

Hazardous Waste Compliance Date Entry Form - Side A

EPA ID Number NCS000000968

Facility Name Jim West & Son's Autoparts

Street: 1905 New Leicester Hwy

Phone 828-683-9186

City: Asheville **Zip** 28806

County Buncombe

EVALUATION DATA **New:** **Change:** **Delete:**

Date: 12/15/08

Evaluation Type FCI-MSRP

Date: **Evaluation Type**

Inspector ID # 043

Evaluation Comments

Office visit to discuss rebates

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 #

- no longer a SNC (SNN eval.)

Waste Volume Involved	Exposure Media (a,gw,sw,s)	Distance to Residences	Number of People Involved	Distance to On-Site Wells	Distance to Off-Site Wells
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#

Person::

Return to Compliance:

Scheduled

Actual

Reg. Description

Comment:

**NC HAZARDOUS WASTE SECTION
MERCURY SWITCH REMOVAL PROGRAM
COMPLIANCE EVALUATION CHECKLIST**

Facility Name: Jim West and Sons Auto Recycle Date: 12/15/08

Facility ID Number: NCS 000 000 968

Previous Inspection date(s):

Facility Generator Status: UO

County: Buncombe

Address: 852 New Leicester Hwy
Asheville NC 28806

Mailing Address(If Different):

E-Mail Address:

Owner/Contact: ~~Jim~~ Dale West (828) 683-9186
Type of Business: Auto salvage 683-9946

Number of Cars Dismantled Per Year? 50

Does The Facility Shred On Site? Yes No

Does The Facility Crush On- Site? Yes No

If Yes Do They Own Their Own Crusher? Yes No

Does The Facility OWN or OPERATE A Mobile Crusher? Yes No

MERCURY SWITCH MANAGEMENT

Facility Collecting Mercury Switches: Yes No

Evidence of Mercury Release to Environment: Yes No

Switches Containerized: Yes No

Switches In Closed Containers: Yes No

Containers Properly Labeled: Yes No

Facility Able To Demonstrate Accumulation Time: Yes No

Number of Shipments of Switches:

Shipping Papers Maintained: Yes No

Employees Trained In Mercury Handling & Emergency Procedures: Yes No

Mercury Switch Removal Log Maintained: Yes No

Mercury Spill Kit On Site: Yes No

USED OIL MANAGEMENT

Does Facility Generate Used Oil: Yes No Stored In: TANKS / CONTAINERS

Tanks / Containers Properly Labeled: Yes No

Evidence of Used Oil Release: Yes No

Used Oil Disposal Receipts Maintained: Yes No

LEAD / ACID BATTERY MANAGEMENT

Does Facility Generate Lead / Acid Batteries: **Yes No**
Batteries Properly Maintained To Prevent a Release: **Yes No**

GASOLINE MANAGEMENT

Does Facility Generate Spent/Waste Gasoline: **Yes No** Stored In: **Tanks/Containers**
Total Amount of Spent/Waste Gasoline Generated and/or Total Amount Onsite:
Evidence of Spent/Waste Gasoline Release: **Yes No**

LEAD WEIGHT MANAGEMENT

Does the Facility Generate Lead Tire Weights: **Yes No**
Does the Facility Manage Weights for Recycling: **Yes No**
Storage Method: _____
Evidence of Weights on the Ground: **Yes No**

GENERAL INSPECTION NOTES:

*Offc visit to discuss rebates.
Would like to receive E1-VS bucket*

Warning Letter to Be Issued: **Yes No**

E. A. Lawton 12-15-08
INSPECTOR / DATE

FACILITY CONTACT

Site Referrals (contact & date referred)

NC Division of Water Quality: _____
NC Solid Waste Section: _____
NC Division of Air Quality: _____
County Agency: _____
Other: _____