

Hazardous Waste Section
File Room Document Transmittal Sheet

Your Name: BARBARA RYAN
EPA ID: NCD079047148
Facility Name: RPM WOOD FINISHES GROUP INC
Document Group: General (G)
Document Type: Notification 8700 (8700)
Description:
Date of Doc: 1/12/2016
Author of Doc: SAMUEL HINSON

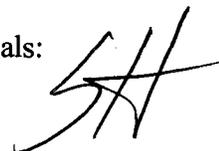
File Room Use Only

Date Recieved by File Room:
Date Scanned:

Month	Day	Year
8	17	16

NCD079047148

Scanner's Initials:





Waste Management
ENVIRONMENTAL QUALITY

PAT MCCRORY
Governor

DONALD R. VAN DER VAART
Secretary

LINDA CULPEPPER
Director

February 17, 2016

ALICIA HUNOLT
RPM WOOD FINISHES GROUP INC
PO BOX 22000
HICKORY, NC 28603-0220

RE: EPA ID # NCD079047148 - RPM WOOD FINISHES GROUP INC

Dear Facility Contact:

The North Carolina Hazardous Waste Section has received 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 assistance, please feel free to contact Melodi Deaver at (919)-707-8204.

Sincerely,

Julie Woosley, Chief
Hazardous Waste Section

cc: Central Files (General)

IBEAM - RCRA Site Detail

Report run on: February 17, 2016

NCD079047148 RPM WOOD FINISHES GROUP INC

County: CALDWELL Source Type: S Seq. Number: 32 Receive Date: 21 Jan 2016

Location 3194 HICKORY BLVD. Address: HUDSON, NC 28638	Mailing PO BOX 22000 Address: HICKORY, NC 286030220
--	--

Contact Person ALICIA HUNOLT For Source Information (828) 728-8266X1819	PO BOX 22000 HICKORY, NC 286030220 US
--	--

Owner (current) RPM INTERNATIONAL INC	PO BOX 777 MEDINA, OH 44258	Type: P
From: 06/01/1991	To:	Phone:

Operator (current) RPM WOOD FINISHES GROUP INC	3194 HICKORY BLVD HUDSON, NC 28638	Type: P
From: 01/01/2010	To:	Phone:

Land Type: P	Non Notifier : E	Commercial Availability:	Tsd Date:
Accessibility:	No. Employees : 0	State District:	

Regulatory Waste Activities

Hazardous Waste Generator Status - Federal: Large Quantity Generator; State: Large Quantity Generator

Transfer Facility:	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 off-specification used oil to off-specification used oil burner:	No
Transporter Activity: No	Used Oil Processor and/or Re-refiner Activity	Marketer who first claims the used oil meets the specifications:	No
TSD Activity: No	Processor: No		
Recycler Activity: No	Refiner: No	Destination Facility for Universal Waste:	No
Exempt Boiler and/or Industrial Furnace	Underground Injection Control:		
Small Quantity Onsite Burner Exemption: No	No		
Smelting, melting, Refining Furnace Exemption: No			

Certification Information

First Name : SAMUEL	Title VP OF OPER
Last Name : HINSON	Date Signed 01/12/2016

NAICS Code

325510

Comments

UPDATED 8700-12 2015 BI-REPORT DATED 1/12/2016 SITE CONTACT PERSON INFOR, LEGAL OWNER INFOR. MD 2/17/2016

RECEIVED

JAN 2016

Hazardous Waste Section



<p>Send completed form to this address:</p>	<p align="center">U.S. ENVIRONMENTAL PROTECTION AGENCY</p> <p align="center">RCRA SUBTITLE C SITE IDENTIFICATION FORM (2015)</p> <p>The Appropriate State or EPA Regional Office</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 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 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)</p>
<p>2. Site EPA ID Number</p>	<p>EPA ID Number: NCD079047148</p>
<p>3. Site Name</p>	<p>Name: RPM WOOD FINISHES GROUP, INC.</p>
<p>4. Site Location Information</p>	<p>Street Address: 3194 HICKORY BLVD. City, Town, or Village: HUDSON County: NC027 State: NC Country: US Zip Code: 28638</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"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p>
<p>6. NAICS Code(s) for the Site</p>	<p>A. 325510 B. C. D.</p>
<p>7. Site Mailing Address</p>	<p>Street or P. O. Box: P.O. BOX 22000 City, Town, or Village: HICKORY State: NC Country: US Zip Code: 286030220</p>
<p>8. Site Contact Person</p>	<p>✓ First Name: ALICIA MI: E Last Name: HUNOLT Title: ENVIRONMENT, HEALTH, AND SAFETY MANAGER Street or P. O. Box: PO BOX 22000 City, Town, or Village: HICKORY State: NC Country: US Zip Code: 286030220 Email: ahunolt@rpmwfg.com Phone: 8287288266 Ext: 1819 Fax: 8287268128</p>
<p>9. Operator and Legal Owner of the Site</p>	<p>✓ A. Name of Site's Owner: RPM INTERNATIONAL, INC. Date Became Owner: 06/01/1991 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 Street or P. O. Box: P.O. BOX 777 City, Town, or Village: MEDINA Phone State: OH Country: US Zip Code: 44258</p> <p>B. Name of Site's Operator: RPM WOOD FINISHES GROUP, INC. Date Became Operator: 01/01/2010 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>

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.

Y N 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.

Y N 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

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 (at your site)

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

Y N 7. Recycler of Hazardous Waste (at your site)

Y N 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

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 (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) _____

Y N 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.

Y N 1. Used Oil Transporter
If Yes, mark each that applies.

- a. Transporter
- b. Transfer Facility

Y N 2. Used Oil Processor and/or Re-refiner
If Yes, mark each that applies.

- a. Processor
- b. Re-refiner

Y N 3. Off-Specification Used Oil Burner

Y N 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, D035, 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.

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

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)
	SAMUEL E. HINSON, VP OF OPERATIONS	01/12/2016

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER

SITE NAME: RPM WOOD FINISHES GROUP, INC.

EPA ID NO: NCD079047148

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 MIXED FLAMMABLE SOLVENT WASTE FROM CLEANING PROCESS EQUIPMENT AND STILL BOTTOMS FROM RECOVERY OF ACETONE.		
B. EPA hazardous waste code D001 D035 F003 F005		C. State hazardous waste code	
D. Source code G13 Management method code for source code G25	E. Form code W203	F. Quantity generated in 2015 1017306.0 UOM Pounds Density <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg	G. Waste minization code A
SEC. 2	A. Was any of this waste managed on site? <input checked="" type="checkbox"/> 1. Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input type="checkbox"/> 2. No (SKIP TO SEC.3)		
	On-site management method code	Total quantity treated, disposed, or recycled On-site in 2015	
ON-SITE PROCESS 1	H020	1,017,306.00	
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	SCD003368891	H040	1,015,196.00
SITE 2	SCD036275626	H061	2,110.00
Comments:			

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER

SITE NAME: RPM WOOD FINISHES GROUP, INC.

EPA ID NO: NCD079047148

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 WASTE FLAMMABLE SOLIDS/SLUDGES CONTAINING PAINT PIGMENT, RESINS AND SOLIDS		
	B. EPA hazardous waste code D001 D035		C. State hazardous waste code
D. Source code G13 Management method code for source code G25		E. Form code W604	F. Quantity generated in 2015 4861.0 UOM Pounds Density <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg
G. Waste minimization code A			
SEC. 2	A. 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	TND000772186	H120	4,861.00
Comments:			