

Hazardous Waste Section
File Room Document Transmittal Sheet

Your Name: MEL DEAVER
EPA ID: N C D 9 8 2 0 8 1 6 4 8
Facility Name: MVP GROUP INTERNATIONAL
Document Group: General (G)
Document Type: Notification 8700 (8700)
Description:
Date of Doc: 11/12/2012
Author of Doc: WAYNE GENTRY

File Room Use Only

Date Recieved by File Room:

Date Scanned:

Month	Day	Year
01	22	13
01	24	13

NCD982081648

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 27, 2012

GERALD GENTRY
MVP GROUP INTERNATIONAL
430 GENTRY RD
ELKIN, NC 28621

RE: EPA ID # NCD982081648
MVP GROUP INTERNATIONAL

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. Attached is a RCRA Site Detail Report for your review to ensure that the information is accurate.

If you have any questions or need additional assistance, please feel free to contact Ray Strawbridge at 919-707-8231.

Sincerely,

Elizabeth W. Cannon, Chief
Hazardous Waste Section

cc: Central Files(General)

IBEAM - RCRA Site Detail

Report run on: November 27, 2012

NCD982081648 MVP GROUP INTERNATIONAL

County: SURRY Source Type: S Seq. Number: 4 Receive Date: 15-Nov-2012

Location 430 GENTRY RD
Address: ELKIN, NC 28621

Mailing 430 GENTRY RD
Address: ELKIN, NC 28621

Contact Person GERALD GENTRY 430 GENTRY RD
For Source (336) 527-2241X2241 ELKIN, NC 28621
Information US

Owner (current) 430 GENTRY RD
MVP GROUP INTERNATIONAL ELKIN, NC 28621 Type: P
From: 06/01/2011 To: Phone: (336) 527-2241

Operator (current) 430 GENTRY RD
MVP GROUP INTERNATIONAL ELKIN, NC 28621 Type: P
From: 06/01/2011 To: Phone: (336) 527-2241

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
Importer Activity: No
Mixed Waste Generator: No

Used Oil Transport Activity Off-Specification Used Oil Burner: No
Transporter: No
Transfer Facility: No Used Oil Fuel Marketer Activity

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

Used Oil Processor and/or Re-refiner Activity
Processor: No
Refiner: No 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

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

Underground Injection Control: No Destination Facility for Universal Waste: No

Certification Information

First Name : WAYNE Title DIR E&S
Last Name : GENTRY Date Signed 11/12/2012

NAICS Codes

339999

Comments

PER 8700-12 DATED 11/12/2012 UPDATING COMPANY NAME, NAICS CODE, OWNER/OPP, SITE CONTACT. JWM 11/27/2012

<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 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 checked="" 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>EPA ID Number <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>N</td><td>C</td><td>D</td><td>9</td><td>8</td><td>2</td><td>0</td><td>8</td><td>1</td><td>6</td><td>4</td><td>8</td></tr></table></p>			N	C	D	9	8	2	0	8	1	6	4	8												
N	C	D	9	8	2	0	8	1	6	4	8																
<p>3. Site Name</p>	<p>Name: MVP Group International</p>																										
<p>4. Site Location Information</p>	<p>Street Address: 430 Gentry Road</p> <p>City, Town, or Village: Elkin</p> <p>County: Surry</p> <p>State: N.C.</p> <p>Country: USA</p> <p>Zip Code: 28621</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>3</td><td>3</td><td>9</td><td>9</td><td>9</td><td>9</td></tr></table></p> <p>C. <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table></p> <p>B. <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table></p> <p>D. <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table></p>			3	3	9	9	9	9																		
3	3	9	9	9	9																						
<p>7. Site Mailing Address</p>	<p>Street or P.O. Box: 430 Gentry Road</p> <p>City, Town, or Village: Elkin</p> <p>State: N.C.</p> <p>Country: USA</p> <p>Zip Code: 28621</p>																										
<p>8. Site Contact Person</p>	<p>First Name: Gerald</p> <p>MI: Wayne</p> <p>Last: Gentry</p> <p>Title: Director Mfg. and Engineering</p> <p>Street or P.O. Box: 430 Gentry Road</p> <p>City, Town or Village: Elkin</p> <p>State: N.C.</p> <p>Country: USA</p> <p>Zip Code: 28621</p> <p>Email: wgentry@mwcbk.com</p> <p>Phone: 336-527-2241</p> <p>Ext.: 2241</p> <p>Fax: same</p>																										
<p>9. Legal Owner and Operator of the Site</p>	<p>A. Name of Site's Legal Owner: MVP Group Int.</p> <p>Date Became Owner: 6/1/2011</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: 430 Gentry Road</p> <p>City, Town, or Village: Elkin</p> <p>Phone: 336-527-2241</p> <p>State: NC</p> <p>Country: USA</p> <p>Zip Code: 28621</p> <p>B. Name of Site's Operator: Wayne Gentry MVP Group Inter</p> <p>Date Became Operator: 6/1/2011</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>																										

10. Type of Regulated Waste Activity (at your site)
 Mark "Yes" or "No" for all current activities (as of the date submitting the form); complete any additional boxes as instructed.

A. Hazardous Waste Activities; Complete all parts 1-10.

- Y N **1. Generator of Hazardous Waste**
 If "Yes", mark only one of the following – a, b, or c.
- a. LQG: Generates, in any calendar month, 1,000 kg/mo (2,200 lbs./mo.) or more of hazardous waste; or Generates, in any calendar month, or accumulates at any time, more than 1 kg/mo (2.2 lbs./mo) of acute hazardous waste; or Generates, in any calendar month, or accumulates at any time, more than 100 kg/mo (220 lbs./mo) of acute hazardous spill cleanup material.
- b. SQG: 100 to 1,000 kg/mo (220 – 2,200 lbs./mo) of non-acute hazardous waste.
- c. CESQG: Less than 100 kg/mo (220 lbs./mo) of non-acute hazardous waste.

If "Yes" above, indicate other generator activities in 2-4.

- Y N **2. Short-Term Generator** (generate from a short-term or one-time event and not from on-going processes). If "Yes", provide an explanation in the Comments section.
- Y N **3. United States Importer of Hazardous Waste**
- Y N **4. Mixed Waste (hazardous and radioactive) Generator**

- Y N **5. Transporter of Hazardous Waste**
 If "Yes", mark all that apply.
- a. Transporter
- b. Transfer Facility (at your site)
- Y N **6. Treater, Storer, or Disposer of Hazardous Waste** Note: A hazardous waste Part B permit is required for these activities.
- Y N **7. Recycler of Hazardous Waste**
- Y N **8. Exempt Boiler and/or Industrial Furnace**
 If "Yes", mark all that apply.
- a. Small Quantity On-site Burner Exemption
- b. Smelting, Melting, and Refining Furnace Exemption
- Y N **9. Underground Injection Control**
- Y N **10. Receives Hazardous Waste from Off-site**

B. Universal Waste Activities; Complete all parts 1-2.

- Y N **1. Large Quantity Handler of Universal Waste (you accumulate 5,000 kg or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste managed at your site. If "Yes", mark all that apply.**
- a. Batteries
- b. Pesticides
- c. Mercury containing equipment
- d. Lamps
- e. Other (specify) _____
- f. Other (specify) _____
- g. Other (specify) _____

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

C. Used Oil Activities; Complete all parts 1-4.

- Y N **1. Used Oil Transporter**
 If "Yes", mark all that apply.
- a. Transporter
- b. Transfer Facility (at your site)
- Y N **2. Used Oil Processor and/or Re-refiner**
 If "Yes", mark all that apply.
- a. Processor
- b. Re-refiner
- Y N **3. Off-Specification Used Oil Burner**
- Y N **4. Used Oil Fuel Marketer**
 If "Yes", mark all that apply.
- 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

D. Eligible Academic Entities with Laboratories—Notification for opting into or withdrawing from managing laboratory hazardous wastes pursuant to 40 CFR Part 262 Subpart K

❖ You can **ONLY** Opt into Subpart K if:

- you are at least one of the following: a college or university; a teaching hospital that is owned by or has a formal affiliation agreement with a college or university; or a non-profit research institute that is owned by or has a formal affiliation agreement with a college or university; AND
- you have checked with your State to determine if 40 CFR Part 262 Subpart K is effective in your state

Y N 1. Opting into or currently operating under 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories
See the item-by-item instructions for definitions of types of eligible academic entities. Mark all that apply:

- a. College or University
- b. Teaching Hospital that is owned by or has a formal written affiliation agreement with a college or university
- c. Non-profit Institute that is owned by or has a formal written affiliation agreement with a college or university

Y N 2. Withdrawing from 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories

11. Description of Hazardous Waste

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						

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.

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.

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 to update contact info, Government, Updated NAICS Code, Comp Name, Site Contact Owner / OPR Info

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>Wayne Lentry</i>	<i>Director of Mfg + Engineering</i>	<i>11/12/2012</i>