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) 1-3-96	CEI Report
(2) 2-19-96	TAV Report
(3) 5-23-01	CSE Report
(4) 3-7-01	CEI Report & NOV
(5) 3-23-01	CSE Report & NOV
(6) 9-12-02	OTH Report
(7) 11-7-02	CEI Report
(8) 12-19-02	CSE Report

HAZARDOUS WASTE SECTION (Review 8/93)

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

Purpose: The attached form will be used as a file folder docket. EPA have requested that we list the content of each file folder docket will be used to provide a folder content list.

Preparation: This form will be completed by the Section file clerk. It identifies what document it is -- a letter, a report, a memo, etc. Filing is by date with the last entry on the top of the file folder and the bottom of the file docket.

Disposition: This form may be destroyed in accordance with the Solid Waste Management Division Section of the Records Disposition Schedule published by the North Carolina Division of Archives and History.

Hazardous Waste Compliance Data Entry Form – Side A

AEW 11/12 (7)

EPA ID Number: NCR000001651

Facility Name: American Distillation Inc. City: Leland

EVALUATION DATA New: ✓ Change: ___ Delete: ___

	Mo.	Day	Yr.	Type:
Date:	11	7	02	C E I
Date:	/	/		

KB 11/22/

Inspector ID #: 036 Reason: ___

Evaluation Comments:

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) ___ Docket # 2003-018
- or
- no longer a SNC (SNN eval.) ___

Bobby

YES / NO CSE ONLY

Waste Involved	Volume	Exposure Media (a, gw, sw, s)	Distance to Residences	Number of People involved	Distance to On-site wells	Distance to Off-site wells

#1 Type: GRR Date Determined 11/07/02 Class: II

Priority: ___ Branch: 07 Person: 36

Return to Compliance 12/07/02 (*Scheduled*) ___/___/___ (*Actual*)

Reg. Type: SR Reg. Description: 262.34(a)(4) - 265.16(c)

Comment: Failure to train emergency coordinator

#2 Type: GRR Date Determined: 11/07/02 Class: II

Priority: ___ Branch: 07 Person: 36

Return to Compliance: 12/07/02 (*Scheduled*) ___/___/___ (*Actual*)

Reg. Type: SR Reg. Description: 262.34(a)(4) - 265.16(d)(2)

Comment: Failure to maintain written job descriptions.

Side B EPA ID # NCR000001651

3 Type: G R R Date Determined: 1 1 0 7 1 0 2 Class: II

Priority: ___ Branch: 0 7 Person: 3 6

Return to Compliance: 1 2 1 0 7 1 0 2 (*Scheduled*) __/__/__ (*Actual*)

Reg. Type: S R Reg. Description: 262.34(a)(4) - 265.52(a)

Comment: Failure to describe emergency actions to be taken in contingency plan.

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4 Type: G R R Date Determined: 1 1 0 7 1 0 2 Class: II

Priority: ___ Branch: 0 7 Person: 3 6

Return to Compliance: 1 2 1 0 7 1 0 2 (*Scheduled*) __/__/__ (*Actual*)

Reg. Type: S R Reg. Description: 262.34(a)(4) - 265.52(c)

Comment: Failure to describe arrangements with local authorities

---

___ Type: ___ Date Determined: __/__/__ Class: ___

Priority: ___ Branch: ___ Person: ___

Return to Compliance: __/__/__ (*Scheduled*) __/__/__ (*Actual*)

Reg. Type: ___ Reg. Description: ___

Comment: ___

___ Type: ___ Date Determined: __/__/__ Class: ___

Priority: ___ Branch: ___ Person: ___

Return to Compliance: __/__/__ (*Scheduled*) __/__/__ (*Actual*)

Reg. Type: ___ Reg. Description: ___

Comment: ___

___ Type: ___ Date Determined: __/__/__ Class: ___

Priority: ___ Branch: ___ Person: ___

Return to Compliance: __/__/__ (*Scheduled*) __/__/__ (*Actual*)

Reg. Type: ___ Reg. Description: ___

Comment: ___

Side B EPA ID # NCR000001651

#3 Type: GRR Date Determined: 11/07/02 Class: II

Priority: ___ Branch: 07 Person: 36

Return to Compliance: 12/07/02 (*Scheduled*) __/__/__ (*Actual*)

Reg. Type: SR Reg. Description: 262.34(a)(4) - 265.52(a)

Comment: Failure to describe emergency actions to be taken in contingency plan.

#4 Type: GRR Date Determined: 11/07/02 Class: II

Priority: ___ Branch: 07 Person: 36

Return to Compliance: 12/07/02 (*Scheduled*) __/__/__ (*Actual*)

Reg. Type: SR Reg. Description: 262.34(a)(4) - 265.52(c)

Comment: Failure to describe arrangements with local authorities

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#___ Type: ___ Date Determined: __/__/__ Class: ___

Priority: ___ Branch: ___ Person: ___

Return to Compliance: __/__/__ (*Scheduled*) __/__/__ (*Actual*)

Reg. Type: ___ Reg. Description: ___

Comment: ___

#___ Type: ___ Date Determined: __/__/__ Class: ___

Priority: ___ Branch: ___ Person: ___

Return to Compliance: __/__/__ (*Scheduled*) __/__/__ (*Actual*)

Reg. Type: ___ Reg. Description: ___

Comment: ___

#___ Type: ___ Date Determined: __/__/__ Class: ___

Priority: ___ Branch: ___ Person: ___

Return to Compliance: __/__/__ (*Scheduled*) __/__/__ (*Actual*)

Reg. Type: ___ Reg. Description: ___

Comment: ___

Hazardous Waste Compliance Data Entry Form – Side A

aew 11/12 (7)

EPA ID Number: N C R 0 0 0 0 0 1 6 5 1

Facility Name: American Distillation Inc. City: Leland

EVALUATION DATA New: ✓ Change: ___ Delete: ___

	Mo.	Day	Yr.	Type:
Date:	11	7	02	C E I
Date:	/	/		

KB 11/22/

Inspector ID #: 0 3 6 Reason: ___

Evaluation Comments:

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) ___ Docket # 2003-018
- or
- no longer a SNC (SNN eval.) ___

Bobby

YES / NO CSE ONLY

Waste Involved	Volume	Exposure Media (a, gw, sw, s)	Distance to Residences	Number of People involved	Distance to On-site wells	Distance to Off-site wells

#1 Type: G R R Date Determined 1 1 1 0 7 1 0 2 Class: II

Priority: ___ Branch: 0 7 Person: 3 6

Return to Compliance 1 2 1 0 7 1 0 2 (*Scheduled*) ___ / ___ / ___ (*Actual*)

Reg. Type: S R Reg. Description: 262.34(a)(4) - 265.16(c)

Comment: Failure to train emergency coordinator.

#2 Type: G R R Date Determined: 1 1 1 0 7 1 0 2 Class: II

Priority: ___ Branch: 0 7 Person: 3 6

Return to Compliance: 1 2 1 0 7 1 0 2 (*Scheduled*) ___ / ___ / ___ (*Actual*)

Reg. Type: S R Reg. Description: 262.34(a)(4) - 265.16(d)(2)

Comment: Failure to maintain written job descriptions.

Waste Management Division
Hazardous Waste Section

NOTICE OF VIOLATION

To: American Distillation Inc.
1650 NE Raster Rd.
Leland, NC 28451

Docket # 2003-018
Inspection Date: 7 November 2002
Facility Type: LQG

EPA ID# NCR 000 001 657

On December 18, 1980, the State of North Carolina, Hazardous Waste Section (State) was authorized to operate the State 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.

On 7 November, 2002, Robert K. Nelms, representing the N.C. Hazardous Waste Section, inspected your facility for compliance with North Carolina Hazardous Waste Management Rules. During that inspection, the following violations were noted:

Citation	Specifics
40 CFR	262.34 (a)(4) - 265.16 (c) Failure to provide annual training for the alternate emergency coordinator.
40 CFR	262.34 (a)(4) - 265.16 (d)(2) Failure to maintain a written job description of each position trained in hazardous waste management.
40 CFR	262.34 (a)(4) - 265.52 (a) Failure to describe the actions personnel must take in case of fire or spill.
40 CFR	262.34 (a)(4) - 265.52 (c) Failure to describe the arrangements agreed to by local authorities.

(over)

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

COMPREHENSIVE EVALUATION INSPECTION (CEI) REPORT

1. FACILITY INFORMATION:

Name: American Distillation Inc.
EPA ID Number: NCR 000 001 651
Type of Facility: Large Quantity Generator
Facility Location: 1690 NE Royster Road
Leland, NC 28451
Telephone Number: 910-371-0993

OWNERSHIP: Andrew Simmons / Larry Rosette / Will Oliver / Hugh Croom

2. FACILITY CONTACT: Hugh Croom

3. SURVEY PARTICIPANTS: Hugh Croom, Mike Williford
Robert K. Nelms - NCDENR

4. DATE OF INSPECTION: 7 November 2002

5. PURPOSE OF INSPECTION: Unannounced audit to determine compliance with regulations described at 40 CFR 261, 262, 265, 268 and 279.

6. FACILITY DESCRIPTION:

ADI produces high grade industrial alcohol from crude alcohol by distillation. The process requires bulk storage for incoming and outgoing products, steam heating and cooling equipment, specialized distillation apparatus and associated pumps and piping.

7. HAZARDOUS WASTE STREAMS INCLUDE:
D001 Waste Flammable Liquid (Bi Products, Methanol, Ethanol)
Still Bottoms and Laboratory reagents. (D001, F005)

8. AREAS OF REVIEW AND INSPECTION :

- Emergency Preparedness — Contingency Plan
- Inspection Records (storage) — Manifests / LDR
- Training Records — Biennial Report
- Transporters:
  Hazmat Environmental Group / Sumpter Trans. / Nappi Trucking
  NYD 980 769 947 / SCD 987 584 778 / NJD 000 813 477
- TSD's:
  Giant Resource Recovery / Southeastern Chem
  VAD 077 942 266 / SCD 036 275 626
- Accumulation Areas:
  One 55 gallon drum - labeled, dated
- Storage Areas:
  No waste in storage
- External Condition of Facility: No Adverse Conditions

9. WASTE MINIMIZATION: Source Reduction

10. SITE DEFICIENCIES:
262.34(a)(4) - 265.52(a) Failure to describe the actions personnel must take in case of fire or spill.
262.34(a)(4) - 265.52(c) Failure to describe the arrangement agreed to by local authorities
262.34(a)(4) - 265.16(c) Failure to provide annual training for the alternate emergency coordinator

11. ~~RECOMMENDATIONS:~~
262.34(a)(4) - 265.16(d)(2) Failure to maintain a written job description of each position trained in hazardous waste management.

Robert K. Nelms DATE: 7 Nov. 2002 [signature] DATE: 11/7/02
Robert K. Nelms — Facility Representative
Waste Management Specialist, NCDENR

Hazardous Waste Compliance Data Entry Form – Side A

EPA ID Number: N C R 0 0 0 0 0 1 6 5 1

MEW 1/10 (8)

Facility Name: American Distillation Inc. City: Leland

EVALUATION DATA New: ✓ Change: ___ Delete: ___

	Mo.	Day	Yr.	Type:
Date:	11	7	02	C E I
Date:	12	19	02	C S E

KB 1-13-03

Inspector ID #: 0 3 6 Reason: 0 1

Evaluation Comments:

Bobby

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) ____ Docket # 2003-018

or

- no longer a SNC (SNN eval.) ____

YES / NO CSE ONLY

Waste Involved	Volume	Exposure Media (a, gw, sw, s)	Distance to Residences	Number of People involved	Distance to On-site wells	Distance to Off-site wells

#1 Type: G R R Date Determined 1 1 1 0 7 1 0 2 Class: II

Priority: ___ Branch: 0 7 Person: 3 6

Return to Compliance 1 2 1 0 7 1 0 2 (*Scheduled*) 1 2 1 1 9 1 0 2 (*Actual*)

Reg. Type: S R Reg. Description: 262.34(a)(4) - 265.16(c)

Comment: Failure to train emergency coordinator.

#2 Type: G R R Date Determined: 1 1 1 0 7 1 0 2 Class: II

Priority: ___ Branch: 0 7 Person: 3 6

Return to Compliance: 1 2 1 0 7 1 0 2 (*Scheduled*) 1 2 1 1 1 0 1 (*Actual*)

Reg. Type: S R Reg. Description: 262.34(a)(4) - 265.16(d)(2)

Comment: Failure to maintain written job descriptions.

JAN 2003 ENTERED RCRIS

Side B EPA ID # NCR000001651

3 Type: GRR Date Determined: 11/07/02 Class: II

Priority: ___ Branch: 07 Person: 36

Return to Compliance: 12/07/02 (*Scheduled*) 12/19/02 (*Actual*)

Reg. Type: SR Reg. Description: 262.34(a)(4) - 265.52(a)

Comment: Failure to describe emergency actions to be taken in contingency plan.

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4 Type: GRR Date Determined: 11/07/02 Class: II

Priority: ___ Branch: 07 Person: 36

Return to Compliance: 12/07/02 (*Scheduled*) 12/19/02 (*Actual*)

Reg. Type: SR Reg. Description: 262.34(a)(4) - 265.52(c)

Comment: Failure to describe arrangements with local authorities

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#___ Type:___ Date Determined:___/___/___ Class: ___

Priority:___ Branch:___ Person:___

Return to Compliance: ___/___/___ (*Scheduled*) ___/___/___ (*Actual*)

Reg. Type: ___ Reg. Description:___

Comment:___

#___ Type:___ Date Determined:___/___/___ Class: ___

Priority:___ Branch:___ Person:___

Return to Compliance: ___/___/___ (*Scheduled*) ___/___/___ (*Actual*)

Reg. Type: ___ Reg. Description:___

Comment:___

#___ Type:___ Date Determined:___/___/___ Class: ___

Priority:___ Branch:___ Person:___

Return to Compliance: ___/___/___ (*Scheduled*) ___/___/___ (*Actual*)

Reg. Type: ___ Reg. Description:___

Comment:___

Side B EPA ID # NCR000001651

3 Type: G R R Date Determined: 1 1/0 7/0 2 Class: II

Priority: ___ Branch: 0 7 Person: 3 6

Return to Compliance: 1 2/0 7/0 2 (*Scheduled*) 1 2/1 9/0 2 (*Actual*)

Reg. Type: S R Reg. Description: 262.34(a)(4) - 265.52(a)

Comment: Failure to describe emergency actions to be taken in contingency plan.

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4 Type: G R R Date Determined: 1 1/0 7/0 2 Class: II

Priority: ___ Branch: 0 7 Person: 3 6

Return to Compliance: 1 2/0 7/0 2 (*Scheduled*) 1 2/1 9/0 2 (*Actual*)

Reg. Type: S R Reg. Description: 262.34(a)(4) - 265.52(c)

Comment: Failure to describe arrangements with local authorities

---

___ Type: ___ Date Determined: __/__/__ Class: ___

Priority: ___ Branch: ___ Person: ___

Return to Compliance: __/__/__ (*Scheduled*) __/__/__ (*Actual*)

Reg. Type: ___ Reg. Description: ___

Comment: ___

___ Type: ___ Date Determined: __/__/__ Class: ___

Priority: ___ Branch: ___ Person: ___

Return to Compliance: __/__/__ (*Scheduled*) __/__/__ (*Actual*)

Reg. Type: ___ Reg. Description: ___

Comment: ___

___ Type: ___ Date Determined: __/__/__ Class: ___

Priority: ___ Branch: ___ Person: ___

Return to Compliance: __/__/__ (*Scheduled*) __/__/__ (*Actual*)

Reg. Type: ___ Reg. Description: ___

Comment: ___

Hazardous Waste Compliance Data Entry Form – Side A

EPA ID Number: NCR000001651

MEW 1/10 (8)

Facility Name: American Distillation Inc. City: Leland

EVALUATION DATA New: ✓ Change: ___ Delete: ___

	Mo.	Day	Yr.	Type:
Date:	11	7	02	CEI
Date:	12	19	02	CSE

KB 1-13-03

Inspector ID #: 036 Reason: 01

Evaluation Comments:

Bobby

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) ___ Docket # 2003-018

or

- no longer a SNC (SNN eval.) ___

YES / NO CSE ONLY

Waste Involved	Volume	Exposure Media (a, gw, sw, s)	Distance to Residences	Number of People involved	Distance to On-site wells	Distance to Off-site wells

#1 Type: GRR Date Determined 11 07 02 Class: II

Priority: ___ Branch: 07 Person: 36

Return to Compliance 12 07 02 (*Scheduled*) 12 11 9 02 (*Actual*)

Reg. Type: SR Reg. Description: 262.34(a)(4) - 265.16(c)

Comment: Failure to train emergency coordinator

#2 Type: GRR Date Determined: 11 07 02 Class: II

Priority: ___ Branch: 07 Person: 36

Return to Compliance: 12 07 02 (*Scheduled*) 12 11 10 (*Actual*)

Reg. Type: SR Reg. Description: 262.34(a)(4) - 265.16(d)(2)

Comment: Failure to maintain written job descriptions.

JAN 2003 ENTERED RCRIS

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

COMPLIANCE SCHEDULE EVALUATION (CSE) REPORT

1. **FACILITY INFORMATION:** **DOCKET #** 2003-018

Name: American Distillation Inc.
EPA ID Number: NCR 000 001 651
Type of Facility: LQG
Facility Location: 1690 N.E. Royster Rd.
Leland, NC 28451
Telephone Number: 910-371-0993

2. **FACILITY CONTACT:** Hugh Croom

3. **SURVEY PARTICIPANTS:** Larry Rosette
Robert K. Nelms - NCDENR

4. **DATE OF EVALUATION:** 19 December 2003

5. **PURPOSE OF EVALUATION:** Follow-up inspection to determine status of compliance with the Notice of Violation Docket # 2003-018. The NOV was issued subsequent to the RCRA inspection conducted on 7 November 2003

6. **FACILITY DESCRIPTION:** REFER TO PREVIOUS INSPECTION.

HAZARDOUS WASTE STREAMS INCLUDE: REFER TO PREVIOUS INSPECTION.

7. **AREAS RE-INSPECTED DURING EVALUATION:**
(OK = previous deficiency corrected; V = violation observed; NA = not applicable to this inspection)

- OK Contingency Plan
- OK Personnel Training Records
- N/A Accumulation Areas
- N/A Storage Areas
- N/A Inspection Logs
- N/A Manifests
- N/A OTHER

EPA ID # NCR 000001651

DOCKET # 2003-018

8. **PREVIOUS VIOLATIONS / DEFICIENCIES:**
Violation(s) previously cited pertained to the following regulation(s):

- 40 CFR 262.34(a)(4) - 265.52 (a)
- 40 CFR 262.34 (a)(4) - 265.52(c)
- 40 CFR 262.34 (a)(4) - 265.16 (c)
- 40 CFR 262.34 (a)(4) - 265.16 (d)(2)

9. **CONCLUSION(s):**

ADI is in compliance with the requirements of NOV docket # 2003-018 dated 7 November 2002

Robert K. Nelms DATE: Dec. 19, 2002
Robert K. Nelms
Waste Management Specialist, NCDENR

Larry Rouette DATE: 12/19/02
Facility Representative