

Hazardous Waste Section  
File Room Document Transmittal Sheet

Your Name: BARBARA RYAN  
EPA ID: NCR000144477  
Facility Name: NCDSCA 032-0014 (HOLLYWOOD CLEANERS)  
Document Group: General (G)  
Document Type: Hazardous Waste Report (HWR)  
Description: 2015 BI-REPORT  
Date of Doc: 2/19/2016  
Author of Doc: SCOTT B. STUPAK

**File Room Use Only**

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NCR000144477

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Facility CLQG to SOLG on 08/6/2/2016

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<p>Send completed form to this address:</p>	<p align="center">U.S. ENVIRONMENTAL PROTECTION AGENCY</p> <p align="center"><b>RCRA SUBTITLE C SITE IDENTIFICATION FORM (2015)</b></p> <p>The Appropriate State or EPA Regional Office</p> 
<p><b>1. Reason for Submittal</b></p> <p>MARK ALL BOX(ES) THAT APPLY</p>	<p><b>Reason for Submittal:</b></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 Subsequent Notification of Regulated Waste Activity (to update site identification information).</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 checked="" type="checkbox"/> As a component of the Hazardous Waste Report. (If marked, see sub-bullet below)</p> <p><input checked="" type="checkbox"/> Site was a TSD facility and/or generator of &gt;1,000 kg of hazardous waste, &gt;1 kg of acute hazardous waste, or &gt;100 kg of acute hazardous waste spill cleanup in one or more months of the report year (or State equivalent LQG regulations)</p>
<p><b>2. Site EPA ID Number</b></p>	<p>EPA ID Number: NCR000144477</p>
<p><b>3. Site Name</b></p>	<p>Name: NCDSCA 032-0014( HOLLYWOOD CLEANERS )</p>
<p><b>4. Site Location Information</b></p>	<p>Street Address: 3823 GUESS RD, SUITE 100          City, Town, or Village: DURHAM County: 63          State: NC Country: US Zip Code: 27705</p>
<p><b>5. Site Land Type</b></p>	<p><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</p>
<p><b>6. NAICS Code(s) for the Site</b></p>	<p>A. 812320 B. C. D.</p>
<p><b>7. Site Mailing Address</b></p>	<p>Street or P. O. Box: 1646 MAIL SERVICE CENTER, ATTN DSCA PROGRAM          City, Town, or Village: RALEIGH          State: NC Country: US Zip Code: 27699-1646</p>
<p><b>8. Site Contact Person</b></p>	<p>First Name: AL MI: Last Name: CHAPMAN          Title: PROJECT MANAGER          Street or P. O. Box: 1646 MAIL SERVICE CENTER, ATTN DSCA PROGRAM          City, Town, or Village: RALEIGH          State: NC Country: US Zip Code: 27699-1646          Email: AL.CHAPMAN@NCDENR.GOV          Phone: 9197078368 Ext: Fax:</p>
<p><b>9. Operator and Legal Owner of the Site</b></p>	<p><b>A. Name of Site's Owner:</b> Willowdaile Star Holdings LLC <b>Date Became Owner:</b> 11/20/2015</p> <p>Type: <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</p> <p>Street or P. O. Box:          City, Town, or Village: Phone          State: Country: Zip Code:</p> <p><b>B. Name of Site's Operator:</b> Petitioner(s) for DSCA Site ID 032-0014 <b>Date Became Operator:</b> 06/28/2007</p> <p>Type: <input 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 checked="" type="checkbox"/> Other</p>

**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.

F002

**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.

**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

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