

File Room Document Transmittal Sheet

Your Name: BARBARA RYAN
 EPA ID: NCR000167494
 Facility Name: NOVAN INC
 Document Group: General (G)
 Document Type: Notification 8700 (8700)
 Description:
 Date of Doc: 6/1/2016
 Author of Doc: BRETT HUFFMAN

File Room Use Only

NCR000167494

Date Recieved by File Room:

Month	Day	Year
9	6	16

Date Scanned:

Scanner's Initials:

SH



Waste Management
ENVIRONMENTAL QUALITY

PAT MCCRORY

Governor

DONALD R. VAN DER VAART

Secretary

MICHAEL SCOTT

Director

June 03, 2016

BRETT HUFFMAN
NOVAN INC
4105 HOPSON DR
DURHAM, NC 27703

RE: EPA ID # NCR000167494 - NOVAN 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: June 03, 2016

NCR000167494 NOVAN INC

County: DURHAM Source Type: N Seq. Number: 3 Receive Date: 02-Jun-2016

Location 4105 HOPSON DR Address: DURHAM, NC 27703	Mailing 4105 HOPSON DR Address: DURHAM, NC 27703
--	---

Contact Person BRETT HUFFMAN For Source (919) 378-2557 Information	4105 HOPSON DR DURHAM, NC 27703 US
--	--

Owner (current) LONGFELLOW REAL ESTATE	523 DAVIS DR STE 150 MORRISVILLE, NC 27540	Type: P
From: 10/30/2015	To:	Phone: (919) 354-1332

Operator (current) NOVAN INC	4105 HOPSON DR DURHAM, NC 27703	Type: P
From: 09/01/2016	To:	Phone:

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

Regulated Waste Activities

Hazardous Waste Generator Status - Federal: Not a Generator; State: Not a 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: Unknown	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			
Smelting, melting, Refining Furnace Exemption: No			

Certification Information

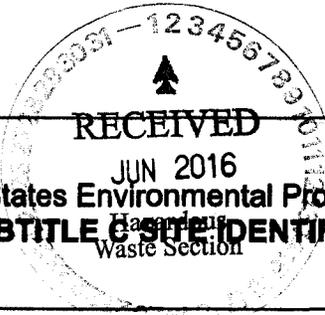
First Name : BRETT	Title	FAC MGR
Last Name : HUFFMAN	Date Signed	06/01/2016

NAICS Codes

325411 541711

Comments

CREATED NEW 8700-12 DATED 6/1/2016 AS A NAG. MD 6/3/2016



United States Environmental Protection Agency
RCRA SUBTITLE C SITE IDENTIFICATION FORM

SEND COMPLETED FORM TO:
 The Appropriate State or Regional Office.

1. Reason for Submittal

MARK ALL BOX(ES) THAT APPLY

- Reason for Submittal:**
- To provide an Initial Notification (first time submitting site identification information / to obtain an EPA ID number for this location)
 - To provide a Subsequent Notification (to update site identification information for this location)
 - As a component of a First RCRA Hazardous Waste Part A Permit Application
 - As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____)
 - As a component of the Hazardous Waste Report (if marked, see sub-bullet below)
 - 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 in one or more months of the report year (or State equivalent LQG regulations)

2. Site EPA ID Number

EPA ID Number NCRA000167494

3. Site Name

Name: Novan, Inc.

4. Site Location Information

Street Address: 4105 Hopson Drive
 City, Town, or Village: Durham County: Durham
 State: NC Country: US Zip Code: 27703

5. Site Land Type

Private County District Federal Tribal Municipal State Other

6. NAICS Code(s) for the Site (at least 5-digit codes)

A. 5 4 1 7 1 1 C. _____
 B. 3 2 5 4 1 1 D. _____

7. Site Mailing Address

Street or P.O. Box: 4105 Hopson Road
 City, Town, or Village: Durham
 State: NC Country: US Zip Code: 27703

8. Site Contact Person

First Name: Brett MI: _____ Last: Huffman
 Title: Facilities Manager
 Street or P.O. Box: 4105 Hopson Drive
 City, Town or Village: Durham
 State: NC Country: US Zip Code: 27703
 Email: bhuffman@novan.com
 Phone: 919-378-2557 Ext.: _____ Fax: 919-237-9212

9. Legal Owner and Operator of the Site

A. Name of Site's Legal Owner: Longfellow Real Estate Date Became Owner: 10/30/15
 Owner Type: Private County District Federal Tribal Municipal State Other
 Street or P.O. Box: 523 Davis Drive, Suite 150
 City, Town, or Village: Morrisville Phone: 919-354-1332
 State: NC Country: US Zip Code: 27540
 B. Name of Site's Operator: Novan, Inc. Date Became Operator: 09/01/2016
 Operator Type: Private County District Federal Tribal Municipal State Other

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

12. Notification of Hazardous Secondary Material (HSM) Activity

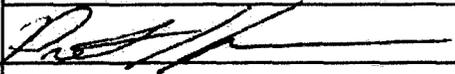
Y N Are you notifying under 40 CFR 260.42 that you will begin managing, are managing, or will stop managing hazardous secondary material under 40 CFR 261.2(a)(2)(II), 40 CFR 261.4(a)(23), (24), or (25)?

If "Yes", you must fill out the Addendum to the Site Identification Form: Notification for Managing Hazardous Secondary Material.

13. Comments

n/a
[Signature]
01-30-2016

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)
	Brett Huffman, Facilities Manager	06/01/2016