



North Carolina Department of Environment and Natural Resources

Dexter R. Matthews, Director

Division of Waste Management

Michael F. Easley, Governor

William G. Ross Jr., Secretary

August 21, 2007

**CERTIFIED MAIL
RETURN RECEIPT REQUESTED**

ROBERT PERKINS
OR CURRENT FACILITY WASTE CONTACT
HOME DEPOT # HD 3603
1905 ASTON AVE. SUITE # 100
CARLSBAD CA 92008

**RE: HOME DEPOT # HD 3603
NCR 000 000 604**

Dear Mr. Perkins:

Please find enclosed a copy of the 2006/2007 hazardous waste fee invoice and the 2007/2008 hazardous waste fee invoice. Your facility failed to pay its hazardous fee for the 2006/2007 fiscal year. North Carolina hazardous waste facilities were invoiced on January 13, 2007 with a due date of February 12, 2007. As of the date of this letter payment has not been received for the 2006/2007 hazardous fee. If payment is not received within 30 days of receipt of this letter an enforcement action will be levied against your facility with a penalty in the amount of \$440.00 for the unpaid 2006/2007 hazardous waste fee. The 2007/2008 invoice is also due within 30 days of receipt of this letter.

If you have questions, please call Phillystine Spinks at 919 508-8561 or Helen Cotton at 919-508-8537.

Sincerely,

Elizabeth W. Cannon, Chief
Hazardous Waste Section

cc: ✓ Central Files
Phillystine Spinks

NCR000000604 HOME DEPOT # 3603

County: MECKLENBURG	Source Type: S	Seq. Number: 29	Receive Date: 19-Nov-2007
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Location 8135 UNIVERSITY CITY BLVD
Address: CHARLOTTE, NC 28213

Mailing 1905 ASTON AVE #100
Address: CARLSBAD, CA 92008

Contact Person	BECKY WILBANKS	1905 ASTON AVE #100
For Source Information	(760) 602-8700	CARLSBAD, CA 92008
		US

Owner (current)	2455 PACES FERRY RD	Type: P
HOME DEPOT USA INC	ATLANTA, GA 30339	
From: 06/30/1994	To:	Phone:

Operator (current)	HOME DEPOT USA INC	Type: P
From: 06/30/1994	To:	Phone:

Land Type: P	Non Notifier: E	Commercial Availability: U	Tsd Date:
Accessibility:	No. Employees:	State District:	

Regulated Waste Activities

Hazardous Waste Generator Status - Federal: Small Quantity Generator; State: Small Quantity Generator

Transfer Facility:	U
Other Hazardous Waste Generator Activities	
Importer Activity:	No
Mixed Waste Generator:	No

Transporter Activity:	No
TSD Activity:	No
Recycler Activity:	No

Exempt Boiler and/or Industrial Furnace	
Small Quantity Onsite Burner Exemption:	No
Smelting, melting, Refining Furnace Exemption:	No

Used Oil Activities

Used Oil Transport Activity	Off-Specification Used Oil Burner:	No
Transporter:	No	
Transfer Facility:	No	
Used Oil Processor and/or Re-refiner Activity		
Processor:	No	
Refiner:	No	
Used Oil Fuel Marketer Activity		
Marketer who direct shipment off-specification used oil to off-specification used oil burner:		
		No
Marketer who first claims the used oil meets the specifications:		
		No

Underground Injection Control:	No	Destination Facility for Universal Waste:	No
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<p>SEND COMPLETED FORM TO: The Appropriate State or EPA Regional Office.</p>	<p align="center">United States Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION FORM</p>		
<p>1. Reason for Submittal (See instructions on page 13.) MARK ALL BOX(ES) THAT APPLY</p>	<p>Reason for Submittal:</p> <p><input type="checkbox"/> To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities)</p> <p><input checked="" type="checkbox"/> To provide Subsequent Notification of Regulated Waste Activity (to update site identification information)</p> <p><input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application</p> <p><input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____)</p> <p><input type="checkbox"/> As a component of the Hazardous Waste Report</p>		
<p>2. Site EPA ID Number (page 14)</p>	<p>EPA ID Number <u>NC R 0 0 0 1 0 0 0 1 6 0 4</u></p>		
<p>3. Site Name (page 14)</p>	<p>Name: <u>HOME DEPOT # 3603</u></p>		
<p>4. Site Location Information (page 14)</p>	<p>Street Address: <u>8135 UNIVERSITY CITY BLVD</u></p>		<p>State: <u>NC</u></p>
<p>City, Town, or Village: <u>CHARLOTTE</u></p>		<p>Zip Code: <u>28213</u></p>	
<p>County Name: <u>MECKLENBURG</u></p>			
<p>5. Site Land Type (page 14)</p>	<p>Site Land Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p>		
<p>6. North American Industry Classification System (NAICS) Code(s) for the Site (page 14)</p>	<p>A. <u>444110</u></p>	<p>B. _____</p>	
<p>C. _____</p>		<p>D. _____</p>	
<p>7. Site Mailing Address (page 15)</p>	<p>Street or P. O. Box: <u>1905 ASTON AV #100</u></p>		<p>RECEIVED MAY 11 2007 Hazardous Waste Section</p>
<p>City, Town, or Village: <u>CARLSBAD</u></p>		<p>State: <u>CA</u></p>	
<p>Country: <u>USA</u></p>		<p>Zip Code: <u>92008</u></p>	
<p>8. Site Contact Person (page 15)</p>	<p>First Name: <u>BECKY</u></p>	<p>MI:</p>	<p>Last Name: <u>WILBANKS</u></p>
<p>Phone Number: <u>760-602-8700</u> Extension: _____</p>		<p>Email address: <u>bwilbanks@3ecompany.com</u></p>	
<p>9. Operator and Legal Owner of the Site (pages 15 and 16)</p>	<p>A. Name of Site's Operator: <u>HOME DEPOT USA, INC.</u></p>		<p>Date Became Operator (mm/dd/yyyy): <u>06/30/1994</u></p>
<p>Operator Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p>			
<p>B. Name of Site's Legal Owner: <u>HOME DEPOT USA, INC</u></p>		<p>Date Became Owner (mm/dd/yyyy): <u>06/30/1994</u></p>	
<p>Owner Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p>			

RCRA INFORMATION
ENTERED

9. Legal Owner (Continued) Address	Street or P. O. Box: <u>2455 PACES FERRY RD</u>	
	City, Town, or Village: <u>ATLANTA</u>	
	State: <u>GA</u>	
	Country: <u>USA</u>	Zip Code: <u>30339</u>

10. Type of Regulated Waste Activity
Mark "Yes" or "No" for all activities; complete any additional boxes as instructed. (See instructions on pages 17 to 20.)

A. Hazardous Waste Activities
Complete all parts for 1 through 6.

- | | |
|--|---|
| <p><input checked="" type="checkbox"/> <input type="checkbox"/> 1. Generator of Hazardous Waste
If "Yes", choose only one of the following - a, b, or c.</p> <p><input type="checkbox"/> a. LQG: Greater than 1,000 kg/mo (2,200 lbs./mo.) of non-acute hazardous waste; or</p> <p><input checked="" type="checkbox"/> b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs./mo.) of non-acute hazardous waste; or</p> <p><input type="checkbox"/> c. CESQG: Less than 100 kg/mo (220 lbs./mo.) of non-acute hazardous waste</p> <p>In addition, indicate other generator activities.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> d. United States Importer of Hazardous Waste</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> e. Mixed Waste (hazardous and radioactive) Generator</p> | <p><input type="checkbox"/> <input checked="" type="checkbox"/> 2. Transporter of Hazardous Waste</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> 3. Treater, Storer, or Disposer of Hazardous Waste (at your site) Note: A hazardous waste permit is required for this activity.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> 4. Recycler of Hazardous Waste (at your site)</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> 5. Exempt Boiler and/or Industrial Furnace
If "Yes", mark each that applies.</p> <p><input type="checkbox"/> a. Small Quantity On-site Burner Exemption</p> <p><input type="checkbox"/> b. Smelting, Melting, and Refining</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> 6. Underground Injection Control</p> |
|--|---|

B. Universal Waste Activities

1. Large Quantity Handler of Universal Waste (accumulate 5,000 kg or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste that apply:
- | | |
|---------------------------------|--------------------------|
| | <u>Manage</u> |
| a. Batteries | <input type="checkbox"/> |
| b. Pesticides | <input type="checkbox"/> |
| c. Mercury containing equipment | <input type="checkbox"/> |
| d. Lamps | <input type="checkbox"/> |
| e. Other (specify) | <input type="checkbox"/> |
| f. Other (specify) _____ | <input type="checkbox"/> |
| g. Other (specify) _____ | <input type="checkbox"/> |

2. Destination Facility for Universal Waste
Note: A hazardous waste permit may be required for this activity.

C. Used Oil Activities

Mark all boxes that apply.

1. Used Oil Transporter
If "Yes", mark each that applies.
- a. Transporter
- b. Transfer Facility
2. Used Oil Processor and/or Re-refiner
If "Yes", mark each that applies.
- a. Processor
- b. Re-refiner
3. Off-Specification Used Oil Burner
4. Used Oil Fuel Marketer
If "Yes", mark each that applies.
- a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner
- b. Marketer Who First Claims the Used Oil Meets the Specifications

11. Description of Hazardous Wastes (See instructions on page 21.)

A. Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.

D001	D002	D006	D009	D016	D018	D035

B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed for waste codes.

12. Comments (See instructions on page 21.)

THIS IS FOR GENERATOR STATUS CHANGE

13. 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. For the RCRA Hazardous Waste Part A Permit Application, all operator(s) and owner(s) must sign (see 40 CFR 270.10 (b) and 270.11). (See instructions on page 21.)

Signature of operator, owner, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)
<i>Melanie Koske</i> on behalf of Home Depot	Melanie Koske, waste specialist	11/09/2007