

Hazardous Waste Section
File Room Document Transmittal Sheet

17

Your Name: BARBARA RYAN
EPA ID: NCR000009738
Facility Name: GOODRICH CUSTOMER SERVICE
Document Group: General (G)
Document Type: Hazardous Waste Report (HWR)
Description: 2015 B-REPORT
Date of Doc: 2/29/2016
Author of Doc: PIERRE GOULET, GENERAL MANAGER

File Room Use Only

Date Recieved by File Room:

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Month	Day	Year
6	6	16

NCR000009738

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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 must check with your State to determine if you are eligible to manage laboratory hazardous wastes pursuant to 40 CFR Part 262 Subpart K

- 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

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

11. Description of Hazardous Wastes

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, D006, D007, D008, D009, D018, D035, D039, D040, F003, F005

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.

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER

SITE NAME: GOODRICH CUSTOMER SERVICE

EPA ID NO: NCR000009738

U.S. ENVIRONMENTAL PROTECTION AGENCY

2015 HAZARDOUS WASTE REPORT

WASTE GENERATION AND MANAGEMENT

FORM GM

Instructions: Please see the detailed instructions beginning of the instructions and forms booklet before completing this form

SEC. 1	A. Waste description IGNITABLE, FLAMMABLE LIQUID, TOXICITY, SPENT THINNER FROM PAINT GUN CLEANING ACTIVITIES		
B. EPA hazardous waste code D001 D018 D035 D039 D040 F003 F005		C. State hazardous waste code	
D. Source code G01 Management method code for source code G25	E. Form code W211	F. Quantity generated in 2015 330.0 UOM Pounds Density <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg	G. Waste minimization code X
SEC. 2	Was any of this waste managed on site? <input type="checkbox"/> 1. Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2. No (SKIP TO SEC.3)		
	On-site management method code	Total quantity treated, disposed, or recycled On-site in 2015	
SEC. 3	A. Was any of this waste shipped off site in 2015 for treatment, disposal, or recycling? <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)		
	B. EPA ID No. of facility to which waste was shipped	C. Off-site management method code shipped to	D. Total quantity shipped in 2015
SITE 1	SCD077995488	H141	330.00
Comments:			

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER

SITE NAME: GOODRICH CUSTOMER SERVICE

EPA ID NO: NCR000009738

U.S. ENVIRONMENTAL PROTECTION AGENCY

2015 HAZARDOUS WASTE REPORT

FORM GM

WASTE GENERATION AND MANAGEMENT

Instructions: Please see the detailed instructions beginning of the instructions and forms booklet before completing this form

SEC. 1	A. Waste description TOXICITY CHARACTERISTICS, WASTE WATER FROM CLEANING AVIATION COMPONENTS		
B. EPA hazardous waste code D006 D007 D008		C. State hazardous waste code	
D. Source code G01 Management method code for source code G25		E. Form code W101	F. Quantity generated in 2015 1380.0 UOM Pounds Density <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg
G. Waste minization code X			
SEC. 2	Was any of this waste managed on site? <input type="checkbox"/> 1. Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2. No (SKIP TO SEC.3)		
	On-site management method code	Total quantity treated, disposed, or recycled On-site in 2015	
SEC. 3	A. Was any of this waste shipped off site in 2015 for treatment, disposal, or recycling? <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)		
	B. EPA ID No. of facility to which waste was shipped	C. Off-site management method code shipped to	D. Total quantity shipped in 2015
SITE 1	SCD036275626	H141	1,380.00
Comments:			

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER

SITE NAME: GOODRICH CUSTOMER SERVICE

EPA ID NO: NCR000009738

U.S. ENVIRONMENTAL PROTECTION AGENCY

2015 HAZARDOUS WASTE REPORT

WASTE GENERATION AND MANAGEMENT

FORM GM

Instructions: Please see the detailed instructions beginning of the instructions and forms booklet before completing this form

SEC. 1	A. Waste description TOXICITY CHARACTERISTIC, SOLID, SPENT HONING OIL FILTER FROM HONING OPERATION STATION CHANGE OUT		
B. EPA hazardous waste code D006		C. State hazardous waste code	
D. Source code G16 Management method code for source code G25	E. Form code W310	F. Quantity generated in 2015 20.0 UOM Pounds Density <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg	G. Waste minization code X
SEC. 2	Was any of this waste managed on site? <input type="checkbox"/> 1. Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2. No (SKIP TO SEC.3)		
	On-site management method code	Total quantity treated, disposed, or recycled On-site in 2015	
SEC. 3	A. Was any of this waste shipped off site in 2015 for treatment, disposal, or recycling? <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)		
	B. EPA ID No. of facility to which waste was shipped	C. Off-site management method code shipped to	D. Total quantity shipped in 2015
SITE 1	MID980615298	H141	20.00
Comments:			

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER

SITE NAME: GOODRICH CUSTOMER SERVICE

EPA ID NO: NCR000009738

U.S. ENVIRONMENTAL PROTECTION AGENCY

2015 HAZARDOUS WASTE REPORT

WASTE GENERATION AND MANAGEMENT

FORM GM

Instructions: Please see the detailed instructions beginning of the instructions and forms booklet before completing this form

SEC. 1	A. Waste description TOXICITY CHARACTERISTIC, LIQUID, SPENT HONING OIL FROM HONING OPERATION STATION CHANGE OUT		
B. EPA hazardous waste code D006		C. State hazardous waste code	
D. Source code G16 Management method code for source code G25	E. Form code W206	F. Quantity generated in 2015 295.0 UOM Pounds Density <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg	G. Waste minimization code X
SEC. 2	Was any of this waste managed on site? <input type="checkbox"/> 1. Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2. No (SKIP TO SEC.3)		
	On-site management method code	Total quantity treated, disposed, or recycled On-site in 2015	
SEC. 3	A. Was any of this waste shipped off site in 2015 for treatment, disposal, or recycling? <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)		
	B. EPA ID No. of facility to which waste was shipped	C. Off-site management method code shipped to	D. Total quantity shipped in 2015
SITE 1	SCD036275626	H061	295.00
Comments:			

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EPA ID NO: NCR000009738

U.S. ENVIRONMENTAL PROTECTION AGENCY

2015 HAZARDOUS WASTE REPORT

WASTE GENERATION AND MANAGEMENT

FORM GM

Instructions: Please see the detailed instructions beginning of the instructions and forms booklet before completing this form

SEC. 1	A. Waste description IGNITABLE, FLAMMABLE LIQUID, UNUSED / OUT-OF-DATE AEROSOLS		
B. EPA hazardous waste code D001		C. State hazardous waste code	
D. Source code G06 Management method code for source code G25	E. Form code W209	F. Quantity generated in 2015 305.0 UOM Pounds Density <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg	G. Waste minimization code X
SEC. 2	Was any of this waste managed on site? <input type="checkbox"/> 1. Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2. No (SKIP TO SEC.3)		
	On-site management method code	Total quantity treated, disposed, or recycled On-site in 2015	
SEC. 3	A. Was any of this waste shipped off site in 2015 for treatment, disposal, or recycling? <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)		
	B. EPA ID No. of facility to which waste was shipped	C. Off-site management method code shipped to	D. Total quantity shipped in 2015
SITE 1	SCD036275626	H141	305.00
Comments:			

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EPA ID NO: NCR000009738

U.S. ENVIRONMENTAL PROTECTION AGENCY

2015 HAZARDOUS WASTE REPORT

WASTE GENERATION AND MANAGEMENT

FORM GM

Instructions: Please see the detailed instructions beginning of the instructions and forms booklet before completing this form

SEC. 1	A. Waste description TOXICITY CHARACTERISTIC, MERCURY CONTAINING CRUSHED FLOURESCENT BULBS		
B. EPA hazardous waste code D009		C. State hazardous waste code	
D. Source code G15 Management method code for source code G25	E. Form code W320	F. Quantity generated in 2015 15.0 UOM Pounds Density <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg	G. Waste minization code X
SEC. 2	Was any of this waste managed on site? <input type="checkbox"/> 1. Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2. No (SKIP TO SEC.3)		
	On-site management method code	Total quantity treated, disposed, or recycled On-site in 2015	
SEC. 3	A. Was any of this waste shipped off site in 2015 for treatment, disposal, or recycling? <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)		
	B. EPA ID No. of facility to which waste was shipped	C. Off-site management method code shipped to	D. Total quantity shipped in 2015
SITE 1	MID980615298	H141	15.00
Comments:			

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SITE NAME: GOODRICH CUSTOMER SERVICE

EPA ID NO: **NCR000009738**

U.S. ENVIRONMENTAL PROTECTION AGENCY

2015 HAZARDOUS WASTE REPORT

WASTE GENERATION AND MANAGEMENT

FORM GM

Instructions: Please see the detailed instructions beginning of the instructions and forms booklet before completing this form

SEC. 1	A. Waste description TOXICITY, WASTE LIQUID FROM BRUSH CADMIUM STATION CHANGE OUT		
B. EPA hazardous waste code D006 D007		C. State hazardous waste code	
D. Source code G03 Management method code for source code G25	E. Form code W105	F. Quantity generated in 2015 370.0 UOM Pounds Density <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg	G. Waste minimization code X
SEC. 2	Was any of this waste managed on site? <input type="checkbox"/> 1. Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2. No (SKIP TO SEC.3)		
	On-site management method code	Total quantity treated, disposed, or recycled On-site in 2015	
SEC. 3	A. Was any of this waste shipped off site in 2015 for treatment, disposal, or recycling? <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)		
	B. EPA ID No. of facility to which waste was shipped	C. Off-site management method code shipped to	D. Total quantity shipped in 2015
SITE 1	SCD036275626	H061	370.00
Comments:			

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SITE NAME: GOODRICH CUSTOMER SERVICE

EPA ID NO: NCR000009738

U.S. ENVIRONMENTAL PROTECTION AGENCY

2015 HAZARDOUS WASTE REPORT

WASTE GENERATION AND MANAGEMENT

FORM GM

Instructions: Please see the detailed instructions beginning of the instructions and forms booklet before completing this form

SEC. 1	A. Waste description IGNITABLE, SPENT ISOPROPANOL FROM SHOP ACTIVITIES		
B. EPA hazardous waste code D001		C. State hazardous waste code	
D. Source code G01 Management method code for source code G25	E. Form code W203	F. Quantity generated in 2015 100.0 UOM Pounds Density <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg	G. Waste minimization code X
SEC. 2	Was any of this waste managed on site? <input type="checkbox"/> 1. Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2. No (SKIP TO SEC.3)		
	On-site management method code	Total quantity treated, disposed, or recycled On-site in 2015	
SEC. 3	A. Was any of this waste shipped off site in 2015 for treatment, disposal, or recycling? <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)		
	B. EPA ID No. of facility to which waste was shipped	C. Off-site management method code shipped to	D. Total quantity shipped in 2015
SITE 1	SCD036275626	H061	100.00
Comments:			

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EPA ID NO: NCR000009738

U.S. ENVIRONMENTAL PROTECTION AGENCY

2015 HAZARDOUS WASTE REPORT

FORM GM

WASTE GENERATION AND MANAGEMENT

Instructions: Please see the detailed instructions beginning of the instructions and forms booklet before completing this form

SEC. 1	A. Waste description IGNITABLE, FLAMMABLE SLUDGE, TOXICITY, UNUSED / OUT-OF-DATE MATERIAL FROM PAINTING OPERATIONS / CLEANUP		
B. EPA hazardous waste code D001 D007 D008 F003 F005		C. State hazardous waste code	
D. Source code G06 Management method code for source code G25	E. Form code W209	F. Quantity generated in 2015 3140.0 UOM Pounds Density <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg	G. Waste minimization code X
SEC. 2	Was any of this waste managed on site? <input type="checkbox"/> 1. Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2. No (SKIP TO SEC.3)		
	On-site management method code	Total quantity treated, disposed, or recycled On-site in 2015	
SEC. 3	A. Was any of this waste shipped off site in 2015 for treatment, disposal, or recycling? <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)		
	B. EPA ID No. of facility to which waste was shipped	C. Off-site management method code shipped to	D. Total quantity shipped in 2015
SITE 1	SCD036275626	H141	875.00
SITE 2	SCD036275626	H061	2,265.00
Comments:			

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U.S. ENVIRONMENTAL PROTECTION AGENCY

2015 HAZARDOUS WASTE REPORT

WASTE GENERATION AND MANAGEMENT

FORM GM

Instructions: Please see the detailed instructions beginning of the instructions and forms booklet before completing this form

SEC. 1	A. Waste description FLAMMABLE SOLIDS, TOXICITY CHARACTERISTICS, SPENT PAINT BOOTH FILTERS & WIPES FROM SHOP CLEAN UP AND PAINTING ACTIVITIES		
B. EPA hazardous waste code D007 D008 F003 F005		C. State hazardous waste code	
D. Source code G06 Management method code for source code G25	E. Form code W310	F. Quantity generated in 2015 2845.0 UOM Pounds Density <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg	G. Waste minimization code X
SEC. 2	Was any of this waste managed on site? <input type="checkbox"/> 1. Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2. No (SKIP TO SEC.3)		
	On-site management method code	Total quantity treated, disposed, or recycled On-site in 2015	
SEC. 3	A. Was any of this waste shipped off site in 2015 for treatment, disposal, or recycling? <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)		
	B. EPA ID No. of facility to which waste was shipped	C. Off-site management method code shipped to	D. Total quantity shipped in 2015
SITE 1	SCD036275626	H141	2,845.00
Comments:			

12. Notification of Hazardous Secondary Material (HSM) Activity

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

SECTION 14 SITE AUTHORIZED REPRESENTATIVE NAME HAS BEEN UPDATED.

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 fine and imprisonment for knowing violations.

Signature of Operator, Owner, or an Authorized Representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)
	PIERRE GOULET, GENERAL MANAGER	02/29/2016

10. Type of Regulated Waste Activity

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 1-7.

1. Generator of Hazardous Waste

If Yes, choose 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
- 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

If "Yes" above, indicate other generator activities.

2 Short-Term Generator (generate from a short-term or onetime event and not from on-going processes). If "Yes", provide an explanation in the Comments

3. United States Importer of Hazardous Waste

4. Mixed Waste (hazardous and radioactive) Generator

5. Transporter of Hazardous Waste

If Yes, mark all that apply.

- a. Transporter
- b. Transfer Facility (at your site)

6. Treater, Storer, or Disposer of Hazardous Waste (at your site)

Note: A hazardous waste permit is required for this activity.

7. Recycler of Hazardous Waste (at your site)

8. 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

9. Underground Injection Control

10. Receives Hazardous Waste from Off-site

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

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 managed at your site. If "Yes", mark all boxes that apply:

- a. Batteries
- b. Pesticides
- c. Mercury containing equipment
- d. Lamps
- e. Other (specify) _____
- f. Other (specify) _____
- g. Other (specify) _____

2. Destination Facility for Universal Waste

Note: A hazardous waste permit may be required for this

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

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