

Hazardous Waste Section
File Room Document Transmittal Sheet

17

Your Name: MEL DEAVER
EPA ID: N C D 0 0 0 8 1 3 5 0 1
Facility Name: HANESBRANDS INC-WEEKS PLANT
Document Group: General (G)
Document Type: Notification 8700 (8700)
Description:
Date of Doc: 9/8/2013
Author of Doc: TOMMY THOMPSON

File Room Use Only

NCD000813501

Date Recieved by File Room:

Month	Day	Year
12	12	2013
12	17	2013

Date Scanned:

Scanner's Initials: *R*



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

Pat McCrory
Governor

Dexter R. Matthews
Director

John E. Skvarla, III
Secretary

October 28, 2013

TOMMY THOMPSON
HANESBRANDS INC-WEEKS PLANT
1000 HANES MILL RD
WINSTON SALEM, NC 27105

RE: EPA ID # NCD000813501 - HANESBRANDS INC-WEEKS PLANT

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,

Patricia Davalos, Supervisor
Hazardous Waste Section

cc: Central Files (General)

IBEAM - RCRA Site Detail

Report run on: October 28, 2013

NCD000813501 HANESBRANDS INC-WEEKS PLANT

County: FORSYTH	Source Type: S	Seq. Number: 5	Receive Date: 14-Oct-2013
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Location 401 HANES MILL ROAD Address: WINSTON SALEM, NC 27105	Mailing 1000 HANES MILL ROAD Address: WINSTON SALEM, NC 27105
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Contact Person TOMMY THOMPSON For Source Information (336) 519-2715	1000 HANES MILL RD WINSTON SALEM, NC 27105 US	
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Owner (current) HANESBRANDS, INC.	1000 HANES MILL ROAD WINSTON-SALEM, NC 27105	Type: P
From: 01/01/2006	To:	Phone: (336) 519-2715

Operator (current) HANESBRANDS, INC.	1000 HANES MILL ROAD WINSTON-SALEM, NC 27105	Type: P
From: 01/01/1601	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: Large Quantity Generator; State: Large Quantity Generator

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:		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:
Small Quantity Onsite Burner Exemption:	No	Underground		
Smelting, melting, Refining Furnace		Injection Control:	No	Destination Facility for
Exemption:	No			Universal Waste:
				U

Certification Information

First Name : TOMMY	Title	ENV. AFFAIRS
Last Name : THOMPSON	Date Signed	09/08/2013

NAICS Codes

31511

Comments

UPDATED FACILITY NAME, STIE MAILING ADDRESS, LEGAL OWNER AND ADDED CODES. 9/8/13 MD 10/14/13

Waste Codes

Code D

D001

D002

Code F

F001

F002

F003

Code K

Code P

Code R

Code U

Code X



FACILITY LOCATION ADDRESS:

ATTENTION: ACCOUNTS PAYABLE
 HANESBRANDS INC-WEEKS PLANT
 1000 HANES MILL RD
 WINSTON SALEM, NC 27105

TOMMY THOMPSON
 HANESBRANDS INC-WEEKS PLANT
 401 HANES MILL ROAD
 WINSTON SALEM NC 27105

FACILITY EPA ID #	INVOICE #	INVOICE DATE	AMOUNT DUE	DUE DATE	ENTER AMOUNT PAID
NCD000813501	HW60718	10/28/2013	\$ 1,400.00	11/27/2013	

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

B. Explanation of Invoice Amount is Based on Facility's Current Status as of July 1,2013 :

FACILITY STATUS	FEE	TONNAGE	AMOUNT DUE
LARGE QUANTITY GENERATOR	\$1400.00	-----	\$1,400.00
		PAST DUE	\$0.00
		CREDIT	\$0.00
		TOTAL AMOUNT DUE	\$1,400.00

C. Remit Payment (including 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

Sondra Thoren (919) 707-8228
 Patricia Davalos, Supervisor (919) 707-8233

2. TECHNICAL ASSISTANCE:

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

*Entered
10/14/13*



<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 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 <u>in one or more months</u> 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>0</td><td>0</td><td>0</td><td>8</td><td>1</td><td>3</td><td>5</td><td>0</td><td>1</td></tr></table></p>			N	C	D	0	0	0	8	1	3	5	0	1								
N	C	D	0	0	0	8	1	3	5	0	1												
<p>3. Site Name</p>	<p>Name: Hanesbrands Inc - Weeks Plant</p>																						
<p>4. Site Location Information</p>	<p>Street Address: 401 Hanes Mill Road</p> <p>City, Town, or Village: Winston-Salem County: Forsyth</p> <p>State: North Carolina Country: USA Zip Code: 27105</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>1</td><td>5</td><td>1</td><td>1</td></tr></table> C. <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><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></tr></table> D. <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table></p>			3	1	5	1	1															
3	1	5	1	1																			
<p>7. Site Mailing Address</p>	<p>Street or P.O. Box: 1000 Hanes Mill Road</p> <p>City, Town, or Village: Winston-Salem</p> <p>State: North Carolina Country: USA Zip Code: 27105</p>																						
<p>8. Site Contact Person</p>	<p>First Name: Tommy MI: Last: Thompson</p> <p>Title: Sr. Manager, International Environmental Affairs</p> <p>Street or P.O. Box: 1000 Hanes Mill Road</p> <p>City, Town or Village: Winston-Salem</p> <p>State: North Carolina Country: USA Zip Code: 27105</p> <p>Email: tommy.thompson@hanes.com</p> <p>Phone: (336)519-2715 Ext.: Fax:</p>																						
<p>9. Legal Owner and Operator of the Site</p>	<p>A. Name of Site's Legal Owner: Hanesbrands Inc Date Became Owner: 2006</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: 1000 Hanes Mill Road</p> <p>City, Town, or Village: Winston-Salem Phone: (336)519-2715</p> <p>State: North Carolina Country: USA Zip Code: 27105</p> <p>B. Name of Site's Operator: Hanesbrands Inc Date Became Operator:</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						
D002						
F001						
F002						
F003						

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.

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 facility was closed and sold. There were residual cooling tower, boiler, and product development chemicals on site. The notification is for the proper management/disposal of these chemicals. Hanesbrands does not currently own or operate the physical property. Once these wastes have been disposed of, all association between the current owner/facility and Hanesbrands will be completed. As such, this notification is for a single shipment after which it is requested that the sit be relisted as closed with no hazardous waste activity.

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)
	Tommy Thompson International Environmental Affairs	09/08/2013

Deaver, Melodi

file room

Keep

From: Lawrence, Ernest
Sent: Monday, October 14, 2013 5:31 PM
To: Deaver, Melodi
Subject: RE: RE: 8700 Hanesbrands INC-Weeks Plant Generator Status Change

Melodi,
Thanks for letting me know. I don't know of any reason to not process it.

I don't think going up in status requires my input, like going down does.

Can you email me the 8700 when you get a chance? I am curious about it and can plan on visiting them.

Thanks
Ernie

Ernest G. Lawrence
Environmental Senior Specialist
Hazardous Waste Section - Division of Waste Management
NC Dept. of Environment and Natural Resources
PO Box 925 Dobson NC 27017
Voice: 336-352-5742
Ernest.Lawrence@ncdenr.gov

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From: Deaver, Melodi
Sent: Monday, October 14, 2013 1:25 PM
To: Lawrence, Ernest
Subject: RE: 8700 Hanesbrands INC-Weeks Plant Generator Status Change

Hi Ernie,

I would like to inform you that the facility listed below changed their status from CESQG to LQG. Please let me know if it's okay to process.

Thank you,

NCD000813501
HANES BRANDS, INC-WEEKS PLANT
401 HANES MILL RD.
WINSTON, NC

Melodi
