

Hazardous Waste Section
File Room Document Transmittal Sheet

Your Name: MEL DEAVER
EPA ID: N C R 0 0 0 1 5 6 4 6 3
Facility Name: GOLDEN PEANUT COMPANY-AHOSKIE
Document Group: General (G)
Document Type: Notification 8700 (8700)
Description:
Date of Doc: 10/23/2012
Author of Doc: JEFFREY B ECKER

File Room Use Only

NCR000156463

Date Recieved by File Room:

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Date Scanned:

Scanner's Initials: 



North Carolina Department of Environment and Natural Resources
Division of Waste Management

Beverly Eaves Perdue
Governor

Dexter R. Matthews
Director

Dee Freeman
Secretary

November 02, 2012

JAMES TYLER
GOLDEN PEANUT COMPANY - AHOSKIE
400 S CATHERINE ST
AHOSKIE NC 27910

**RE: EPA ID # NCR000156463
GOLDEN PEANUT COMPANY - AHOSKIE**

Dear Facility Contact:

Thank you for notifying the North Carolina Hazardous Waste Section of your activities as a Small Quantity Generator of hazardous waste. The EPA ID Number assigned to your site is shown above. Please notify us if any information about your site changes: such as the facility name, site address, regulatory status, facility contact/address/phone number, or if your facility plans to close, by completing an EPA Form 8700-12.

NC Hazardous Waste Section
1646 Mail Service Center
Raleigh, NC 27699-1646

If you are considered a Large Quantity Generator (LQG), Small Quantity Generator (SQG), Transporter, or a Treater, Storer or Disposer (TSD) facility, you are required to pay an annual fee to the State of North Carolina. Accordingly, an invoice is attached to this letter. These fees are used to support NC State programs and ensure the safe management of hazardous waste. We encourage you to become familiar with the NC Hazardous Waste Management Rules that have been codified in the NC Administrative Code at 15A NCAC 13A. You may obtain a printed copy of the rules for \$32.00 by contacting Patricia Davalos at 919-707-8233. For more information on the rules, visit <http://portal.ncdenr.org/web/wm/hw/rules>. We specifically draw your attention to Rules .0101, .0102, .0106 and .0107. These provisions address requirements potentially applicable to generators of hazardous waste. For an explanation of EPA requirements, go to <http://www.epa.gov/wastes/hazard/downloads/tool.pdf>.

If you have any questions, please contact Ray Strawbridge at 919-707-8231.

Sincerely,

Elizabeth W. Cannon, Chief
Hazardous Waste Section

cc: Central Files(General)



FACILITY LOCATION ADDRESS:

ATTENTION: ACCOUNTS PAYABLE
 GOLDEN PEANUT COMPANY - AHOSKIE
 4666 FARIES PARKWAY
 DECATUR, IL 62526

JAMES TYLER
 GOLDEN PEANUT COMPANY - AHOSKIE
 400 S CATHERINE ST
 AHOSKIE, NC 27910

| FACILITY EPA ID # | INVOICE # | INVOICE DATE | AMOUNT DUE | DUE DATE | ENTER AMOUNT PAID |
|-------------------|-----------|--------------|------------|------------|-------------------|
| NCR000156463 | HW57910 | 11/02/2012 | 175.00 | 12/03/2012 | |

A. Fee Requirements: Pursuant to North Carolina General Statute 130A-294.1, you are required to pay fee(s) based on your hazardous waste management activities. The fee(s) are used to support government that ensure the safe management of hazardous waste. Failure to pay the required hazardous waste fee may result in an enforcement action with a penalty.

B. Explanation of Invoice Amount is Based on Facility's Current Status as of July 1, 2012 :

| FACILITY STATUS | FEE | TONNAGE | AMOUNT DUE |
|--------------------------|----------|------------------|------------|
| SMALL QUANTITY GENERATOR | \$175.00 | ----- | \$175.00 |
| | | PAST DUE | \$0.00 |
| | | CREDIT | \$0.00 |
| | | TOTAL AMOUNT DUE | \$175.00 |

C. Remit Payment (include a copy of this invoice):

Make checks payable to **N.C. Hazardous Waste Section**, include **EPA ID#** and **Invoice #** on check. If you are paying by electronic transfer, include the invoice number with your electronic transfer. Please note per NC General Statute (G.S. 25-3-506), a \$25.00 processing fee will be charged on all returned checks. Please return a copy of this invoice with your payment to:

ATTN: PATRICIA DAVALOS
 NC HAZARDOUS WASTE SECTION
 1646 MAIL SERVICE CENTER
 RALEIGH, NC 27699-1646

D. Hazardous Waste Contacts:

1. BILLING:

Ray Strawbridge (919)707- 8231
 Patricia Davalos, Supervisor (919)707-8233

2. TECHNICAL ASSISTANCE:

Doug Roberts (919)707-8221
 Ann Preston (919)707- 8226
 Lebeed Kady (919)707-8229

IBEAM - RCRA Site Detail

Report run on: November 02, 2012

NCR000156463 **GOLDEN PEANUT COMPANY - AHOSKIE**

| | | | |
|-------------------------|-----------------------|-----------------------|----------------------------------|
| County: HERTFORD | Source Type: N | Seq. Number: 2 | Receive Date: 26-Oct-2012 |
|-------------------------|-----------------------|-----------------------|----------------------------------|

| | |
|---|--|
| Location 400 S CATHERINE ST Address: AHOSKIE, NC 27910 | Mailing 400 S CATHERINE ST Address: AHOSKIE, NC 27910 |
|---|--|

| | | |
|--|---|--|
| Contact Person JAMES TYLER For Source Information (217) 451-3827 | 400 S CATHERINE ST AHOSKIE, NC 27910 US | |
|--|---|--|

| | | |
|---|--|-----------------------|
| Owner (current) ARCHER DANIEL MIDLAND | 4666 FARIES PARKWAY DECATUR, IL 62526 | Type: P |
| From: 01/05/2011 | To: | Phone: (217) 451-3827 |

| | | |
|--|--|-----------------------|
| Operator (current) ARCHER DANIEL MIDLAND | 4666 FARIES PARKWAY DECATUR, IL 62526 | Type: P |
| From: 01/05/2011 | To: | Phone: (217) 451-3827 |

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

Regulated Waste Activities

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

| | | | |
|---|---|---|----|
| Transfer Facility: | 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 off-specification used oil to off-specification used oil burner: | No |
| Transporter Activity: No | Used Oil Processor and/or Re-refiner Activity | Marketer who first claims the used oil meets the specifications: | No |
| TSD Activity: No | Processor: No | | |
| Recycler Activity: No | Refiner: No | | |
| Exempt Boiler and/or Industrial Furnace | Underground Injection Control: | Destination Facility for Universal Waste: | No |
| Small Quantity Onsite Burner Exemption: No | | | |
| Smelting, melting, Refining Furnace Exemption: No | | | |

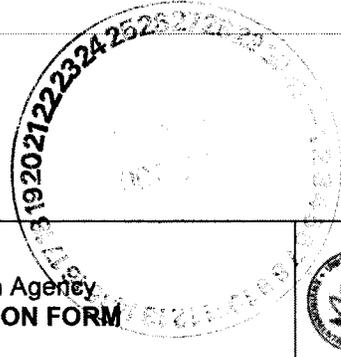
Certification Information

| | | |
|----------------------|-------------|------------|
| First Name : JEFFREY | Title | VP OPP |
| Last Name : BECKER | Date Signed | 10/23/2012 |

NAICS Codes

Comments

| |
|---|
| INITIAL NOTIFICATION PER 8700-12 DATED 10/26/2012 WASTE DISPOSAL WILL CONSIST OF A ONE-TIME CLEANUP FROM PREVIOUS OWNERS WASTE. WILL UPDATE WITH NEW 8700-12 WHEN CLEANUP IS COMPLETED. JWM 11/2/2012 |
|---|



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|---|---|---|---|---|---|---|---|---|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| <p>SEND COMPLETED FORM TO: The Appropriate State or Regional Office.</p> | <p>United States Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION FORM</p> | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>1. Reason for Submittal</p> <p>MARK ALL BOX(ES) THAT APPLY</p> | <p>Reason for Submittal:</p> <p><input checked="" type="checkbox"/> To provide an Initial Notification (first time submitting site identification information / to obtain an EPA ID number for this location)</p> <p><input type="checkbox"/> To provide a Subsequent Notification (to update site identification information for this location)</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 (If marked, see sub-bullet below)</p> <p><input type="checkbox"/> Site was a TSD facility and/or generator of $\geq 1,000$ kg of hazardous waste, >1 kg of acute hazardous waste, or >100 kg of acute hazardous waste spill cleanup in one or more months of the report year (or State equivalent LQG regulations)</p> | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>2. Site EPA ID Number</p> | <p>EP <u>NCR00015C4C3</u></p> | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>3. Site Name</p> | <p>Name: Golden Peanut Company - Ahoskie</p> | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>4. Site Location Information</p> | <p>Street Address: 400 South Catherine Street</p> <p>City, Town, or Village: Ahoskie County: Hertford</p> <p>State: North Carolina Country: United States Zip Code: 27910</p> | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>5. Site Land Type</p> | <p><input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Tribal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p> | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>6. NAICS Code(s) for the Site (at least 5-digit codes)</p> | <p>A. <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; text-align: center;">4</td><td style="width: 20px; text-align: center;">2</td><td style="width: 20px; text-align: center;">4</td><td style="width: 20px; text-align: center;">5</td><td style="width: 20px; text-align: center;">1</td><td style="width: 20px; text-align: center;">0</td></tr></table></p> <p>B. <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px;"> </td><td style="width: 20px;"> </td></tr></table></p> <p>C. <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px;"> </td><td style="width: 20px;"> </td></tr></table></p> <p>D. <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px;"> </td><td style="width: 20px;"> </td></tr></table></p> | | | 4 | 2 | 4 | 5 | 1 | 0 | | | | | | | | | | | | | | | | | | |
| 4 | 2 | 4 | 5 | 1 | 0 | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>7. Site Mailing Address</p> | <p>Street or P.O. Box: 400 South Catherine Street</p> <p>City, Town, or Village: Ahoskie</p> <p>State: North Carolina Country: United States Zip Code: 27910</p> | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>8. Site Contact Person</p> | <p>First Name: James MI: M Last: Tyler</p> <p>Title: Environmental Specialist</p> <p>Street or P.O. Box: 4666 Faries Parkway</p> <p>City, Town or Village: Decatur</p> <p>State: IL Country: United States Zip Code: 62526</p> <p>Email: james.tyler@adm.com</p> <p>Phone: 217-451-3827 Ext.: Fax: 217-451-6349</p> | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>9. Legal Owner and Operator of the Site</p> | <p>A. Name of Site's Legal Owner: Archer Daniels Midland Date Became Owner: 1-5-2011</p> <p>Owner Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Tribal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p> <p>Street or P.O. Box: 4666 Faries Parkway</p> <p>City, Town, or Village: Decatur Phone: 217-451-3827</p> <p>State: IL Country: United States Zip Code: 62526</p> <p>B. Name of Site's Operator: Archer Daniels Midland Date Became Operator: 1-5-2011</p> <p>Operator Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Tribal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p> | | | | | | | | | | | | | | | | | | | | | | | | | | |

EPA ID Number NCR 000 ISC 4 L 3

OMB#: 2050-0024; Expires 12/31/2014

12. Notification of Hazardous Secondary Material (HSM) Activity

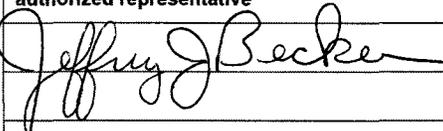
Y N Are you notifying under 40 CFR 260.42 that you will begin managing, are managing, or will stop managing hazardous secondary material under 40 CFR 261.2(a)(2)(ii), 40 CFR 261.4(a)(23), (24), or (25)?

If "Yes", you must fill out the Addendum to the Site Identification Form: Notification for Managing Hazardous Secondary Material.

13. Comments

This waste disposal will consist of a one-time cleanup from previous owner waste. Once all of the waste is cleaned up and disposed of, notification will be provided via a revised 8700-12 form.

14. 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 fines and imprisonment for knowing violations. For the RCRA Hazardous Waste Part A Permit Application, all owner(s) and operator(s) must sign (see 40 CFR 270.10(b) and 270.11).

| Signature of legal owner, operator, or an authorized representative | Name and Official Title (type or print) | Date Signed (mm/dd/yyyy) |
|---|---|--------------------------|
|  | JEFFREY J. BECKER VP U.S. GRAIN OPERATIONS | 10-23-2012 |
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| | | |