from the date the employee last worked at the facility. Personnel training records may accompany personnel transferred within the same company.

Brite-Sol Services, Inc. is in violation of 40 CFR 262.34 (a)(4), adopted by reference at 15A NCAC 13A .0107, referenced at 40 CFR 265.16(e), adopted by reference at 15A NCAC 13A .0110, in that they failed to maintain hazardous waste management training records on personnel no longer working at the facility. Training records on former employees must be kept for at least three years from the date the employee last worked at the facility.

6. 40 CFR 265.37, adopted by reference at 15A NCAC 13A .0110, states that the owner or operator must attempt to make the following arrangements, as appropriate for the type of waste handled at the facility and the potential need for the services of these organizations:

- (1) Arrangements to familiarize police, fire departments, and emergency response teams with the layout of the facility, properties of hazardous waste handled at the facility and associated hazards, places where facility personnel would normally be working, entrances to roads inside the facility, and possible evacuation routes;
- (2) Where more than one police and fire department might respond to an emergency, agreements designating primary emergency authority to a specific police and a specific fire department, and agreements with any others to provide support to the primary emergency authority;
- (3) Agreements with State emergency response teams, emergency response contractors, and equipment suppliers; and
- (4) Arrangements to familiarize local hospitals with the properties of hazardous waste handled at the facility and the types of injuries or illnesses which could result from the fires, explosions, or releases at the facility.

Brite-Sol Services, Inc. is in violation of 40 CFR 262.34 (a)(4), adopted by reference at 15A NCAC 13A .0107, referenced at 40 CFR 265.37, adopted by reference at 15A NCAC 13A .0110, in that they failed to make the following arrangements, as appropriate for the type of waste handled at the facility and the potential need for the services of these organizations:

qualified to act as emergency coordinator (see Section 265.55), and this list must be kept up to date. Where more than one person is listed, one must be named as primary emergency coordinator and others must be listed in the order in which they will assume responsibility as alternates.

9. 40 CFR 265.53(b), adopted by reference at 15A NCAC 13A .0110, states that a copy of the contingency plan and all revisions must be submitted to all local police departments, hospitals, and State and local emergency response teams that may be called upon to provide emergency services.

Brite-Sol Services, Inc. is in violation of 40 CFR 262.34 (a)(4), adopted by reference at 15A NCAC 13A .0107, referenced at 40 CFR 265.53(b), adopted by reference at 15A NCAC 13A .0110, in that the facility failed to submit copies of their contingency plan and all revisions to all local police departments, hospitals, and State and local emergency response teams that may be called upon to provide emergency services.

10. 40 CFR 265.54(d), adopted by reference at 15A NCAC 13A .0110, states that the contingency plan must be reviewed, and immediately amended, if necessary, whenever the list of emergency coordinators changes.

Brite-Sol Services, Inc. is in violation of 40 CFR 262.34 (a)(4), adopted by reference at 15A NCAC 13A .0107, referenced at 40 CFR 265.54(d), adopted by reference at 15A NCAC 13A .0110, in that the facility failed to immediately amend their contingency plan to show a change in the emergency coordinator. Specifically, during the inspection, a review of the facility's contingency plan indicated that Terminal Manager, Mr. Al Relf, had not been added as the replacement for previous Terminal Manager as the primary emergency coordinator.

- B. 15A NCAC 13A .0110(i), states that the owner or operator shall keep records and results of required inspections for at least three years from the date of the inspection.

Brite-Sol Services, Inc. is in violation of 15A NCAC 13A .0110(i), in that the facility failed to keep records and results of required inspections for at least three years from the date of the inspection. During the inspection, documentation of required weekly inspections could not be provided for November 1998.

8. Ensure that the facility's contingency plan lists the names, addresses, and phone numbers (office and home) of all persons qualified to act as emergency coordinator. Where more than one person is listed, one must be named as primary emergency coordinator and others must be listed in the order in which they will assume responsibility as alternates as required by 40 CFR 265.52(d), adopted by reference at 15A NCAC 13A .0110. - Facility has listed the emergency coordinator and all applicable requirements. In Compliance

9. Ensure that a copy of the facility's contingency plan and all revisions must be submitted to all local police departments, hospitals, and State and local emergency response teams that may be called upon to provide emergency services as required by 40 CFR 265.53(b), adopted by reference at 15A NCAC 13A .0110. In Compliance
facility will fax documentation of certified mail receipts at a later date

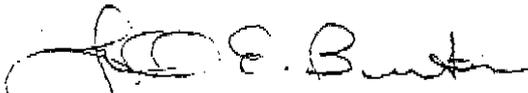
10. Ensure that the facility's contingency plan has been reviewed, and amended to show the change in emergency coordinators as required by 40 CFR 265.54(d), adopted by reference at 15A NCAC 13A .0110. Facility's contingency plan shows Mr. Al Rose as the primary emergency coordinator. In Compliance

B. Comply with 15A NCAC 13 .0110(i). Brite-Sol Services, Inc. shall keep records and results of required inspections for at least three years from the date of the inspection. The facility has continued to perform and document their weekly inspections. In Compliance

If the requirements above are not met, pursuant to N.C.G.S. 130A-22(a) and 15A NCAC 13A.0701-.0707, an administrative penalty of up to \$25,000.00 per day may be assessed for violation of the hazardous waste law or regulations.

If you have any questions concerning this matter, you may contact Mr. Joseph Parker at (704)663-1699.

Sincerely,



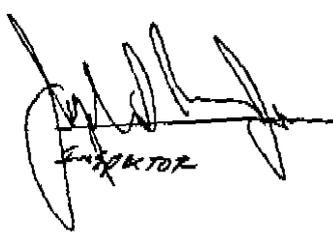
Jill Burton, Acting Chief
Hazardous Waste Section

COMMENTS: Once the facility submits documentation of the certified mail receipts, the facility will be shown in compliance with NOV Docket # 99-109

cc: Doug Holyfield
~~Joe Parker~~
Central Files

Facility has submitted copies of the certified mail receipts for violation A-9. Facility is in compliance with NOV Docket # 99-109.

**CERTIFIED MAIL receipt dates were May 21, + 24, 1999.*



INSPECTOR



facility contact

RCRA INSPECTION REPORT

X - VIOLATION NOTED NA - NOT APPLICABLE

Facility Name: Brite-Sol Services, Inc.
Location: 1200 Exchange Street, Charlotte, N.C. 28208
Mailing Address: _____
EPA ID#: NCR 000 000 414 Phone Number: (704) 394-6361
Contact/Title: Gabby Smith - Manager, Al Relf - Terminal Manager
Inspection Date: May 11, 1999 Last Inspection: Jan. 14, 1999
Status: LOG Type of Inspection: CSE
Inspector(s): Joseph Parker - Waste Management Specialist
Present at Inspection: Gabby Smith - Brite-Sol Services, Al Relf -
Brite-Sol Services (Reinspection comments will be in bold face)

Type of Business: Brite-Sol Services Inc. operates as a tank
cleaning operation. The facility cleans large trailer tanks,
totes, and drums.

Wastes Generated: The facility has generated the following types
of hazardous waste since the last inspection:

U188 - Waste Phenol Solutions
D001 - Waste Flammable Liquids (resins, disobutylene)
D001 - Waste Flammable Liquids (resin, xylene)

Manifests: Approved Transporters ? Yes Approved TSDF ? Yes
Filled Out Correctly ? Yes Signed Copies ? Yes
LDR Notification Attached ? Yes

The facility's 1997 and 1998 hazardous waste manifests were
reviewed. They were found in good order.

Transporters: Safety-Kleen, Inc. - SCD 987 574 647
Safeway Chemical Transportation - DER 000 000 273

TSDs: Safety-Kleen, Inc - NCD 000 648 451
Chemical Solvents - OHD 980 897 656
Southdown - TND 981 920 119

Waste Minimization: The facility's waste minimization program
includes sending any leftover material back to the original
generator and they recycle any solvents that are recovered.

Inspection Records:

Evidence that inspections are conducted: The facility does document
their weekly inspections. During the inspection, the facility
could not provide documentation of the weekly inspections conducted
in November of 1998. These inspections need to be retained for
three years after the inspection is conducted. The facility has
continued to perform and document their weekly inspections. They
understand that these inspections need to be available for
inspections for a period of three years after the date of
inspection. In Compliance.

Page Two - RCRA Inspection Report

Facility Name: Brite-Sol Services, Inc.

EPA ID#: NCR 000 000 414 Inspection Date: May 11, 1999

Inspections on Storage Area: Yes, conducted weekly

Inspections on H.W. Tanks: N/A

Inspections on Ancillary Equipment: N/A

Contingency Plan:

On-Site ? Yes

Any changes to facility/processes or Emergency Coordinator since last review? Yes, the facility failed to amend their contingency plan to show a change in their emergency coordinator. The facility has named Mr. Al Relf the Emergency Coordinator for the site. In Compliance. Additionally, the following deficiencies were noted after review the facility's contingency plan: (1) No hospital was designated for emergencies. The facility has designated University Hospital as choice for medical emergencies. In Compliance. (2) The contingency plan did not have a list of personnel that were qualified to act as an emergency coordinator. The facility has named Mr. Al Relf the Emergency Coordinator for the site. No alternate has been named. In Compliance. (3) No documentation was provided to show that emergency agencies had received a copy of previous contingency plans. The facility has provided copies of the Certified Mail receipts to the State for documentation of arrangements made. The facility came into compliance on May 21, 1999. In Compliance.

Contingency Plan Implemented? No (If yes, was it adequate?)

Agreements with Emergency Responders? No agreements with emergency agencies were documented within the contingency plan. The facility's contingency plan describes the agreements made with local emergency agencies. A copy of the facility's contingency plan was provided to the State. In Compliance.

Training Records:

Certified Training Documents Available? The facility's training dates were available. But, the following items could not be provided during the inspection: (1) a job title for each position related to hazardous waste management. The facility has assigned job titles for facility personnel working in their hazardous waste management program. In Compliance. (2) a written job description for each position listed in the hazardous waste management program. The facility documented job descriptions for facility personnel working in their hazardous waste management program. In Compliance. (3) No written description of the type and amount of both introductory and continuing that will be given to each person filling a position in the hazardous waste management program. The facility has documented written descriptions of the type of training facility personnel receive while being in their hazardous waste management program. In Compliance. (4) No training records on past employees. Facility's policy will be to keep these records

Page Three - RCRA Inspection Report

Facility Name: Brite-Sol Services, Inc.

EPA ID#: NCR 000 000 414 Inspection Date: May 11, 1999

in the future. In Compliance.

New Employees Since Last Inspection? Yes, all new employees since the last inspection. They have all been trained.

Evidence of Improper/Inadequate Training? Yes, the facility failed to train their employees within a 365 day time limit. Their past two training dates were Feb. 2, 1997 and Nov. 8, 1998. The facility is aware of the 365 day time limit and plans conducting their next training on or before Nov. 8, 1999. In Compliance.

Annual Report Submitted? Yes

Emergency Preparedness:

Facility Maintained and Operated to Prevent Releases? No releases of hazardous waste observed.

Internal Communications or Alarm Present? The facility has an internal alarm system with activation switches throughout the facility and telephones.

Portable Fire Extinguishers and/or Fire Control Equipment? The facility has fire extinguishers throughout the facility.

Spill Control Equipment: The facility has the following spill control equipment: absorbent material such as booms, pads, loose material, brooms and PPE.

Adequate Water Volume, Foam Equipment or Auto Sprinklers? No automatic sprinklers

All Equipment/Alarms Tested and Maintained? Alarm system tested periodically

All Personnel Handling HW have Access to Alarm/Device? The facility has activation switches throughout the facility and telephones.

Adequate Aisle Space in Areas of Facility Operation? Yes

Satellite Accumulation Area(s): 0

Location(s): The facility does not have any satellite accumulation areas for hazardous waste. Once the facility cleans a tank out, the material is containerized and stored in their 90 day storage area.

Satellite Containers: Closed? N/A

Labeled/Contents Identified? N/A

< 55 Gallons? N/A

Releases? N/A

Page Four - RCRA Inspection Report

Facility Name: Brite-Sol Services, Inc.

EPA ID#: NCR 000 000 414 Inspection Date: May 11, 1999

Storage Area(s): 1

Description(s): The facility's 90 day storage area for hazardous waste is located in their cleaning bay. During the inspection, no hazardous waste containers were in storage.

Containers: Closed? N/A Aisle Space? N/A Labeled? N/A
Dated? N/A Evidence of Release? N/A
< 90 Days? N/A Good Condition? N/A

Other HW Units: (Applicable Regulations)

Description of Unit: None

External Facility Condition: Good

Site Deficiencies:

The following is a list of site deficiencies noted during the inspection conducted on January 14, 1999.

1. 40 CFR 262.34(a)(4) ref. 40 CFR 265.16(c) - Personnel Training. Facility personnel must take part in an annual review of the initial training required in paragraph (a) of this section. During the inspection, it was noted that facility exceeded the 365 day time limit between training events. Their hazardous waste management training was conducted on Feb. 2, 1997 and not again until Nov. 8, 1998. In Compliance.
2. 40 CFR 262.34(a)(4) ref. 40 CFR 265.16(d)(1) - The facility failed to assign job titles for each position related to hazardous waste management, and the name of the employee filling each job. In Compliance.
3. 40 CFR 262.34(a)(4) ref. 40 CFR 265.16(d)(2) - The facility failed to list written job descriptions for each position listed under paragraph (d)(1) of this section. This description may be consistent in its degree of specificity with descriptions for other similar positions in the same company location or bargaining unit, but must include the requisite skill, education, or other qualifications, and duties of facility personnel assigned to each position. In Compliance.
4. 40 CFR 262.34(a)(4) ref. 40 CFR 265.16(d)(3) - The facility failed to have a written description of the type and amount of both introductory and continuing training that will be given to each person filling a position listed under paragraph (d)(1) of this section. In Compliance.

5. 40 CFR 262.34(a)(4) ref. 40 CFR 265.16(e) - Training records on current personnel must be kept until the closure of the facility. Training records on former employees must be kept for at least three years from the date the employee last worked at the facility. Personnel training records may accompany personnel transferred within the same company. The facility failed to retain training records of former employees working in their hazardous waste management program. In Compliance.

6. 40 CFR 262.34(a)(4) ref. 40 CFR 265.37 - The facility failed to make the following arrangements, as appropriate for the type of waste handled at the facility and the potential need for the services of these organizations:
 - (1) Arrangements to familiarize police, fire departments, and emergency response teams with the layout of the facility, properties of hazardous waste handled at the facility and associated hazards, places where facility personnel would normally be working, entrances to roads inside the facility, and possible evacuation routes;
 - (2) Where more than one police and fire department might respond to an emergency, agreements designating primary emergency authority to a specific police and a specific fire department, and agreements with any others to provide support to the primary emergency authority;
 - (3) Agreements with State emergency response teams, emergency response contractors, and equipment suppliers; and
 - (4) Arrangements to familiarize local hospitals with the properties of hazardous waste handled at the facility and the types of injuries or illnesses which could result from the fires, explosions, or releases at the facility.

(b) Where State or local authorities decline to enter into such arrangements, the owner or operator must document the refusal in the operating record. In Compliance.

7. 40 CFR 262.34(a)(4) ref. 40 CFR 265.52(c) - The facility's contingency plan failed to describe arrangements agreed to by local police departments, fire departments, hospitals, contractors, and State and local emergency response teams to coordinate emergency services, pursuant to Section 265.37. In Compliance.

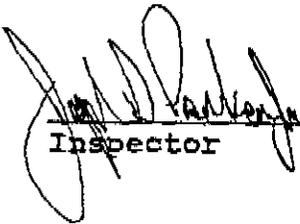
8. 40 CFR 262.34(a)(4) ref. 40 CFR 265.52(d) - The facility's contingency plan failed to list the names, addresses, and phone numbers (office and home) of all persons qualified to

act as emergency coordinator (see Section 265.55), and this list must be kept up to date. Where more than one person is listed, one must be named as primary emergency coordinator and others must be listed in the order in which they will assume responsibility as alternates. In Compliance.

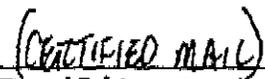
9. 40 CFR 262.34(a)(4) ref. 40 CFR 265.53(b) - The facility failed to submit copies of their contingency plan to all local police departments, hospitals, and State and local emergency response teams that may be called upon to provide emergency services. In Compliance.
10. 40 CFR 262.34(a)(4) ref. 40 CFR 265.54(d) - Amendment of contingency plan. The contingency plan must be reviewed, and immediately amended, if necessary, whenever the list of emergency coordinators changes. During the inspection, a review of the facility's contingency plan indicated that Terminal Manager, Mr. Al Relf, had not been added as the replacement for previous Terminal Manager as the primary emergency coordinator. Mr. Relf took over for the previous Terminal Manager approximately six months prior to the inspection. In Compliance.
11. 15A NCAC 13A .0110(i) - Inspections. The facility failed to keep records and results of required inspections for at least three years from the date of the inspection. During the inspection, documentation of required weekly inspections could not be provided for November 1998. In Compliance.

Follow Up Inspection: May 11, 1999

Comments: The facility was found to be in compliance with the requirements of Notice of Violation Docket #99-109. If the facility has any questions please contact Joe Parker at the Mooresville Regional Office (704) 663-1699.


Inspector (Date)

6-11-99


Facility Contact

(Date)