

296SERBSF10,616

296SERBSF10,616

Site Name (Subject): SINGER CO/FURNITURE DIV 5 6 7

Site ID (Document ID): NCD062568035

Document Name (DocType): Correspondence (C)

Report Segment:

Description: General Correspondence, 1980 - 1995

Date of Document: 8/22/1995

Date Received:

BOX: *Enter SF and # with no spaces* SF10,616

Access Level: PUBLIC

Division: WASTE MANAGEMENT

Section: SUPERFUND

Program (Document Group): SERB (SERB)

Document Category: FACILITY

Print Report for Record

Go to New Blank Record

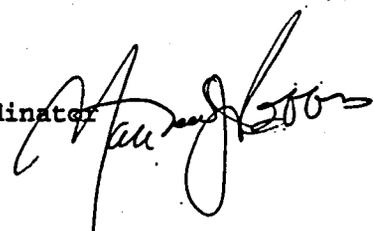
Go to New Record - (default to last record values)

Delete Record

1995 DATE: August 22, 1995

SUBJECT: REMOVAL FROM EPA'S CERCLIS INVENTORY

FROM: Matthew J. Robbins, Brownfields Coordinator
Waste Management Division, Region IV



TO: SINGER CO FURNITURE DIV 5 6 7 & CWH
2424 NORWOOD ST (HWY 321 S)
LENOIR
NC 28645

EPA has identified the Brownfields Initiative as one of the Agency's top priorities. The term "brownfields" refers to previously used properties that may lie vacant because potential contamination makes them unmarketable to the private sector. EPA has recently announced a comprehensive Brownfields strategy, including Pilot grants to municipalities, to stimulate economic revitalization.

One part of the strategy has been for EPA to review its complete inventory of Superfund sites. These sites have been screened and determined to require no remedial action under the Federal Superfund Program based on information available as well as on conditions and policies that currently exist. This is to notify you that EPA has removed your facility from EPA's computer inventory known as CERCLIS. THIS DOES NOT INDICATE THAT THE STATE HAS MADE A SIMILAR DETERMINATION.

If you have any questions, please call me at 404/347-5059 ext. 6214.

cc: State Agency

Site Name: Singer Co-5-6-7
 Site Number: NCD 062 568 035
 Site Location: Lenior, N.C.
 Caldwell County
 Latitude: 35 51 58.5
 Longitude: 81 30 38.0
 Date: July 06, 1992

Calculation Results

Distance from Site Location	Population		Number of Households	
	Per Ring	Cumulative	Per Ring	Cumulative
0 to 1/4 mile	106	106	43	43
>1/4 to 1/2 mile	490	596	220	263
>1/2 to 1 mile	1,807	2,403	750	1,013
>1 to 2 miles	6,964	9,367	2,824	3,837
>2 to 3 miles	6,790	16,157	2,649	6,486
>3 to 4 miles	11,022	27,179	4,614	11,100

Note: The populations and number of households within specified target distance rings were calculated for the NC Superfund Section by the NC State Center for Geographic Information and Analysis using the 1990 US Census data. These values were calculated by summing the population and the number of households data for each census block located within each target ring. For census blocks lying only partially within the ring, the per cent area of the block within the ring was multiplied by the population and household densities of the block.

LATITUDE AND LONGITUDE CALCULATION WORKSHEET #2
LI USING ENGINEER'S SCALE (1/60)

SITE NAME: Singer Co. Furniture Div. Plants ^{5, 6, 7 and CWH} CERCLIS #: NC 062 568 035

AKA: _____ SSID: _____

ADDRESS: 2424 Norwood St. (Hwy. 321 South)

CITY: Lenoir STATE: NC ZIP CODE: 28645

SITE REFERENCE POINT: northeast corner of plant bldg. in approx. center of site

USGS QUAD MAP NAME: Drexel TOWNSHIP: _____ N/S RANGE: _____ E/W

SCALE: 1:24,000 MAP DATE: 1956 SECTION: _____ 1/4 _____ 1/4 _____ 1/4

MAP DATUM: (1927) 1983 (CIRCLE ONE) MERIDIAN: _____

COORDINATES FROM LOWER RIGHT (SOUTHEAST) CORNER OF 7.5' MAP (attach photocopy):

LONGITUDE: 81° 30' 00" LATITUDE: 35° 45' 00"

COORDINATES FROM LOWER RIGHT (SOUTHEAST) CORNER OF 2.5' GRID CELL:

LONGITUDE: 81° 30' 00" LATITUDE: 35° 50' 00"

CALCULATIONS: LATITUDE (7.5' QUADRANGLE MAP)

A) NUMBER OF RULER GRADUATIONS FROM LATITUDE GRID LINE TO SITE REF POINT: 359

B) MULTIPLY (A) BY 0.3304 TO CONVERT TO SECONDS:

$A \times 0.3304 = \underline{118.6}$ "

C) EXPRESS IN MINUTES AND SECONDS (1' = 60"): 01' 58.6"

D) ADD TO STARTING LATITUDE: 35° 50' 00.0" + 01' 58.6" =

SITE LATITUDE: 35° 51' 58.5"

CALCULATIONS: LONGITUDE (7.5' QUADRANGLE MAP)

A) NUMBER OF RULER GRADUATIONS FROM RIGHT LONGITUDE LINE TO SITE REF POINT: 115

B) MULTIPLY (A) BY 0.3304 TO CONVERT TO SECONDS:

$A \times 0.3304 = \underline{38.0}$ "

C) EXPRESS IN MINUTES AND SECONDS (1' = 60"): 00' 38.0"

D) ADD TO STARTING LONGITUDE: 81° 30' 00.0" + 00' 38.0" =

SITE LONGITUDE: 81° 30' 38.0"

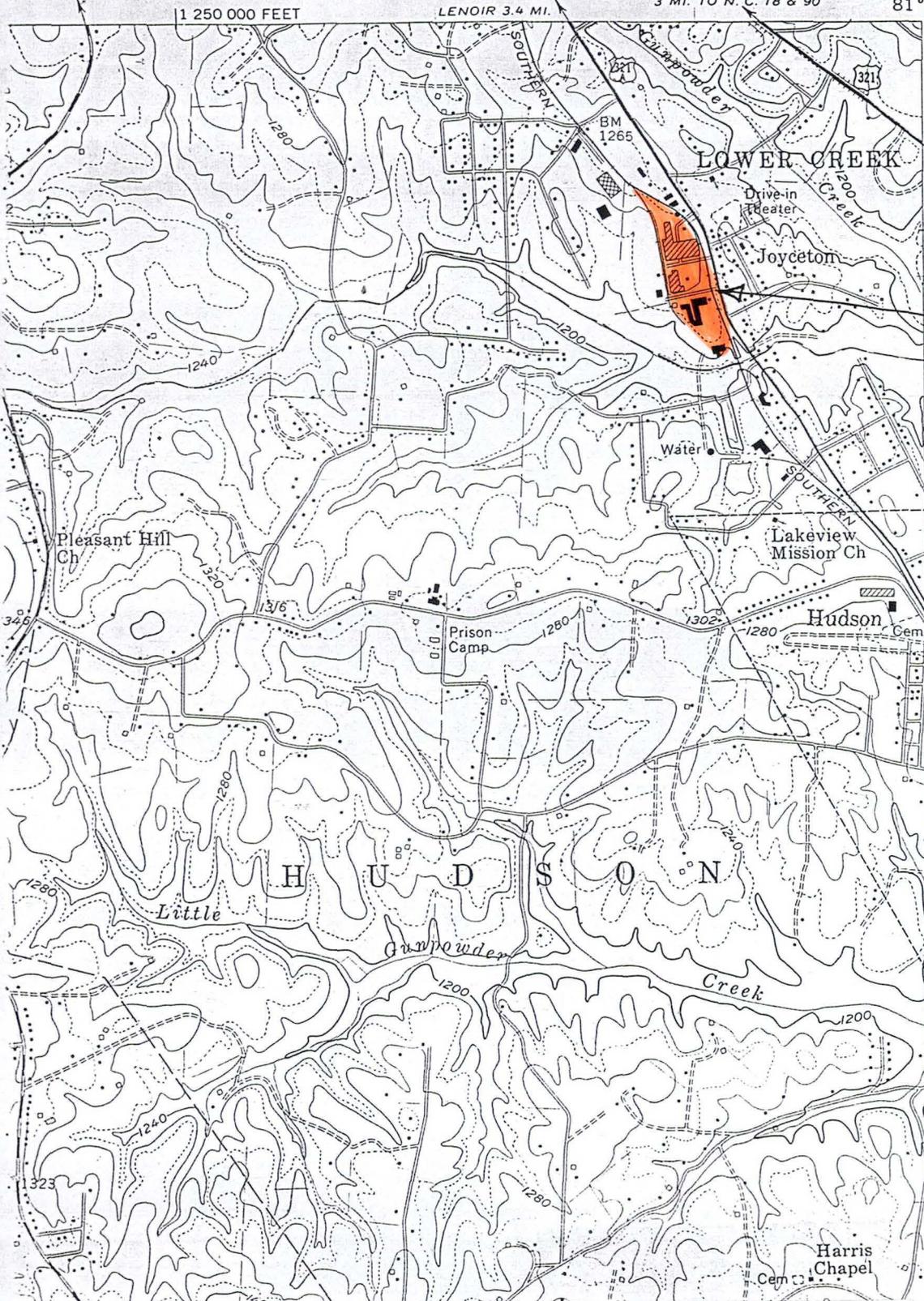
INVESTIGATOR: Hal Boyford DATE: 5/5/92

DREXEL QUADRANGLE
 NORTH CAROLINA
 7.5 MINUTE SERIES (TOPOGRAPHIC)

(HICKORY 1:125 000)

1.5 MI. TO N. C. 321A

BLUE RIDGE PKWY. 25 MI.
 3 MI. TO N. C. 18 & 90



81°30'
 35°52'30"

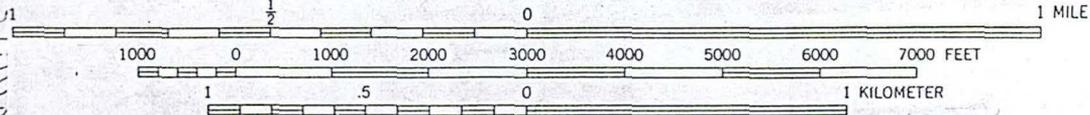
HICKORY 13 MI.
 GASTONIA 57 MI.

780 000
 FEET

SINGER FURNITURE
 DIV 5, 6, 7, CWH
 NCD 062 568 035
 (AS PER TELECON
 WITH RECEPTIONIST
 ON 31 MAR 92.)
 qcw

GRANITE FALLS 6.2 MI.
 HICKORY 14 MI.

SCALE 1:24 000



CONTOUR INTERVAL 40 FEET
 DOTTED LINES REPRESENT 20-FOOT CONTOURS
 DATUM IS MEAN SEA LEVEL

9 April 1984

TO: File

FROM: Lee Crosby

RE: USGS Map
Singer Company Furniture Division
2424 Norwood Street (Hwy 321 S.) Lenoir
NCD062568035

According to a 6 April 1984 telephone conversation with EPA 3012 Project Director Walton Jones, a U. S. Geological Survey map is not needed for the preliminary assessment file if the facility is included on the ERRIS list via HWDMS and there are no on-site spills or burials.

9 April 1984

TO: File
FROM: Lee Crosby
RE: Address Change
Singer Company
NCD062568035

Following a 6 April 1984 telephone conversation, EPA 3012 Project Director Wallie Jones will change the NCD062568035 site address from 720 South Boulevard, Lenoir to 2424 Norwood Street (Hwy 321 South), Lenoir.



Ronald H. Levine, M.D., M.P.H.
STATE HEALTH DIRECTOR

DIVISION OF HEALTH SERVICES
P.O. Box 2091
Raleigh, N.C. 27602-2091

March 28, 1984

Mr. Walton Jones
EPA 3012 Regional Project Officer
Air and Hazardous Materials Division
U. S. Environmental Protection Agency
345 Courtland Street, N.E.
Atlanta, Georgia 30365

Subject: Preliminary Assessment Report

Celanese Corporation
2400 Archdale Drive Charlotte, N. C. 28210 NCD093338116

Lenoir City Landfill
904 Virginia Street Lenoir, N. C. 28645 NCD980557888

Singer Company/Furniture Division
904 Virginia Street Lenoir, N. C. 28645 NCD000604322

Caldwell County Landfill
NC Highway 90 Lenoir, N. C. 28645 NCD980557870

Singer Company/Furniture Division
1409 West College Avenue Lenoir, N. C. 28645 NCD000604330

Singer Company/Furniture Division
2424 Norwood Street (Hwy 3215) Lenoir, N.C. NCD062568035
27330

Singer Company/Furniture Division
133 A Charlotte Avenue Sanford, N.C. 27330 NCD053490462

Singer Company/Furniture Division
Route 1, Gibson Avenue Bryson City, N.C. NCD098765506
28713

Singer Company/Furniture Division
State Road 1175 Chocowinity, N. C. 27817 NCD072012354

SCM Corporation/Glidden Coating and Resins
3926 Glenwood Drive Charlotte, N. C. 28208 NCD093338119

Everhart Lumber Company
Thurmond Road, State Road 1117 NCD003190584
New Bern, N. C. 28560

Mr. Walton Jones
March 28, 1964
Page 2

Dear Mr. Jones:

Enclosed please find the Preliminary Assessment reports for the subject sites.

Based on our review of available data, Celanese Corporation, the Lenoir City Landfill, the Caldwell County Landfill and the subject Singer Company/Furniture Division plants are not hazardous waste sites and should be placed on the inactive ERRIS List.

Celanese Corporation/Fibers Research Division in Charlotte notified due to on-site burial between 1959 and 1962 of 900 cubic feet of filter pads containing small amounts of acetone and methylene chloride. According to the Celanese Environmental and Safety Supervisor, the filters were used while developing a new process; they were not used after 1962. The burial site is now covered with grass and no other wastes have been buried on-site. No further action is recommended for the Celanese Corporation site on Archdale Drive in Charlotte due to the low quantities and volatility of the solvents and the passage of more than 20 years since the site was last used for burial.

The Lenoir City Landfill was included on the ERRIS List due to a Singer Company notification for lacquer spray residues and lacquer spray sludge. Waste analysis data shows that no hazardous materials were discarded in the landfill with the exception of filler scrappings. The filler scrappings are hazardous by characteristic due to ignitability. Prior to 1960 standard solid waste disposal consisted of open burning at the landfill, as well as covering and mixing the waste with soil and other materials. This quantity of waste would no longer be ignitable given the methods of disposal. According to the Lenoir City Manager's office, the landfill was closed 25 years ago and is covered by vegetation. No further action is recommended for the inactive Lenoir City Landfill on Virginia Street in Lenoir.

The Singer Company/Furniture Division on Virginia Street in Lenoir, N. C. notification shows lacquer spray residues and lacquer spray sludge were discarded on property adjacent to (and purchased from) the Lenoir City Landfill. Waste characterization data for residues and sludges, as well as the filler scrappings reference for the Lenoir City Landfill in the preceding paragraph is applicable. Singer Company on site burial of ignitable materials was discontinued in 1976. No further action is recommended.

The Caldwell County Landfill is included on the ERRIS List as a result of a Singer Company/Furniture Division notification for lacquer spray residue and lacquer spray sludge. Waste characterization for residue, sludge and filler scrappings outlined in a preceding paragraph for the Lenoir City Landfill is applicable. The landfill was closed in 1976. No further action is recommended for the Caldwell County Landfill on N. C. Highway 90 in Lenoir.

Five Singer Company/Furniture Division facilities were included on the ERRIS List via the Hazardous Waste Data Management System (HWDMS). Singer Company locations are listed above. According to the Singer Company Safety Engineering Manager, there has never been on-site burial or spills at any of the facilities. No further action is recommended for each of the Singer Company/Furniture Division Plants.

The SCM Corporation/Glidden Coatings and Resins Division notification involves a 1976 leak of 50,000 gallons of vinyl acetate after a spill of hydrochloric acid corroded an underground connecting pipe. Celanese Corporation owned the facility in 1976, which was purchased by SCM Corporation in 1977.

Celanese developed and implemented a remedial scheme, eventhough the property had been transferred to SCM. SCM contends that Celanese is responsible for remedial action and monitoring. The remedial plan has been plagued with problems, primarily related to the pumping well.

A 16 September 1980 status report indicates that water samples from the pump-out well and plant perimeter groundwater monitoring wells will be analyzed for organic contaminants and that results will be forwarded to N. C. Division of Environmental Management. DEM files contain monitoring data from July 1980 through May 1982 for biological and chemical oxygen demand, pH and heavy metals. Although the site has not been routinely monitored for priority pollutants, a 5 May 1980 Envirosience screening report shows the presence of benzene, toluene, 1,1-dichlorethane, 1,2-trans-dichloroethylene, methylene chloride and vinyl chloride. Whether the water sample was taken from the pumping well or monitoring well is unknown.

According to an SCM official in Ohio, SCM Corporation is preparing to file a complaint against Celanese Corporation. Due to impending litigation, SCM will not release information on the site to the N. C. Solid and Hazardous Waste Management Branch, or to the N. C. Division of Environmental Management.

Mr. Walton Jones
March 28, 1984
Page 4

The extent and source of soil and groundwater contamination is unknown. Laboratory analysis indicates there are sources of contamination in addition to the 1976 vinyl acetate leak. Notwithstanding the agreement with the N.C. Division of Environmental Management, a workable remedial action plan and monitoring program has not been implemented. A medium priority assessment is recommended for the SCM Corporation/Glidden Coatings and Resins.

Everhart Lumber Company was a wood treatment facility which ceased operation at the death of the owner in 1979. On 18 March 1983 vandals opened the valve to the tank and a mixture of pentachlorophenol and fuel oil flowed into a ditch leading to a drainage ditch along Hwy 70. Everhart family members pumped the mixture back into the tank during the three weeks following the spill.

On 14 March 1984 an EPA emergency response team from Edison, N. J. took sixteen (16) soil samples. Recommendations for remedial action and monitoring will be developed by EPA on scene coordinator Sue Fields based on laboratory analysis. A low priority assessment is recommended.

On 27 March 1984 the Department of Human Resources the Solid and Hazardous Waste Management Branch Chief O. W. Strickland, Senior Hazardous Waste Environmental Engineer William Meyer and 3012 Personnel reviewed each of the subject sites along with Natural Resources and Community Development Department representatives from the Water and Air Quality and Groundwater Sections. Each of the subject site recommendations was approved by the committee.

If you have any questions, please contact me.

Sincerely,



Lee Crosby, Chemist

Solid & Hazardous Waste Management Branch
Environmental Health Section

LC:jj
cc: O. W. Strickland
Bill Meyer
Jay Sauber
Arthur Mouberry
Dennis Ramsey
Bill McClelland

Attachments



**POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 1 - SITE INFORMATION AND ASSESSMENT**

I. IDENTIFICATION	
01 STATE	02 SITE NUMBER
NC	NCD062568035

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site) (plants 5, 6, 7 and CWH) Singer Company, Furniture Division		02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER 2424 Norwood Street (Hwy 321 South)			
03 CITY Lenoir	04 STATE NC	05 ZIP CODE 28645	06 COUNTY Caldwell	07 COUNTY CODE 014	08 CONG DIST 10
09 COORDINATES LATITUDE 3 5 5 2 0 0 . 0		LONGITUDE 0 8 1 3 0 0 3 0			

10 DIRECTIONS TO SITE (Starting from nearest public road)
Travel North on US 321 (Norwood Street) towards Lenoir. The Singer Plants are located 1/4 mile north of the Lenoir City Limits and Gunpowder Creek on the left.

III. RESPONSIBLE PARTIES

01 OWNER (If known) Singer Company		02 STREET (Business, mailing, residential) Post Office Box 1588			
03 CITY Lenoir	04 STATE NC	05 ZIP CODE 28645	06 TELEPHONE NUMBER (704) 728-6741		
07 OPERATOR (If known and different from owner)		08 STREET (Business, mailing, residential)			
09 CITY		10 STATE	11 ZIP CODE	12 TELEPHONE NUMBER	

13 TYPE OF OWNERSHIP (Check one)
 A. PRIVATE B. FEDERAL: _____ (Agency name) C. STATE D. COUNTY E. MUNICIPAL
 F. OTHER: _____ (Specify) G. UNKNOWN

14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply)
 A. RCRA 3001 DATE RECEIVED: ____/____/____ B. UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED: ____/____/____ C. NONE

IV. CHARACTERIZATION OF POTENTIAL HAZARD

01 ON SITE INSPECTION <input type="checkbox"/> YES DATE ____/____/____ <input checked="" type="checkbox"/> NO		BY (Check all that apply) <input type="checkbox"/> A. EPA <input type="checkbox"/> B. EPA CONTRACTOR <input type="checkbox"/> C. STATE <input type="checkbox"/> D. OTHER CONTRACTOR <input type="checkbox"/> E. LOCAL HEALTH OFFICIAL <input type="checkbox"/> F. OTHER: _____ (Specify) CONTRACTOR NAME(S): _____			
02 SITE STATUS (Check one) <input checked="" type="checkbox"/> A. ACTIVE <input type="checkbox"/> B. INACTIVE <input type="checkbox"/> C. UNKNOWN RCRA Site		03 YEARS OF OPERATION BEGINNING YEAR _____ ENDING YEAR _____ <input checked="" type="checkbox"/> UNKNOWN			

04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED
 The Singer Company is included on ERRIS via HWDMS which contains information on generators, transporters and TDS facilities. The Part A permit application does not report any inactive TDS sites at the facility and a 27 February 1984 letter from the Singer Safety Engineer states that there is no landfill on the property. Available EPA records, DHS

05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION
 files and company records do not indicate the presence of a hazardous waste site on Singer property or a potential hazard to the environment or population.

V. PRIORITY ASSESSMENT

01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents)
 A. HIGH (inspection required promptly) B. MEDIUM (inspection required) C. LOW (inspect on time available basis) D. NONE (No further action needed, complete current disposition form)

VI. INFORMATION AVAILABLE FROM

01 CONTACT Dick McDonald		02 OF (Agency/Organization) Singer Company		03 TELEPHONE NUMBER 704 728-6741	
04 PERSON RESPONSIBLE FOR ASSESSMENT O. W. Strickland		05 AGENCY DHS	06 ORGANIZATION Solid & Haz. Waste Mgt. Br.	07 TELEPHONE NUMBER 919 733-2178	08 DATE 3 14 84 MONTH DAY YEAR

SINGER
FURNITURE

P. O. Box 1588
Lenoir, North Carolina 28645

February 27, 1984

Ms. Lee Crosby, Chemist
Department of Human Resources
Solid & Hazardous Waste Management Branch
Environmental Health Section
P. O. Box 2091
Raleigh, N.C. 27602-2091



Dear Ms. Crosby:

Subject: The Singer Company
Furniture Division
-Bryson City Plant, NCD098765506
-Plant No. 1, NCD000604330
-Plants 3, 4 & MH, NCD000604322
-Plants 5, 6, 7 & CWH, NCD062568035
-Washington Plant, NCD072012354
-Sanford Plant, NCD053490462
CERCLA NOTIFICATION

This information is in response to your recent request regarding the Cercla Notification of the subject locations.

Of the six locations referenced, may I say, only one, i.e., Plants 3, 4, and M.H., NCD000604322, has a former landfill site on the property. Each of the other five (5) locations do not have a landfill site on the property, but sent waste finishing material to county and/or city landfills. The directions I will be giving you in Item No. 5, following, will be on the Plant No. 3 property only.

Also, it is important to note that the Plant No. 3 site began as a Caldwell County and Lenoir City landfill in the 1950's. The property was purchased by Kent Coffey Furniture Company and Plant No. 3 was constructed in the early 1960's. The landfill then continued to serve only Kent Coffey. The property was transferred to Magnavox in the late 1960's and then to Singer in 1973. The plant on the property continued to use the landfill on the same property through the 1960's and 1970's. Furniture finishing

Page #2
Ms. Lee Crosby
February 27, 1984

materials were no longer put into the landfill after 1976, although the landfill continued to be used for the various furniture trash such as furniture pieces, cartons, sawdust and the like. All use of the fill was discontinued in 1981.

Following is the information requested in your letter.

1. Safety Data Sheets -

Enclosed you will find a detailed waste characterization study done for our Part B permitting of the Plant No. 3 location. It will provide information on all of the finishing material used at the six referenced locations, since all plants use basically identical finishing material.

2. Quantities -

This can only be estimated based upon what we dispose of now in an average year, further adjusted downward due to lesser production needs, more conservative use of finishing materials prior to 1976, and lack of use of a high liquid waste producing print line prior to 1966. The figure given is a total solid and liquid waste in tons over the producing life of the facility up until 1976, at which time landfilling of hazardous wastes was discontinued.

Plant	Total Hazardous Wastes in Tons
Bryson City	465
Lenoir No. 1	1,113
Lenoir Nos. 3, 4 & MH	280
Lenoir Nos. 5, 6, 7 & CWH	563
Sanford Plant	795
Washington Plant (Chocowinity)	465

3. Physical Condition -

The hazardous waste tonnage in No. 2 above took the form of solid finish material scrappings (from spray booth walls and floors), which would be in a dry dust and chip form, and liquid solvent wastes which are from clean-up operations

Page #3
Ms. Lee Crosby
February 27, 1984

with nonhalogenated hydrocarbons and in a 5% water, 20% solid and 75% solvent mixture. Solid and liquid wastes are collected separately.

4. Disposal Procedures -

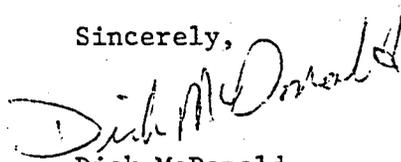
From discussions with persons involved with this type disposal during the period prior to 1976, the waste (both solid and liquid) was placed into 55 gallon drums and 5 gallon cans for transporting to the landfills. At the landfill it was either dumped out of the drums or cans onto the ground, or placed into the landfill in the drum or can if the container condition was poor. Some solid waste was also placed into cardboard containers and landfilled with the box.

5. Site Location -

The site on which is located the former landfill area is Plant No. 3 (NCD000604322). This site is located at 904 Virginia Street, S.W., Lenoir. Enclosed is a copy of the Lenoir City map, showing site location.

This information should supply you with all you need. If, however, you need additional information, please contact me.

Sincerely,



Dick McDonald
Safety Engineering Manager

bs

Enclosures



Levine

Ronald H. Levine, M.D., M.P.H.
STATE HEALTH DIRECTOR

DIVISION OF HEALTH SERVICES
P.O. Box 2091
Raleigh, N.C. 27602-2091

February 7, 1984

Mr. Richard McDonald
Engineer
Singer Furniture Company
Post Office Box 1588
Lenoir, North Carolina 28645

RE: Singer Furniture Company

NCD098765506	Bryson City
NCD000604330	Lenoir
NCD000604322	Lenoir
NCD053490462	Sanford
NCD072012354	Chocowinity
NCD062568035	Lenoir

Dear Mr. McDonald:

This is to confirm our 6 February 1984 telephone conversation when we discussed Singer Furniture Company's 103(c) CERCLA notification to EPA. As requested I have enclosed ERRIS listings for Singer Furniture Company.

In summary I hope to receive from you pertinent safety data sheets and information regarding the quantities of materials discarded at each site, as well as the physical condition of the material and the procedures followed when the materials were discarded. I would also appreciate your including directions to each referenced Singer site.

This information will facilitate the processing of your company's file through the 3012 Program. If you have any questions, please contact me. I look forward to working with you on this project.

Sincerely,

Lee Crosby

Lee Crosby, Chemist

Solid & Hazardous Waste Management Branch
Environmental Health Section

LC:jj



SINGER
FURNITURE

P. O. Box 1588
Lenoir, North Carolina 28645

November 8, 1983

Mr. Keith Lawson
Solid and Hazardous Waste Management Branch
Division of Health Services
P. O. Box 2091
Raleigh, North Carolina 27602

Subject: The Singer Company
Furniture Division
Plant Nos. 5,6,7,CWH and 50
Lenoir, N. C.
NCD062568035

Dear Mr. Lawson:

This facility is not operating as a hazardous waste treatment, storage and disposal (TSD) facility. Therefore, we do not wish to submit a Part B application.

We understand that we may continue operation as a generator of hazardous waste at the subject facility.

Sincerely,

Gerald L. Sykes
Vice President/Controller

GLS/ew

cc: Dana Crump
R. J. McDonald
Mickey O'Keefe

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

DIVISION OF HEALTH SERVICES
P.O. Box 2091
Raleigh, N.C. 27602-2091

Keith

Date: March 18, 1982

Mr. C. Michael Matthews
Singer Furniture Company
P.O. Box 1588
Lenoir, NC 28645

Re: Facility ID NO. NCD062568035

Dear Mr. Matthews:

Based on information supplied by you we have processed and accepted at the State level your request for the facility identified with the above ID number to receive the indicated change in classification under RCRA:

Add as

Delete as

generator

transporter

treater

storer

disposer

small generator

We are advising EPA of the change in your status. Please notify us if there is any further change in your operations which would again affect your status. Your EPA ID NO. is is not being cancelled.

Cordially,

O. W. Strickland

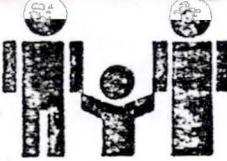
O. W. Strickland, Head
Solid & Hazardous Waste Management Branch
Environmental Health Section

OWS

cc: John Herrmann
EPA Region IV
Emil Breckling

This is intended to show your complete status as we now understand your wishes.





NCD 062568035

Ronald H. Levine, M.D., M.P.H.
STATE HEALTH DIRECTORDIVISION OF HEALTH SERVICES
P.O. Box 2091
Raleigh, N.C. 27602-2091

February 25, 1982

Mr. Mike Matthews
Singer Plan 5,6,7,& CWH
P.O. Box 1588
Lenoir, NC 28645

Dear Mr. Matthews:

On January 28, 1982 Mr. Robert Apple of the Solid and Hazardous Waste Management Branch conducted a RCRA inspection of your facility. The following violations were noted:

1. 265.16(d)(1)(2)(3) Personnel Training. Records needed documenting job titles, description of training and records of training for hazardous waste personnel.
2. 265.13 Waste Analysis Plan. Waste analysis plan needed to note test methods, sampling methods and frequency of review or repeat of waste analysis.
3. 265.14(c) Security. Danger signs needed at site entrance.
4. 265.15(a) Inspection. Company needed to provide inspections to note malfunction, operator error and discharges.
5. 265.37(a)(Q)(3) Arrangements with Authorities. Company needed to attempt to establish arrangements with those emergency response organizations requested to respond in the event of an emergency.
6. 265.52 Contingency Plan. Company needed to provide a contingency plan.
7. 265.52(c)(d)(e)(f) Contingency Plan. Contingency plan must include local agreements, identify emergency coordinators, provide an emergency equipment list and evacuation plan.
8. 265.53 Contingency Plan. Copies of the completed plan must be maintained at the plant and given to emergency response organizations.
9. 265.55 Contingency Plan. The emergency coordinator must be identified and qualifications insured in contingency plan.
10. 265.56 Contingency Plan. Emergency response procedures must be provided in the contingency plan.
11. 262.40 Recordkeeping. Hazardous waste test results must be maintained at the facility.
12. 265.73 Operating Record. Company needed to provide and maintain an operating record.
13. 265.110 - 265.112 Closure Plan. Company needed to provide a closure plan.



Mr. Mike Matthews
Page 2
February 25, 1982

A compliance date of May 22, 1982 was established.

If you have any questions concerning this matter, please contact
Mr. William Paige, Environmental Chemist at (919) 733-2178.

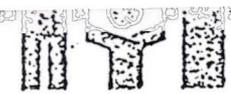
Sincerely,



U. W. Strickland, Head
Solid & Hazardous Waste Management Branch
Environmental Health Section

OWS:nlc

cc: Mr. Robert Apple



DIVISION OF HEALTH SERVICES
P.O. Box 2091
Raleigh, N.C. 27602-2091

Date: February 23, 1982

Re: Facility ID NO. NCD062568035

Dear Mr. Matthews:

Based on information supplied by you we have processed and accepted at the State level your request for the facility identified with the above ID number to receive the indicated change in classification under RCRA:

<u>Add as</u>	<u>Delete as</u>	
<input type="checkbox"/>	<input type="checkbox"/>	generator
<input checked="" type="checkbox"/>	<input type="checkbox"/>	transporter
<input type="checkbox"/>	<input type="checkbox"/>	treater
<input type="checkbox"/>	<input type="checkbox"/>	storer
<input type="checkbox"/>	<input type="checkbox"/>	disposer
<input type="checkbox"/>	<input type="checkbox"/>	small generator

We are advising EPA of the change in your status. Please notify us if there is any further change in your operations which would again affect your status. Your EPA ID NO. is is not being cancelled.

Cordially,
O. W. Strickland

O. W. Strickland, Head
Solid & Hazardous Waste Management Branch
Environmental Health Section

OWS

cc: John Herrmann
EPA Region IV
Emil Breckling

✓ file





Ronald H. Levine, M.D., M.P.H.
STATE HEALTH DIRECTOR

DIVISION OF HEALTH SERVICES
WESTERN REGIONAL OFFICE
Building 3
Black Mountain, N.C. 28711
(704) 669-3349

February 18, 1982

TO: O. W. Strickland, Head
Solid & Hazardous Waste Mgt.

FROM: Bob Apple, District Sanitarian
Western Regional Office

RE: Interim Status Inspection of: Singer Plant 5, 6, 7, & CWH
P. O. Box 1588
Lenoir, NC 28645
EPA ID #NCD062568035
Contact: Mike Matthews, Engineer
Dick McDonald, Engineer

The following violations of ISS for Singer Plant 5, 6, 7 & CWH were identified during an inspection completed on January 28, 1982:

1. 265.16(d)(1)(2)(3) Personnel Training. Records needed documenting job titles, description of training and records of training for hazardous waste personnel.
2. 265.13 Waste Analysis Plan. Waste analysis plan needed to note test methods, sampling methods and frequency of review or repeat of waste analysis.
3. 265.14(c) Security. Danger signs needed at site entrance.
4. 265.15(a) Inspections. Company needed to provide inspections to note malfunction, operator error and discharges.
5. 265.37(a)(Q)(3) Arrangements with Authorities. Company needed to attempt to establish arrangements with those emergency response organizations requested to respond in the event of an emergency.
6. 265.52 Contingency Plan. Company needed to provide a contingency plan.
7. 265.52(c)(d)(e)(f) Contingency Plan. Contingency plan must include local agreements, identify emergency coordinators, provide an emergency equipment list and evacuation plan.
8. 265.53 Contingency Plan. Copies of the completed plan must be maintained at the plant and given to emergency response organizations.

5/22/82 (over) →

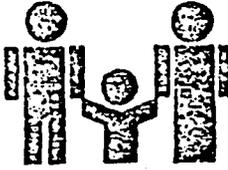


9. 265.55 Contingency Plan. The emergency coordinator must be identified and qualifications insured in contingency plan.
10. 265.56 Contingency Plan. Emergency response procedures must be provided in the contingency plan.
11. 262.40 Recordkeeping. Hazardous waste test results must be maintained at the facility.
12. 265.73 Operating Record. Company needed to provide and maintain an operating record.
13. 265.110 - 265.112 Closure Plan. Company needed to provide a closure plan.

The following compliance schedule was agreed upon by Singer Plant 5, 6, 7, & CWH and Bob Apple:

All violations to be corrected by May 22, 1982

RMA/dgh



Ronald H. Levine, M.D., M.P.H.
STATE HEALTH DIRECTOR

DIVISION OF HEALTH SERVICES
P.O. Box 2091
Raleigh, N.C. 27602-2091

February 16, 1982

SINGER Furniture
C. Michael Matthews
Mechanical Engineering Manager
P. O. Box 1588
Lenoir, NC 28645

Gentlemen:

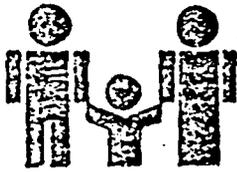
We have processed and accepted at the state level revisions requested to your notification application. A copy has been sent to EPA.

Cordially yours,

O. W. Strickland, Head
Solid and Hazardous Waste Management Branch

cc: / file





Ronald H. Levine, M.D., M.P.H.
STATE HEALTH DIRECTOR

DIVISION OF HEALTH SERVICES
P.O. Box 2091
Raleigh, N.C. 27602-2091

February 16, 1982

EPA
RCRA Activities
345 Courtland Street, NE
Atlanta, GA 30308

Gentlemen:

Attached is notification application revision and/or notification applications revisions. Please process them.

Cordially,

O. W. Strickland, Head
Solid & Hazardous Waste
Management Branch
Environmental Health Section

OWS/EB/yr

Attachment(s)

The Singer Co. Furniture Div. 567
cc: ✓file



NCD 062568035



P. O. Box 1588
Lenoir, North Carolina 28645

February 5, 1982

Mr. O. W. Strickland
Solid and Hazardous Waste
Management Branch
P. O. Box 2091
Raleigh, North Carolina 27602

Re: Transporter Permit, Division II

Dear Mr. Strickland:

Attached is an application for a transporter permit for Singer Division II complex (Plants 5,6,7). This permit is necessary to conveniently transport waste to the Singer incinerator located at Plant 3.

If further information is necessary, please call.

Sincerely,

A handwritten signature in cursive script that reads "C. Michael Matthews".

C. Michael Matthews
Mechanical Engineering Manager

CMM/ew
Enclosure

Certified Mail
Return Receipt Requested

No. 0121203

RCRA INSPECTION REPORT

Facility Information

Singer Plant 5, 6, 7, & CWH
P. O. Box 1588
Lenoir, NC 28645
(Caldwell County)
EPA ID #NCD062568035

Facility Contact

Mike Matthews, Engineer
Dick McDonald, Engineer

Survey Participants

Bob Apple, District Sanitarian

Date of Inspection

Original date November 19, 1981 - completed January 28, 1982

Applicable Regulations

40 CFR Parts 262 and 265, FR May 19, 1980 & amendments

Purpose of Survey

RCRA compliance inspection was conducted at the Singer Plant 5, 6, 7, & CWH by the N. C. Solid & Hazardous Waste Mgt. Branch.

The inspection was comprehensive in nature including interviews, record review and site survey. Requirements covered included generator standards, general facility standards and storage requirements.

Facility Description

This plant is located on Hwy. 321A, South of Lenoir, NC on approximately 25 acres. The plant manufactures dining room furniture. The plant is a generator and storer of hazardous waste. Waste generated includes flammable solids and recyclable non-halogenated furniture finishing solvents. The solids are incinerated at the Singer incinerator (located at Singer plant 3,4, & MH) and the liquids are recovered by Carolina Solvents, Inc. No apparent environmental problems were noted during this inspection.

Prior to RCRA, Singer Plant 5, 6, 7, & CWH had only air quality permits. It should be noted that this company is actively exploring the installation of either a heat recovery incinerator or boiler adapter to capture the BTU value of the flammable solids.

Documentation of Site Deficiencies

- 1) 265.16(d)(1)(2)(3) Personnel Training
- 2) 265.13 Waste Analysis Plan
- 3) 265.14(c) Security
- 4) 265.15(a) Inspections
- 5) 265.37(a)(Q)(3) Arrangements with Authorities
- 6) 265.52(c)(d)(e)(f) Contingency Plan
- 7) 265.55, 265.56 Contingency Plan
- 8) 262.40 Recordkeeping
- 9) 265.73 Operating Record
- 10) 265.110-265.112 Closure Plan

Compliance Schedule

A compliance date of May 22, 1982 was agreed upon by Singer Plant 5, 6, 7, & CWH and Bob Apple.

INSPECTION FORM FOR INTERIM STATUS STANDARDS FOR
OWNER/OPERATOR OF HAZARDOUS WASTE MANAGEMENT
FACILITIES

Singer Plant 5, 6, 7 & CWH : NCD062568035 Caldwell
 Name of Site EPA I.D. County
 Location Fred Anderson, Dick McDonald Signature of Facility Contact
 Date 11/19/81 (completed ~~for~~ for 28, 82) Signature of Inspector(s)

INSTRUCTIONS: Place a check to indicate Compliance (C), NonCompliance (NC) or Not Applicable (NA). Cite specific violation by Section No.

	C	NC	NA	Violation(s)
1. GENERAL	—	✓	—	265.16(d)(1)(2)(3)
2. GENERAL FACILITY STANDARDS	—	—	—	265.13, 265.14(c), 265.15(a) 265.16(2)(1)(3)(3)
3. PREPAREDNESS AND PREVENTION	—	✓	—	265.37(a)(1)(3)
4. CONTINGENCY PLAN AND EMERGENCY PROCEDURES	—	✓	—	265.83, 265.55, 265.52, 265.52(d)
5. MANIFEST SYSTEM, RECORDKEEPING, AND REPORTING	—	—	—	265.56, 265.52(b) 262.40, 265.73
6. GROUND-WATER MONITORING	—	—	✓	—
7. CLOSURE AND POST-CLOSURE	—	—	✓	265.113(a)(b), 265.110 - 265.112
8. FINANCIAL REQUIREMENTS	—	—	✓	—
9. USE AND MANAGEMENT OF CONTAINERS	—	—	✓	—
10. TANKS	—	—	✓	—
11. SURFACE IMPOUNDMENTS	—	—	✓	—
12. WASTE PILES	—	—	✓	—
13. LAND TREATMENT	—	—	✓	—
14. LANDFILLS	—	—	✓	—
15. INCINERATORS	—	—	✓	—
16. THERMAL TREATMENT	—	—	✓	—
17. CHEMICAL, PHYSICAL, AND BIOLOGICAL TREATMENT	—	—	✓	—
18. UNDERGROUND INJECTION	—	—	✓	—

TSD (Singer tentatively plans to de-classify) NO
 Generators, TSD (compliance date May 22, 1982) ()
 Imminent hazard ()

2

INSTRUCTIONS FOR FORM USAGE

The below instructions are applicable to Interim Status Inspection
Forms Numbers _____

- Purpose: To provide information on the compliance status of facilities handling hazardous waste. A written summary will be developed from this data and forwarded to the facility.
- Preparation: A field inspector will prepare one copy of the appropriate inspection form(s) on each facility to be inspected. Information regarding county, name, address, and E.P.A. I.D. number may be completed prior to the site visit.
- Distribution: The field inspector should write a written summary and forward it to the below address within one week after the site visit.
- Mailing: Mr. O. W. Strickland, Head
Solid & Hazardous Waste Management Branch
Environmental Health Section
Department of Human Resources
P.O. Box 2091
Raleigh, North Carolina 27602
- Retention: It is recommended that the inspection report be retained as a part of a facilities permanent record.

Additional forms may be ordered from: Solid and Hazardous Waste Management Branch
Environmental Health Section
Department of Human Resources
P.O. Box 2091
Raleigh, North Carolina 27602

5	6	7	8	9	10	11	12	13	14	15
W	C	D	0	7	2	5	6	8	0	3
1	2	3	4	5	6	7	8	9	10	11

IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
23 - 24	23 - 24	23 - 24	23 - 24	23 - 24	23 - 24
7	8	9	10	11	12
23 - 24	23 - 24	23 - 24	23 - 24	23 - 24	23 - 24

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
23 - 24	23 - 24	23 - 24	23 - 24	23 - 24	23 - 24
19	20	21	22	23	24
23 - 24	23 - 24	23 - 24	23 - 24	23 - 24	23 - 24
25	26	27	28	29	30
23 - 24	23 - 24	23 - 24	23 - 24	23 - 24	23 - 24

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
23 - 24	23 - 24	23 - 24	23 - 24	23 - 24	23 - 24
37	38	39	40	41	42
23 - 24	23 - 24	23 - 24	23 - 24	23 - 24	23 - 24
43	44	45	46	47	48
23 - 24	23 - 24	23 - 24	23 - 24	23 - 24	23 - 24

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54
23 - 24	23 - 24	23 - 24	23 - 24	23 - 24	23 - 24

E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

1. IGNITABLE (D001)
 2. CORROSIVE (D002)
 3. REACTIVE (D003)
 4. TOXIC (D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE <i>Dana W. Crump</i>	NAME & OFFICIAL TITLE (type or print) Dana W. Crump Director of Facilities Engineering	DATE SIGNED 2-4-82
-----------------------------------	--	-----------------------

DETACH A

DETACH A

IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1		2		3		4		5		6
23 - 24		23 - 24		23 - 24		23 - 24		23 - 24		23 - 24
7		8		9		10		11		12
23 - 24		23 - 24		23 - 24		23 - 24		23 - 24		23 - 24

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13		14		15		16		17		18
23 - 24		23 - 24		23 - 24		23 - 24		23 - 24		23 - 24
19		20		21		22		23		24
23 - 24		23 - 24		23 - 24		23 - 24		23 - 24		23 - 24
25		26		27		28		29		30
23 - 24		23 - 24		23 - 24		23 - 24		23 - 24		23 - 24

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31		32		33		34		35		36
23 - 24		23 - 24		23 - 24		23 - 24		23 - 24		23 - 24
37		38		39		40		41		42
23 - 24		23 - 24		23 - 24		23 - 24		23 - 24		23 - 24
43		44		45		46		47		48
23 - 24		23 - 24		23 - 24		23 - 24		23 - 24		23 - 24

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49		50		51		52		53		54
23 - 24		23 - 24		23 - 24		23 - 24		23 - 24		23 - 24

E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

1. IGNITABLE (D001)
 2. CORROSIVE (D002)
 3. REACTIVE (D003)
 4. TOXIC (D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE 	NAME & OFFICIAL TITLE (type or print) Dana W. Crump Director of Facilities Engineering	DATE SIGNED 2-4-82
---------------	--	-----------------------

DETACH A

DETACH A

 ENVIRONMENTAL PROTECTION AGENCY GENERAL INFORMATION Consolidated Permits Program (Read the "General Instructions" before starting.)		I. EPA I.D. NUMBER F N C D 0 6 2 5 6 8 0 3 5	
II. POLLUTANT CHARACTERISTICS INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column. If the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also Section D of the instructions for definitions of bold-faced terms.		GENERAL INSTRUCTIONS If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B, which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.	

SPECIFIC QUESTIONS	MARK 'X'			SPECIFIC QUESTIONS	MARK 'X'		
	YES	NO	FORM ATTACHED		YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		X		D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X		YES	F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY

1. THE SINGER CO. FURNITURE DIV. 567 & CWH

IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title): GREENE, JACK, DIVISION MANAGER

B. PHONE (area code & no.): 704 728 6741

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX: P O BOX 1588

B. CITY OR TOWN: LENOIR

C. STATE: NC

D. ZIP CODE: 28645

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER: 740 SOUTH BOULEVARD

B. COUNTY NAME: CALDWELL

C. CITY OR TOWN: LENOIR

D. STATE: NC

E. ZIP CODE: 28645

F. COUNTY CODE (if known):

VII. SIC CODES (4-digit, in order of priority)

A. FIRST				B. SECOND			
C	T	I	D	C	T	I	D
7	2	5	1	7			
(specify) Wooden Furniture (Case Goods)				(specify)			
C. THIRD				D. FOURTH			
C	T	I	D	C	T	I	D
7				7			
(specify)				(specify)			

VIII. OPERATOR INFORMATION:

A. NAME: **THE SINGER COMPANY**

B. Is the name listed in Item VIII-A also the owner? YES NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box. If "Other" specify):
 F - FEDERAL M - PUBLIC (other than federal or state)
 S - STATE O - OTHER (specify) P - PRIVATE
 P (specify)

D. PHONE (area code & no.):
 A 2 0 3 3 5 6 4 2 0 0

E. STREET OR P.O. BOX:
 1 0 S T A M F O R D F O R U M

F. CITY OR TOWN: **S T A M F O R D**

G. STATE: **C T**

H. ZIP CODE: **0 6 9 0 4**

IX. INDIAN LAND: Is the facility located on Indian lands? YES NO

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water):
 C T I D
 9 N

B. PSD (Air Emissions from Proposed Sources):
 C T I D
 9 P

C. UIC (Underground Injection of Fluids):
 C T I D
 9 U

D. RCRA (Hazardous Wastes):
 C T I D
 9 R

E. OTHER (specify):

XI. MAP

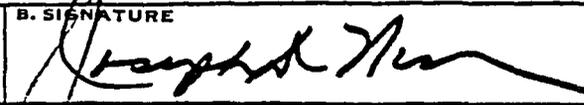
Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

Manufacturer of Furniture case goods, (dining room, bedroom and living room) including rough end, machining, sanding, assembly finishing and warehousing.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print) Don Wise - Vice President of Mfg.	B. SIGNATURE 	C. DATE SIGNED 11/12/80
---	--	----------------------------

FORM 3 RCRA **EPA** **ENVIRONMENTAL PROTECTION AGENCY**
HAZARDOUS WASTE PERMIT APPLICATION
Consolidated Permits Program
(This information is required under Section 3005 of RCRA.)

I. EPA I.D. NUMBER
F N C D O 6 2 5 6 8 Q 3 5

FOR OFFICIAL USE ONLY
APPLICATION APPROVED: []
DATE RECEIVED (yr., mo., & day): [] [] []

COMMENTS

II. FIRST OR REVISED APPLICATION
Place an "X" in the appropriate box in A or B below (mark one box only) to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION (place an "X" below and provide the appropriate date)
 1. EXISTING FACILITY (See instructions for definition of "existing" facility. Complete item below.)
 2. NEW FACILITY (Complete item below.)
 FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED (use the boxes to the left)
 YR. MO. DAY: [8] [0] [1] [1] [0] [1]
 YR. MO. DAY: [] [] [] [] [] []

B. REVISED APPLICATION (place an "X" below and complete Item I above)
 1. FACILITY HAS INTERIM STATUS
 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES - CODES AND DESIGN CAPACITIES

A. PROCESS CODE - Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process (including its design capacity) in the space provided on the form (Item III-C).

B. PROCESS DESIGN CAPACITY - For each code entered in column A enter the capacity of the process.
 1. AMOUNT - Enter the amount.
 2. UNIT OF MEASURE - For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PRO-CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY	PROCESS	PRO-CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:			Treatment:		
CONTAINER (barrel, drum, etc.)	S01	GALLONS OR LITERS	TANK	T01	GALLONS PER DAY OR LITERS PER DAY
TANK	S02	GALLONS OR LITERS	SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS	INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS	OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)	T04	GALLONS PER DAY OR LITERS PER DAY
Disposal:					
INJECTION WELL	D79	GALLONS OR LITERS			
LANDFILL	D80	ACRE-FEET (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER			
LAND APPLICATION	D81	ACRES OR HECTARES			
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY			
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS			

EXAMPLE FOR COMPLETING ITEM III (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

LINE NUMBER	A. PRO-CESS CODE (from list above)	B. PROCESS DESIGN CAPACITY		FOR OFFICIAL USE ONLY	LINE NUMBER	A. PRO-CESS CODE (from list above)	B. PROCESS DESIGN CAPACITY		FOR OFFICIAL USE ONLY
		1. AMOUNT (specify)	2. UNIT OF MEASURE (enter code)				1. AMOUNT	2. UNIT OF MEASURE (enter code)	
X-1	S 0 2	600	G		5				
X-2	T 0 3	20	E		6				
1	S 0 1	1375	G		7				
2					8				
3					9				
4					10				

III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODE FOR DESCRIBING OTHER PROCESSES (code "4"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	K
TONS	T	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES

1. PROCESS CODES:

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous waste: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

- Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
- In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
- Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARD WASTE NO (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES	
				1. PROCESS CODES (enter)	2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

EPA ID NO. (enter from page 1)

F	N	C	D	0	6	2	5	6	8	0	3	5	T/A	C
														6

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)	LONGITUDE (degrees, minutes, & seconds)
35 52 00	081 30 03

VIII. FACILITY OWNER

A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER		2. PHONE NO. (area code & no.)	
3. STREET OR P.O. BOX		4. CITY OR TOWN	5. ST.
		6. ZIP CODE	

IX. OWNER CERTIFICATION

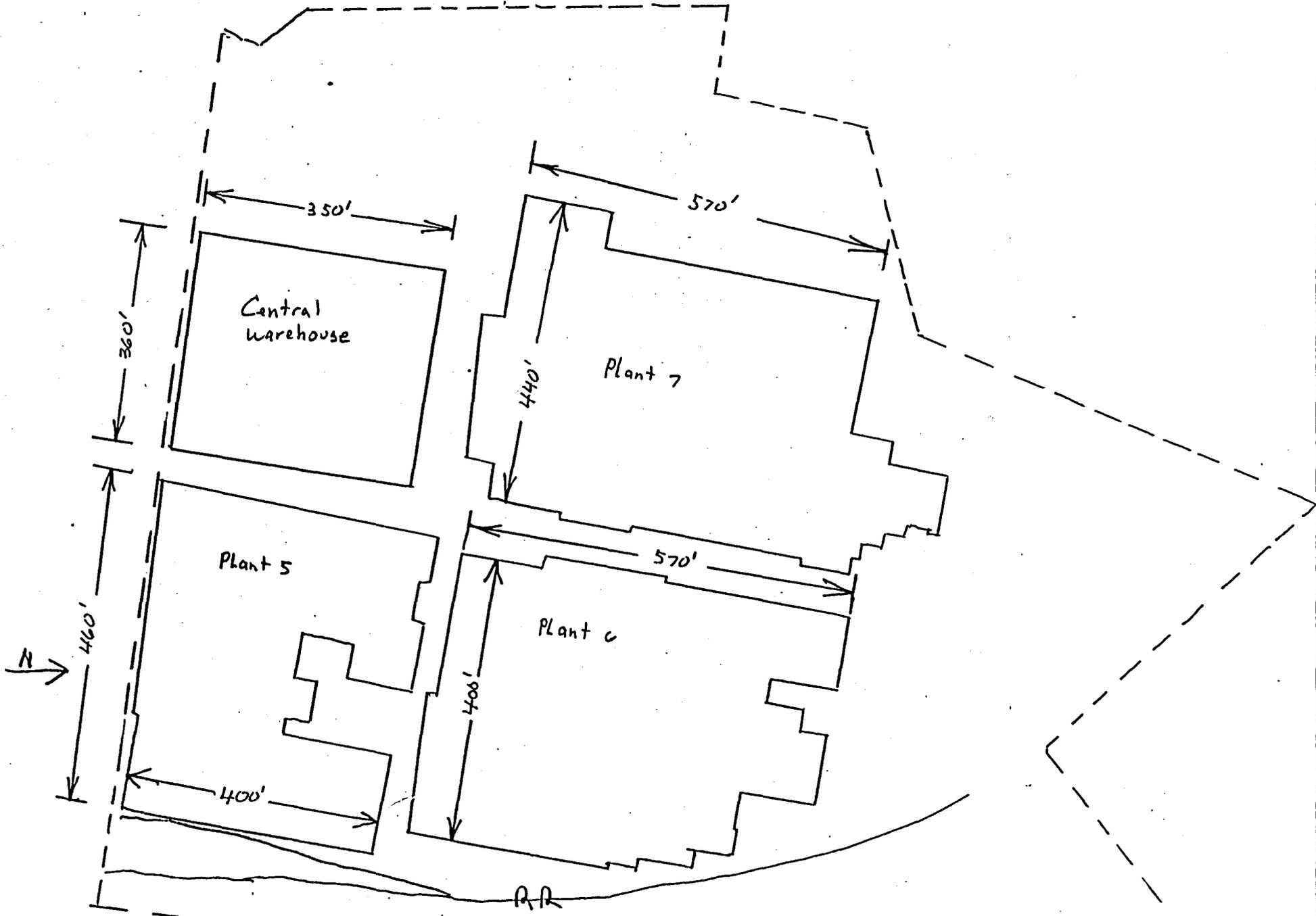
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type) Don Wise - Vice President of Mfg.	B. SIGNATURE 	C. DATE SIGNED 11/12/80
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X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
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SCALE: 1" = Approx. 200'

Total Property Area is 25.8 Acres