

File Room Document Transmittal Sheet

Your Name: BARBARA RYAN  
 EPA ID: NCR000136226  
 Facility Name: CAROLINA LOGISTICS SERVICES LLC  
 Document Group: General (G)  
 Document Type: Hazardous Waste Report (HWR)  
 Description: 2015 B-REPORT  
 Date of Doc: 2/29/2016  
 Author of Doc: KRISTIN ALSTAD, REGULATORY COMPLIANCE MANAGER

**File Room Use Only**

Date Recieved by File Room:

Date Scanned:

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6	8	16

NCR000136226

Scanner's Initials:

SH

<b>Send completed form to this address:</b>	<b>U.S. ENVIRONMENTAL PROTECTION AGENCY</b> <b>RCRA SUBTITLE C SITE IDENTIFICATION FORM (267891011215)</b> The Appropriate State or EPA Regional Office
<b>1. Reason for Submittal</b>  MARK ALL BOX(ES) THAT APPLY	<b>Reason for Submittal:</b> <input type="checkbox"/> To provide an Initial Notification (first time submitting site identification information / to obtain an EPA ID number for this location) <input checked="" type="checkbox"/> To provide Subsequent Notification of Regulated Waste Activity (to update site identification information) <input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application. <input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____). <input checked="" type="checkbox"/> As a component of the Hazardous Waste Report. (If marked, see sub-bullet below) <input checked="" type="checkbox"/> Site was a TSD facility and/or generator of >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)
<b>2. Site EPA ID Number</b>	<b>EPA ID Number:</b> NCR000136226
<b>3. Site Name</b>	<b>Name:</b> CAROL LOGISTICS SERVICES LLC
<b>4. Site Location Information</b>	<b>Street Address:</b> 5 NORTHRIDGE PARK DRIVE <b>City, Town, or Village:</b> RURAL HALL <b>State:</b> NC <b>Country:</b> US <b>County:</b> NC067 <b>Zip Code:</b> 27045
<b>5. Site Land Type</b>	<input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other
<b>6. NAICS Code(s) for the Site</b>	<input checked="" type="checkbox"/> A. 493110 <input type="checkbox"/> B. <input type="checkbox"/> C. <input type="checkbox"/> D.
<b>7. Site Mailing Address</b>	<b>Street or P. O. Box:</b> 540 NORTHRIDGE PARK DRIVE <b>City, Town, or Village:</b> RURAL HALL <b>State:</b> NC <b>Country:</b> US <b>Zip Code:</b> 27045
<b>8. Site Contact Person</b>	<b>First Name:</b> KRISTIN <b>MI:</b> <b>Last Name:</b> ALSTAD <b>Title:</b> REGULATORY COMPLIANCE MANAGER <b>Street or P. O. Box:</b> 635 VINE STREET <b>City, Town, or Village:</b> WINSTON-SALEM <b>State:</b> NC <b>Country:</b> US <b>Zip Code:</b> 27106 <b>Email:</b> kristin.alstad@inmar.com <b>Phone:</b> 3364998468 <b>Ext:</b> <b>Fax:</b>
<b>9. Operator and Legal Owner of the Site</b>	<b>A. Name of Site's Owner:</b> FAWN INDUSTRIAL LLC <b>Date Became Owner:</b> 08/11/2006 <b>Type:</b> <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other <b>Street or P. O. Box:</b> 10 GLENVILLE ST 3RD FLOOR <b>City, Town, or Village:</b> GREENWICH <b>Phone:</b> <b>State:</b> CT <b>Country:</b> US <b>Zip Code:</b> 06830 <b>B. Name of Site's Operator:</b> CAROLINA LOGISTICS SERVICES <b>Date Became Operator:</b> 10/31/2005 <b>Type:</b> <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other



**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

**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, D002, D003, D004, D005, D006, D007, D008, D009, D010, D011, D018, D026, D035, P075, U002, U031, U112, U140, U154, U188, U248

**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. 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**

**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)
	KRISTIN ALSTAD, REGULATORY COMPLIANCE MANAGER	02/29/2016

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER

SITE NAME: CAROLINA LOGISTICS SERVICES LLC

EPA ID NO: NCR000136226

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

<b>SEC. 1</b>	A. Waste description OXIDIZING LIQUID		
B. EPA hazardous waste code D001		C. State hazardous waste code	
D. Source code G11 Management method code for source code G25		E. Form code W119	F. Quantity generated in 2015 16374.0 UOM Pounds <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg Density
G. Waste minization code A			
<b>SEC. 2</b>	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	
<b>SEC. 3</b>	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	ARD069748192	H040	16,374.00
<b>Comments:</b> PRIOR TO GENERATING HAZARDOUS WASTE WE ANALYZE ALL ITEMS TO DETERMINE IF IT CAN BE DONATED, LIQUIDATED, RECYCLED, REPACKED OR RETURNED TO THE MANUFACTURER.			

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EPA ID NO: NCR000136226

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

<b>SEC. 1</b>	A. Waste description OXIDIZER, CORROSIVE (BASIC) LIQUID - DRAIN CLEANER		
B. EPA hazardous waste code D001 D002		C. State hazardous waste code	
D. Source code G11 Management method code for source code G25	E. Form code W119	F. Quantity generated in 2015 75.0 UOM Pounds Density <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg	G. Waste minization code A
<b>SEC. 2</b>	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	
<b>SEC. 3</b>	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	ARD069748192	H040	75.00
<b>Comments:</b> PRIOR TO GENERATING HAZARDOUS WASTE WE ANALYZE ALL ITEMS TO DETERMINE IF IT CAN BE DONATED, LIQUIDATED, RECYCLED, REPACKED OR RETURNED TO THE MANUFACTURER.			

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EPA ID NO: NCR000136226

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

<b>SEC. 1</b>	A. Waste description FLAMMABLE SOLIDS		
B. EPA hazardous waste code D001 D018		C. State hazardous waste code	
D. Source code G11 Management method code for source code G25	E. Form code W409	F. Quantity generated in 2015 282.0 UOM Pounds Density <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg	G. Waste minization code A
<b>SEC. 2</b>	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	
<b>SEC. 3</b>	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	ARD069748192	H040	282.00
<b>Comments:</b> PRIOR TO GENERATING HAZARDOUS WASTE WE ANALYZE ALL ITEMS TO DETERMINE IF IT CAN BE DONATED, LIQUIDATED, RECYCLED, REPACKED OR RETURNED TO THE MANUFACTURER.			

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EPA ID NO: NCR000136226

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

<b>SEC. 1</b>	A. Waste description FLAMMABLE LIQUIDS		
B. EPA hazardous waste code D001 D008 U002 U031 U112 U140 U154		C. State hazardous waste code	
D. Source code G11 Management method code for source code G25	E. Form code W219	F. Quantity generated in 2015 21913.0 UOM Pounds Density <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg	G. Waste minimization code A
<b>SEC. 2</b>	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	
<b>SEC. 3</b>	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	ARD069748192	H040	21,913.00
<b>Comments:</b> PRIOR TO GENERATING HAZARDOUS WASTE WE ANALYZE ALL ITEMS TO DETERMINE IF IT CAN BE DONATED, LIQUIDATED, RECYCLED, REPACKED OR RETURNED TO THE MANUFACTURER.			

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SITE NAME: CAROLINA LOGISTICS SERVICES LLC

EPA ID NO: NCR000136226

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

<b>SEC. 1</b>	A. Waste description FLAMMABLE AEROSOLS		
B. EPA hazardous waste code D001 D035		C. State hazardous waste code	
D. Source code G11 Management method code for source code G25	E. Form code W801	F. Quantity generated in 2015 29716.0 UOM Pounds Density <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg	G. Waste minization code A
<b>SEC. 2</b>	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	
<b>SEC. 3</b>	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	ARD069748192	H040	29,716.00
<b>Comments:</b> PRIOR TO GENERATING HAZARDOUS WASTE WE ANALYZE ALL ITEMS TO DETERMINE IF IT CAN BE DONATED, LIQUIDATED, RECYCLED, REPACKED OR RETURNED TO THE MANUFACTURER.			

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EPA ID NO: NCR000136226

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

<b>SEC. 1</b>	A. Waste description BASIC LIQUID		
B. EPA hazardous waste code D002		C. State hazardous waste code	
D. Source code G11 Management method code for source code G25	E. Form code W110	F. Quantity generated in 2015 115.0 UOM Pounds <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg Density	G. Waste minimization code A
<b>SEC. 2</b>	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	
<b>SEC. 3</b>	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	ARD069748192	H040	115.00
<b>Comments:</b> PRIOR TO GENERATING HAZARDOUS WASTE WE ANALYZE ALL ITEMS TO DETERMINE IF IT CAN BE DONATED, LIQUIDATED, RECYCLED, REPACKED OR RETURNED TO THE MANUFACTURER.			

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EPA ID NO: NCR000136226

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

<b>SEC. 1</b>	A. Waste description LIMITED QUANTITY ACIDS		
B. EPA hazardous waste code D002		C. State hazardous waste code	
D. Source code G11 Management method code for source code G25	E. Form code W119	F. Quantity generated in 2015 633.0 UOM Pounds Density <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg	G. Waste minization code A
<b>SEC. 2</b>	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	
<b>SEC. 3</b>	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	ARD069748192	H040	633.00
<b>Comments:</b> PRIOR TO GENERATING HAZARDOUS WASTE WE ANALYZE ALL ITEMS TO DETERMINE IF IT CAN BE DONATED, LIQUIDATED, RECYCLED, REPACKED OR RETURNED TO THE MANUFACTURER.			

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2015 HAZARDOUS WASTE REPORT

WASTE GENERATION AND MANAGEMENT

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<b>SEC. 1</b>	A. Waste description BLEACH		
B. EPA hazardous waste code D002		C. State hazardous waste code	
D. Source code G11 Management method code for source code G25	E. Form code W119	F. Quantity generated in 2015 322.0 UOM Pounds Density <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg	G. Waste minization code A
<b>SEC. 2</b>	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	
<b>SEC. 3</b>	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	ARD069748192	H040	322.00
<b>Comments:</b> PRIOR TO GENERATING HAZARDOUS WASTE WE ANALYZE ALL ITEMS TO DETERMINE IF IT CAN BE DONATED, LIQUIDATED, RECYCLED, REPACKED OR RETURNED TO THE MANUFACTURER.			

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<b>SEC. 1</b>	A. Waste description TOXICS		
B. EPA hazardous waste code D004 D005 D006 D007 D008 D009 D010 D011 D018 D026 U188 U248		C. State hazardous waste code	
D. Source code G11 Management method code for source code G25	E. Form code W219	F. Quantity generated in 2015 28398.0 UOM Pounds <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg Density	G. Waste minization code A
<b>SEC. 2</b>	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	
<b>SEC. 3</b>	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	ARD069748192	H040	28,398.00
<b>Comments:</b> PRIOR TO GENERATING HAZARDOUS WASTE WE ANALYZE ALL ITEMS TO DETERMINE IF IT CAN BE DONATED, LIQUIDATED, RECYCLED, REPACKED OR RETURNED TO THE MANUFACTURER.			

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<b>SEC. 1</b>	A. Waste description NICKEL CADMIUM BATTERIES CONTAINED IN ITEMS		
B. EPA hazardous waste code D006		C. State hazardous waste code	
D. Source code G11 Management method code for source code G25	E. Form code W309	F. Quantity generated in 2015 40.0 UOM Pounds Density <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg	G. Waste minization code A
<b>SEC. 2</b>	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)		
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	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	ARD069748192	H141	40.00
<b>Comments:</b> PRIOR TO GENERATING HAZARDOUS WASTE WE ANALYZE ALL ITEMS TO DETERMINE IF IT CAN BE DONATED, LIQUIDATED, RECYCLED, REPACKED OR RETURNED TO THE MANUFACTURER.			

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<b>SEC. 1</b>	A. Waste description ITEMS CONTAINING LEAD AND MERCURY		
B. EPA hazardous waste code D008 D009		C. State hazardous waste code	
D. Source code G11 Management method code for source code G25	E. Form code W319	F. Quantity generated in 2015 389.0 UOM Pounds Density <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg	G. Waste minization code A
<b>SEC. 2</b>	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	
<b>SEC. 3</b>	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	ARD069748192	H141	389.00
<b>Comments:</b> PRIOR TO GENERATING HAZARDOUS WASTE WE ANALYZE ALL ITEMS TO DETERMINE IF IT CAN BE DONATED, LIQUIDATED, RECYCLED, REPACKED OR RETURNED TO THE MANUFACTURER.			

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER

SITE NAME: CAROLINA LOGISTICS SERVICES LLC

EPA ID NO: NCR000136226

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

<b>SEC. 1</b>	A. Waste description NICOTINE		
B. EPA hazardous waste code P075		C. State hazardous waste code	
D. Source code G11 Management method code for source code G25	E. Form code W219	F. Quantity generated in 2015 91595.0 UOM Pounds Density <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg	G. Waste minization code A
<b>SEC. 2</b>	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	
<b>SEC. 3</b>	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	ARD069748192	H040	91,595.00
<b>Comments:</b> PRIOR TO GENERATING HAZARDOUS WASTE WE ANALYZE ALL ITEMS TO DETERMINE IF IT CAN BE DONATED, LIQUIDATED, RECYCLED, REPACKED OR RETURNED TO THE MANUFACTURER.			