



North Carolina Department of Environment and Natural Resources  
DIVISION OF WASTE MANAGEMENT

Dexter R. Matthews, Director

Michael F. Easley, Governor  
William G. Ross, Jr., Secretary

January 20, 2006

DAVID OSMOLSKI  
CHARLOTTE PLATING INC  
417 HEBRON ST  
CHARLOTTE NC 28273

Re: Subsequent Notification  
Charlotte Plating Inc  
**NCR000000869**

Dear Facility Contact,

The North Carolina Hazardous Waste Section has received a Subsequent Notification from your facility. Our office has accepted and processed the changes as noted. Attached is a RCRA Site Detail Report for your review to ensure that the information is accurate. Please notify our office if additional changes need to be made. If you have any questions or need additional assistance, please call Larry Wilson at (919) 508-8573.

Sincerely,

Elizabeth W. Cannon, Chief  
Hazardous Waste Section

cc: Central Files

# IBEAM - RCRA Site Detail

Report run on: January 20, 2006

## NCR000000869 CHARLOTTE PLATING INC

County: MECKLENBURG Source Type: S Seq. Number: 5.00 Receive Date: 16-Nov-2005

Location 417 HEBRON ST Address: CHARLOTTE, NC 28273	Mailing 417 HEBRON ST Address: CHARLOTTE, NC 28273
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Contact Person DAVID OSMOLSKI 417 HEBRON ST  
For Source (704) 552-2100X1 CHARLOTTE, NC 28273  
Information US

**Owner (current)** 417 HEBRON ST  
DAVID OSMOLSKI & WILLIAM TODD OSM CHARLOTTE, NC 28273 Type: P  
From: 01/25/1995 To: Phone:

**Operator (current)**  
CHARLOTTE PLATING INC Type: P  
From: 03/31/1995 To: Phone:

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

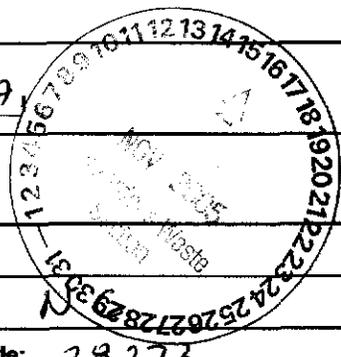
### Regulated Waste Activities

Hazardous Waste Generator Status - Federal: Conditionally Exempt SQG; State: Conditionally Exempt SQG

Transfer Facility: U

### Used Oil Activities

Other Hazardous Waste Generator Activities	Used Oil Transport Activity	Off-Specification Used Oil Burner:	No
Importer Activity: No	Transporter: No	Used Oil Fuel Marketer Activity	
Mixed Waste Generator: No	Transfer Facility: No	Marketer who direct shipment	
Transporter Activity: No	Used Oil Processor and/or	off-specification used oil to	
TSD Activity: No	Re-refiner Activity	off-specification used oil burner:	No
Recycler Activity: No	Processor: No	Marketer who first claims the used	
Exempt Boiler and/or Industrial Furnace	Refiner No	oil meets the specifications:	No
Small Quantity Onsite Burner Exemption: No	Underground	Destination Facility for	
Smelting, melting, Refining Furnace	Injection Control: No	Universal Waste:	No
Exemption: No			

<p><b>SEND COMPLETED</b> <b>FORM TO:</b> The Appropriate State or EPA Regional Office.</p>	<p>United States Environmental Protection Agency</p> <p><b>RCRA SUBTITLE C SITE IDENTIFICATION FORM</b></p>		
<p>1. Reason for Submittal (See instructions on page 13.)</p> <p>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</p> <p>INICIR110101011010101181619</p>		
<p>3. Site Name (page 14)</p>	<p>Name:</p> <p>CHARLOTTE PLATING, INC</p>		
<p>4. Site Location Information (page 14)</p>	<p>Street Address: 417 HEBRON ST.</p>		
	<p>City, Town, or Village: CHARLOTTE</p>	<p>State: NC</p>	
	<p>County Name: MECKLENBURG</p>	<p>Zip Code: 28273</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. 332813</p>	<p>B. _____ ENTERED</p>	
	<p>C. _____</p>	<p>D. _____ JAN 19 2006</p>	
<p>7. Site Mailing Address (page 15)</p>	<p>Street or P. O. Box: 417 HEBRON ST.</p>		
	<p>City, Town, or Village: CHARLOTTE</p>		
	<p>State: NC</p>		
	<p>Country: USA</p>	<p>Zip Code:</p>	
<p>8. Site Contact Person (page 15)</p>	<p>First Name: DAVID</p>	<p>MI: H.</p>	<p>Last Name: OSMOLSKI</p>
	<p>Phone Number: 704/552-2100 Extension: 1#</p>		<p>Email address: charplat@conninc.com</p>
<p>9. Operator and Legal Owner of the Site (pages 15 and 16)</p>	<p>A. Name of Site's Operator: CHARLOTTE PLATING, INC.</p>		<p>Date Became Operator (mm/dd/yyyy): 03/31/95</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: DAVID OSMOLSKI AND WILLIAM TODD OSMOLSKI</p>		<p>Date Became Owner (mm/dd/yyyy): 01/25/95</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>			

9. Legal Owner (Continued) Address	Street or P. O. Box: 417 HEBRON ST.	
	City, Town, or Village: CHARLOTTE	
	State: NC	
	Country: USA	Zip Code: 28273

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.

1. Generator of Hazardous Waste  
If "Yes", choose only one of the following - a, b, or c.
- a. LQG: Greater than 1,000 kg/mo (2,200 lbs./mo.) of non-acute hazardous waste; or
  - b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs./mo.) of non-acute hazardous waste; or
  - c. CESQG: Less than 100 kg/mo (220 lbs./mo.) of non-acute hazardous waste

In addition, indicate other generator activities.

- d. United States Importer of Hazardous Waste
- e. Mixed Waste (hazardous and radioactive) Generator

- 2. Transporter of Hazardous Waste
- 3. Treater, Storer, or Disposer of Hazardous Waste (at your site) Note: A hazardous waste permit is required for this activity.
- 4. Recycler of Hazardous Waste (at your site)
- 5. Exempt Boiler and/or Industrial Furnace  
If "Yes", mark each that applies.
  - a. Small Quantity On-site Burner Exemption
  - b. Smelting, Melting, and Refining Furnace Exemption
- 6. Underground Injection Control

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 generated and/or accumulated at your site. If "Yes", mark all boxes that apply:

	<u>Generate</u>	<u>Accumulate</u>
a. Batteries	<input type="checkbox"/>	<input type="checkbox"/>
b. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>
c. Thermostats	<input type="checkbox"/>	<input type="checkbox"/>
d. Lamps	<input type="checkbox"/>	<input type="checkbox"/>
e. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>
f. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>
g. Other (specify) _____	<input type="checkbox"/>	<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.

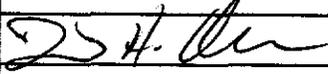
D002						
D007						
F006						

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.)

THERE WAS A FIRE AT THIS FACILITY ON 12/23/03. AS A RESULT, THERE WAS SUBSTANTIAL DAMAGE RESULTING IN MORE THAN 2,200 POUNDS OF NON-ACUTE HAZARDOUS WASTE. ON 1/22/04 CHARLOTTE PLATING FILED THIS FORM WITH NCDENR TO NOTIFY IT'S CHANGE TO LARGE QUANTITY GENERATOR STATUS. AFTER DISPOSAL OF FIRE GENERATED WASTE, THIS FORM WAS FILED NOTIFYING OF A DESIRE TO RETURN TO SMALL GENERATOR STATUS. EVALUATION OF QUANTITIES OF WASTE GENERATED SHOW FAR LESS THAN 220 POUNDS PER MONTH PROMPTING THIS FILING TO NOTIFY NCDENR OF OUR ACHIEVING CONDITIONALLY EXEMPT SMALL GENERATOR STATUS (C.E.S.Q.G.) AND REQUEST LISTING AS SUCH WITH NCDENR.

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)
	DAVID H. OSMOLSKI, CO-OWNER	11/8/05