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Site Name (Subject): TOASTMASTER, INCORPORATED

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# CERCLA

## SITE INSPECTION REPORT

TOASTMASTER INCORPORATED  
LAURINBURG, NORTH CAROLINA  
EPA ID #NC D037160439

RCRA 3012 Site Inspection Date: December 18, 1984  
Submitted to EPA: December 12, 1985

Lenox E. Bramble, Environmental Engineer  
and  
D. Mark Durway, Geologist

North Carolina Department of Human Resources  
Division of Health Services  
Solid and Hazardous Waste Management Branch  
RCRA 3012 Group/CERCLA Unit



North Carolina Department of Human Resources  
Division of Health Services  
P.O. Box 2091 • Raleigh, North Carolina 27602-2091

James G. Martin, Governor  
Phillip J. Kirk, Jr., Secretary

Ronald H. Levine, M.D., M.P.H.  
State Health Director

12 December 1985

Ms. Denise Bland  
EPA NC CERCLA Project Officer  
Air and Hazardous Material Division  
345 Courtland Street, N.E.  
Atlanta, GA 30365

SUBJECT: Site Inspection Report/Transmittal Letter  
Toastmaster Incorporated NC D037160439  
Old Laurel Hill Church Road  
Laurinburg, Scotland County, NC 28352

Dear Ms. Bland:

Enclosed please find the Site Inspection Report for Toastmaster Incorporated in Laurinburg, NC. Information provided in this report is based on file documents at the NC Solid and Hazardous Waste Management Branch, communication with persons familiar with the site, an on-site inspection, and laboratory analyses of samples taken during the site inspection.

Toastmaster, a Division of Magic Chef Incorporated, appears on CERCLIS due to notification under RCRA Section 3010 for treatment and storage of chromium and wastewater treatment sludges from electroplating operations.

Posing a potential threat to public health and the environment at Toastmaster are the closed out primary and secondary lagoons, the closed out sand filter bed, and the existing sludge burial trenches. The primary and secondary lagoons and the sand filter bed underwent RCRA closure in August of 1983. Removal and disposal of 181.6 tons of material by SCA Services of Pinewood, South Carolina, was accomplished in seven shipments. Final shipment was completed on August 30, 1983.

As part of closure, five monitoring wells were installed at the Toastmaster facility. On 10-18-83, analyses of samples from all five wells for chromium, cadmium, cyanide, and nickel, showed levels less than detectable limits. However, sample analyses reported 4-18-84 showed detectable levels of nickel and cyanide in the monitoring wells.

Ms. Denise Bland  
Page 2

The North Carolina RCRA 3012 group (now CERCLA) conducted a Site Inspection at the Toastmaster facility on December 18, 1984. Although elevated levels of total chromium, total lead, and total nickel were found in the closed out lagoons and sand filter bed, and the existing burial trenches, the most significant finding from the inspection came from analysis of a sample from monitoring well #4. Monitoring well #4 showed concentrations of lead approximately ten times greater than drinking water standards, as set forth by EPA and the North Carolina Department of Natural Resources and Community Development.

Based on findings from the Site Inspection of 12-18-84, it would appear that the greatest threat posed by the Toastmaster site is to groundwater quality. While most residents living within the site vicinity subscribe to a city water supply, four residential dwellings within 0.25 miles of the site are served by three private drinking wells. Samples collected from these wells during a separate Site Inspection for Rea Magnet Wire Company on 8-1-84 showed, however, that these wells were not contaminated. It should be noted that these three residential wells are also believed to lie hydrologically upgradient from Toastmaster, based on surface topography.

The Toastmaster site is not believed to pose an immediate threat to public health, although on-site environmental contamination has been documented.

For further information, please contact this office at (919) 733-2178.

Sincerely,

*D. Mark Durway*

D. Mark Durway, Geologist  
Solid and Hazardous Waste Management Branch  
Environmental Health Section

DMD/tb/2280A

## SUMMARY

Toastmaster, a Division of Magic Chef Incorporated, appears on CERCLIS due to notification under RCRA Section 3010 for treatment and storage of chromium and wastewater treatment sludges from electroplating operations.

Posing a potential threat to public health and the environment at Toastmaster are the closed out primary and secondary lagoons, the closed out sand filter bed, and the existing sludge burial trenches. The primary and secondary lagoons and the sand filter bed underwent RCRA closure in August of 1983. Removal and disposal of 181.6 tons of material by SCA Services of Pinewood, South Carolina, was accomplished in seven shipments. Final shipment was completed on August 30, 1983.

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The North Carolina RCRA 3012 group (now CERCLA) conducted a Site Inspection at the Toastmaster facility on December 18, 1984. Although elevated levels of total chromium, total lead, and total nickel were found in the closed out lagoons and sand filter bed, and the existing burial trenches, the most significant finding from the inspection came from analysis of a sample from monitoring well #4. Monitoring well #4 showed concentrations of lead approximately ten times greater than drinking water standards, as set forth by EPA and the North Carolina Department of Natural Resources and Community Development.

Based on findings from the Site Inspection of 12-18-84, it would appear that the greatest threat posed by the Toastmaster site is to groundwater quality. While most residents living within the site vicinity subscribe to a city water supply, four residential dwellings within 0.25 miles of the site are served by three private drinking wells. Samples collected from these wells during a separate Site Inspection for Rea Magnet Wire Company on 8-1-84 showed, however, that these wells were not contaminated. It should be noted that these three residential wells are also believed to lie hydrologically upgradient from Toastmaster, based on surface topography.

The Toastmaster site is not believed to pose an immediate threat to public health, although on-site environmental contamination has been documented.

## BACKGROUND

### Location

Toastmaster Incorporated is located on the northern side of Laurinburg, North Carolina, on Old Laurel Hill Church Road (SR 1301). Toastmaster is located immediately adjacent to Rea Magnet Wire Company and approximately one-quarter mile north of the intersection of US 15-501 and Old Laurel Hill Church Road (See Appendix A).

### Site Layout

The Toastmaster building is located on moderately flat to gently sloping terrain. The rear of the site, between the plant building and Leith Creek where the closed out lagoons, sand filter bed, and burial trenches are located, slopes gently downward toward the flood plain of Leith Creek. Access to the rear of the facility is by way of a driveway on the northwestern side of the Toastmaster plant (See Appendix A).

### Ownership History

Site operation has continued under the same management since 1959, although corporate management has changed, as follows:

1959-1968	Ingraham Company Bristol, CT
1968-1980	McGraw Edison Company Elgin, IL
1980-1983	Toastmaster Incorporated Columbia, MI
1983-Present	Magic Chef, Inc. Cleveland, TN

### Site Use History

Electroplating operations have been conducted at this site since 1959 with the exception of the years 1970 through 1974. Since closure of the lagoons and sand filter bed in August 1983, all sludge has been shipped to SCA Services of Pinewood, South Carolina (see Appendix C).

This site has recently terminated electroplating activities and is currently operating as an electric clock manufacturer only.

Summary Trip Report

On December 18, 1984, a Site Inspection was conducted at the Toastmaster facility in Laurinburg, North Carolina. In attendance from the NC DHR/DHS Solid and Hazardous Waste Management Branch were:

Len Bramble, Environmental Engineer  
Mark Durway, Geologist

In attendance representing Toastmaster were:

Frankie Ciandella  
Richard Page  
L.J. Watts

At the conclusion of this Site Inspection, we met briefly with Mr. Ralph J. Ronalter, Vice President and General Manager of Toastmaster.

The Site Inspection began with a tour of the Toastmaster Plant which is currently producing electric clocks. Following this plant tour, we proceeded to the area behind the Toastmaster Plant. It is this area where the closed primary and secondary lagoons, the closed sand filter bed, and the existing burial trenches are located.

The locations of the closed lagoons and sand filter bed were pinpointed, as well as the locations of the existing monitoring wells.

After thoroughly investigating this area, we determined where samples should be taken. Our first samples were taken from the area occupied by the primary lagoon. At this location, an auger hole approximately three feet deep was bored and one inorganic and one organic composite sample were taken. Split samples were provided to the Toastmaster representatives. The augered soil, at this location, had a slightly organic odor and a bluish tint.

The second area sampled was the area formerly occupied by the sand filter bed. An auger hole approximately four feet deep was bored into this extremely gravelly soil. One inorganic and one organic composite sample were taken from this location. Sample splits were provided to the Toastmaster representatives. A slightly bluish tint was observed in the soil from this location.

The third area sampled was the area presently occupied by the burial trenches. This area is immediately upgradient from the closed out sand filter bed. An auger hole approximately six feet deep was bored into the burial trenches. Material encountered at the 5' - 6' interval of the auger hole appeared to be pure sludge. At approximately six feet, water was encountered. The material in the burial trenches had a slightly bluish tint with a texture very much like clay, although some of the material was a crystalline, brown substance. One inorganic and one organic sample were taken from this auger hole, and sample splits were provided to the Toastmaster representatives.

The next sampling location was well #4. This well, approximately 18 feet deep, is located immediately downgradient from the burial trenches. The water level at the time of this Site Inspection was measured at ten feet below the ground surface. A pump was used to purge the well of approximately three well volumes. One inorganic water sample was taken from this well. A split was provided to the Toastmaster representatives.

Due to time restraints, no other samples were taken at the Toastmaster facility as part of this Site Inspection (Information regarding sampling locations is found in Appendix A).

### ENVIRONMENTAL SETTING

#### Topography

The Toastmaster facility, located just north of Laurinburg, is situated in the Coastal Plain Physiographic Province of North Carolina. In general, the surrounding topography is flat except where dissected and drained by streams and washes (A topographic map of Laurinburg and the surrounding area is found in Appendix A).

#### Surface Waters

Toastmaster is located in the Lumber River Basin adjacent to Leith Creek. Flow of Leith Creek as it passes Toastmaster is estimated to be 8-12 cubic feet per second. Under NPDES Permit NC0005053, Toastmaster is permitted to discharge wastewater into Leith Creek at a rate of 0.015 MGD.

#### Geology and Soils

The Coastal Plain Physiographic Province, in which Toastmaster is located, consists of Cretaceous sediments underlain by igneous and metamorphic basement. The Black Creek Formation, which outcrops in the Laurinburg area, consists of interbedded clays, sands, and silts. Soil overlying the Black Creek is generally loamy to clayey with minor fractions of sand.

## Groundwater

Groundwater, which occurs in large quantities within thick sedimentary sequences of the coastal plain, serves as the principal drinking water source for persons living in the Laurinburg area. In an effort to assess the impact which site waste handling practices have had/potentially will have on groundwater, Toastmaster has installed five monitoring wells. Four of these have been positioned near the two closed out lagoons, the closed out sand filter bed, and the sludge burial trenches (in which potentially hazardous sludge still remains). The fifth has been positioned in a location upgradient from these as a background well.

These five wells range in depth from 18' to 30' and are believed to be screened in the surficial (unconfined) aquifer. During the Site Inspection on 12-19-84, the water table of well #4 was determined to be at 10' below ground level. Unconfined groundwater movement at the site is believed to be in a southwesterly direction towards Leith Creek.

## Climate and Meterology

Average temperatures in the Laurinburg area range from 44° to 47°F in January, to 78° to 82°F in July. During extremely hot weather, temperatures approach 100°F.

Average annual precipitation is usually in the 44 to 48 inch range, and 2 to 4 inches of snowfall is expected per year. Net precipitation is approximately 4 inches per year.

Prevailing winds are from the southwest and average about 9 miles per hour.

## Land Use

The area surrounding Toastmaster is comprised of industrial facilities, undeveloped forested land, several residential dwellings, farmland, and the surface waters and flood plain of Leith Creek.

## Population Distribution

Approximately 4 to 6 residential dwellings are located within one-quarter mile of Toastmaster. Other private dwellings, are located southeast of the site in the vicinity of the US 401 bypass. These dwellings are situated approximately 0.5 miles from Toastmaster, and are served by city water, rather than private wells (These dwellings are shown on the location maps in Appendix A).

Adjacent to Toastmaster is the Rea Magnet Wire Company, which employs approximately 250 to 300 persons.

## Water Supply

Four residential dwellings, located within 0.25 miles of Toastmaster, are known to be served by three private drinking water wells. These dwellings are believed to be situated in a direction hydrologically upgradient from Toastmaster and were not sampled as a part of the Site Inspection on 12-18-84. However, during the Site Inspection of nearby Rea Magnet Wire Company on 8-1-84, these wells were sampled. Analyses of these wells did not indicate any contamination at that time.

## Critical Environments

The waters of Leith Creek and its receiving waters could suffer as a result of contamination from this site. Leith Creek is currently classified as "CSW." This is indicative of surface waters suitable for fish and wildlife propagation, secondary recreation, agriculture, and other uses requiring waters of lower quality, as defined by the North Carolina Division of Environmental Management. These waters can be further described as swamp waters which, generally, have low flow velocities.

## WASTE QUANTITIES

### Waste Quantities and Disposal Methods

Based on the closure plan for the primary lagoon and sand filter bed, the primary lagoon had a volume of 20,000 cubic feet while the sand filter bed had a volume of 2,400 cubic feet (181.6 tons of material was removed from these locations during closure).

An unknown amount of sludge remains in the electroplating sludge burial trenches. These were not closed out with the lagoons and sand filter bed.

### Waste Types

Wastes present on this site are electroplating sludges, primarily consisting of heavy metals and possibly organic solvents (See Appendix B).

LABORATORY DATA

Sampling locations:

- 1) Primary Lagoon
- 2) Sand Filter Bed
- 3) Burial Trenches
- 4) Monitoring Well #4

No organic solvents were detected in any of the samples taken.

Inorganic (heavy metals) Results (Total/Extractable, ppm):

<u>Location</u>	<u>Chromium</u>	<u>Lead</u>	<u>Nickel</u>
1	38/ND	15/ND	43.5/ND
2	900/ND	35/ND	3400/ND
3	2100/ND	45/ND	2550/ND
4	0.01	0.58	.024

(Note: "ND" = Not Detected)

← should read  
0.24

APPENDIX A

MAPS AND PHOTOGRAPHS

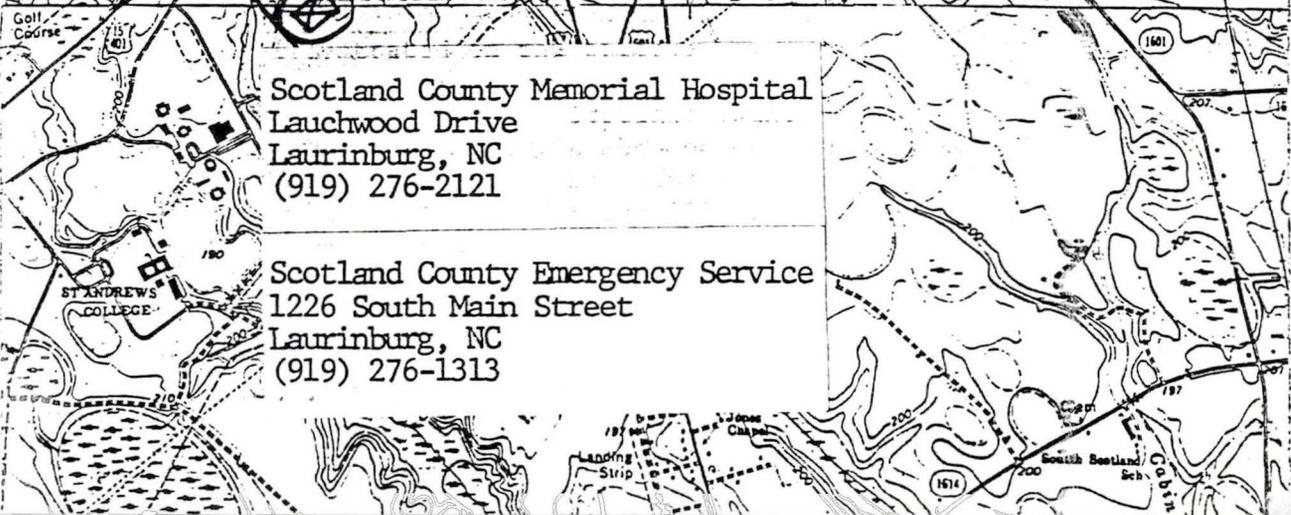
Toastmaster, Inc.  
Old Laurel Hill Church Road  
Laurinburg, NC



Scotland County Memorial Hospital  
Lauchwood Drive  
Laurinburg, NC  
(919) 276-2121

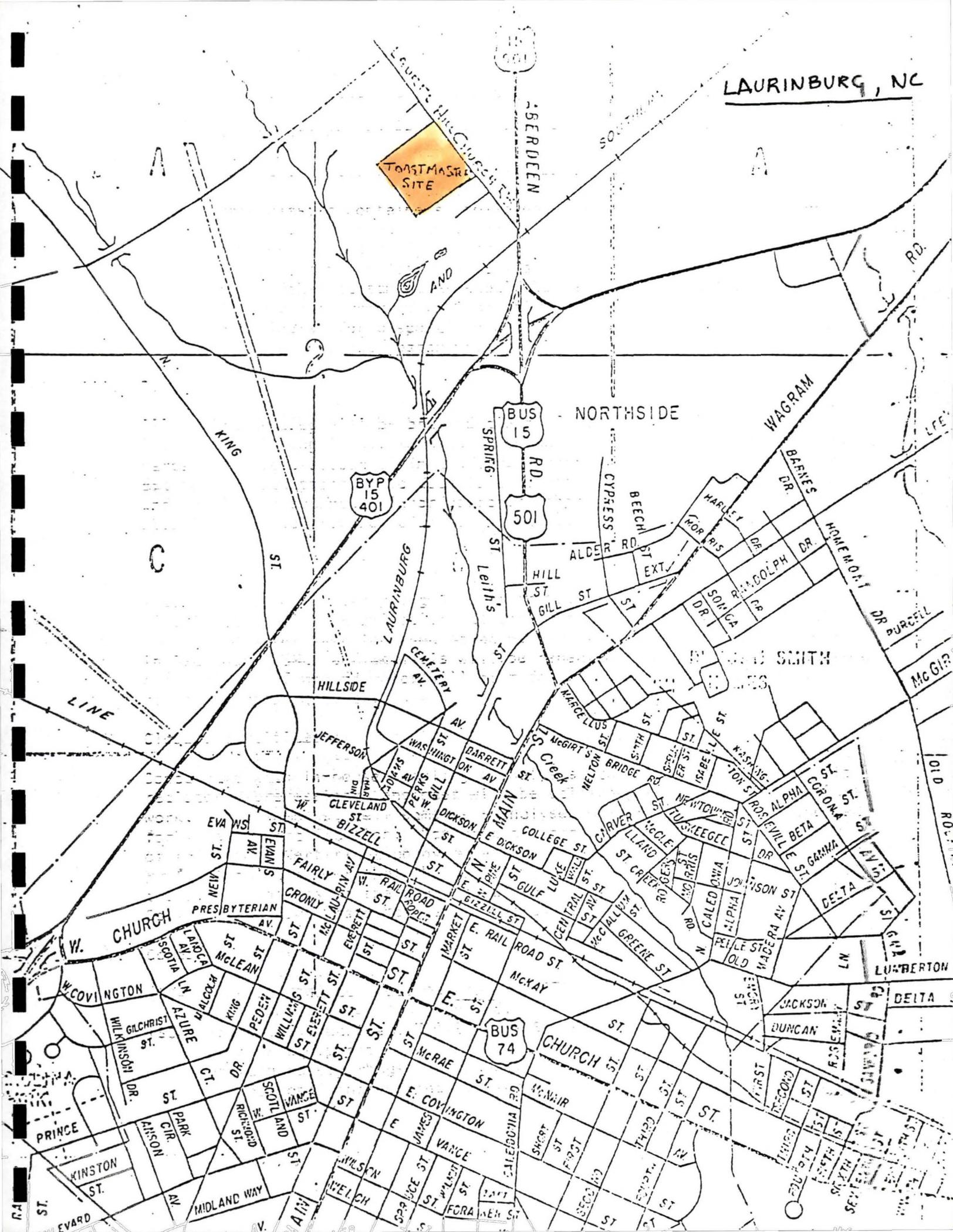
Scotland County Emergency Service  
1226 South Main Street  
Laurinburg, NC  
(919) 276-1313

ST ANDREWS COLLEGE



# LAURINBURG, NC

TOASTMASTER SITE





TOPSTAR INC

LAFAYETTE, NC

12/18/84

Those in attendance

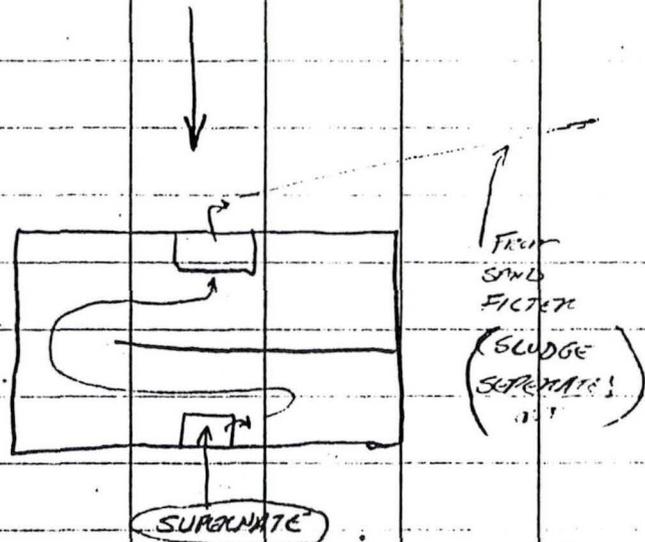
Frankie CIANDELLA

Richard PAGE

L.J. WATTS

SAMPLE LOCATIONS

PRIMARY LAGOON



SAMPLE #12: COMPOSITE ANGLE SAMPLE

FROM PRIMARY LAGOON  
(HIT WATER)

APPROXIMATE DEPTH: 3 FEET

#1 - INORG (SPITS ALSO)

#2 - ORG (SPITS ALSO)

NOTED SLIGHT ORGANIC  
(SOLVENT) ODOR AND  
BLUEISH LAYER.

SAND FILTER BED

AT FAR BACK CORNER  
OF SITE. (~4' DEEP)  
(HIT WATER)

#3: ~~ORGANIC~~ INORGANIC

#4: ORGANIC

SLIGHT BLUE-ISH TINT  
SAND / GRAVEL (LOWER DEPTH)

BURN TRENCHES

UPGRADIENT OF SAND  
FILTER BED ON RAISED  
AREA (~6' DEEP)  
(HIT WATER)

- SLIGHT BLUE-ISH TINT

- CLAYISH / CRYSTALLINE

BRANN SUBSTANCE

#5: INORGANIC

#6: ORGANIC

- BLACK SLUDGE

5-6' PURE

Well #4

WATER TABLE 10' BELOW  
TOP OF LOWER PIPE

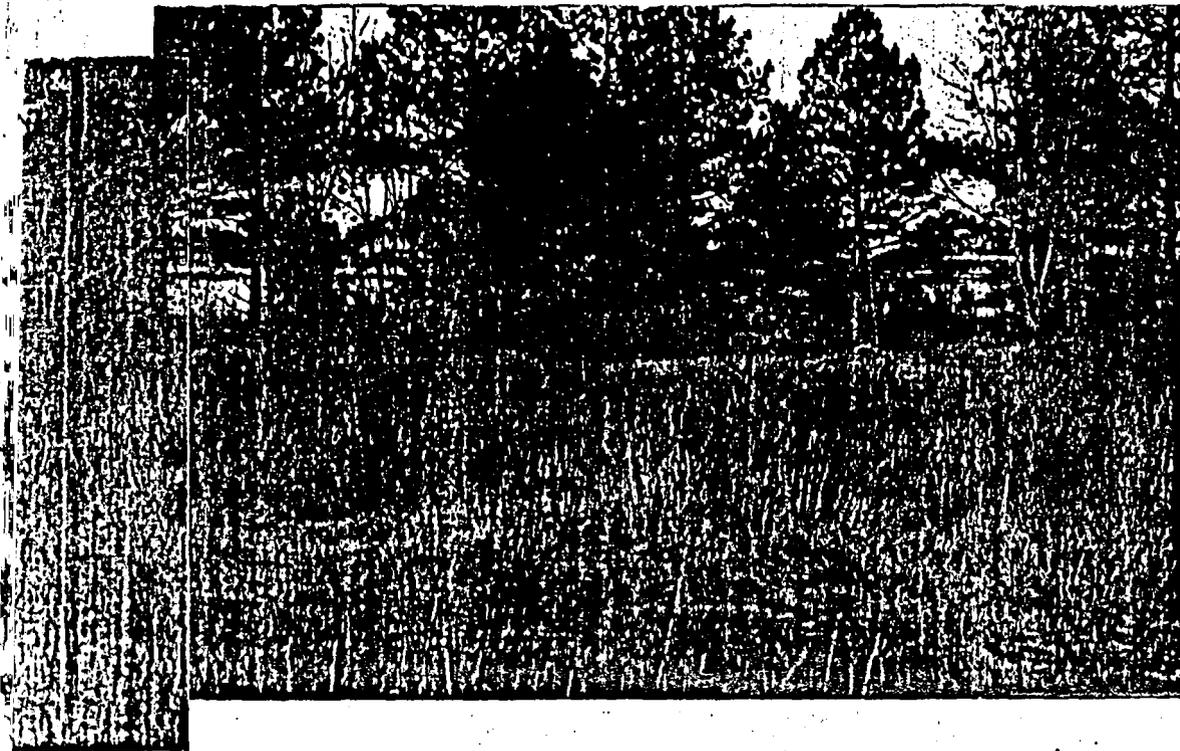
BOTTOM OF WELL ~17 1/2'  
BELOW TOP OF PIPE

WATERBUG PUMP WOULD NOT  
PRIME.

USE PARASTATIC PUMP  
TO PURGE WELL

#7: INORGANIC

SAMPLE LOCATIONS



AREA OF CLOSED OUT PRIMARY LAGOON



AREA OF CLOSED OUT SECONDARY LAGOON

(viewing east)



PHOTO TAKEN FROM CLOSED OUT SAND FILTER BED AREA. SLUDGE BURIAL TRENCHES, WHICH NOW HAVE A GRASS COVER, ARE LOCATED BEHIND VEHICLE. MONITORING WELL #4, LOCATED IMMEDIATELY ADJACENT TO THE BURIAL TRENCHES, IS SITUATED APPROXIMATELY TEN FEET TO THE LEFT OF THE PERSON STANDING.

(viewing northwest)



COLLECTING SAMPLE FROM WELL #4. CLOSED OUT SAND FILTER  
BED AREA IS LOCATED IMMEDIATELY BEHIND VEHICLE.  
(viewing south)

APPENDIX B

LABORATORY DATA

FD

N. C. DEPARTMENT OF HUMAN RESOURCES  
 DIVISION OF HEALTH SERVICES  
 STATE LABORATORY OF PUBLIC HEALTH  
 P. O. BOX 28047 - 306 N. WILMINGTON ST., RALEIGH 27611

Site Number NCD # 37160439 Field Sample Number 2608  
 Name of Site TOASTMASTER, INC. Site Location LAURENCE  
 Collected By L BRAMBLE ID# \_\_\_\_\_ Date Collected 12/18/84 Time 1:30 PM  
 Type of Sample:

Environmental	Concentrate	Comments
<input type="checkbox"/> Groundwater	<input type="checkbox"/> Solid	<u>AVOID SAMPLE FROM GROUND 0.5</u>
<input type="checkbox"/> Surface Water	<input type="checkbox"/> Liquid	<u>LABOR - SLIGHT ODOUR AND</u>
<input checked="" type="checkbox"/> Soil	<input type="checkbox"/> Sludge	<u>BLUE COLLECTION (#1)</u>
<input type="checkbox"/> Other	<input type="checkbox"/> Other	

INORGANIC CHEMISTRY

Extractables		Total			
Parameter	Results mg/l	Parameter	Results mg/l	Parameter	Results mg/l
<input type="checkbox"/> Arsenic	_____	<input type="checkbox"/> Arsenic	_____	<input type="checkbox"/> Chloride	_____
<input type="checkbox"/> Barium	_____	<input type="checkbox"/> Barium	_____	<input type="checkbox"/> Conductivity	_____
<input checked="" type="checkbox"/> Cadmium	<u>&lt;0.05</u>	<input checked="" type="checkbox"/> Cadmium	<u>&lt;2.5</u>	<input type="checkbox"/> Copper	_____
<input checked="" type="checkbox"/> Chromium	<u>&lt;0.05</u>	<input checked="" type="checkbox"/> Chromium	<u>38</u>	<input type="checkbox"/> Fluoride	_____
<input checked="" type="checkbox"/> Lead	<u>&lt;0.1</u>	<input checked="" type="checkbox"/> Lead	<u>15</u>	<input type="checkbox"/> Iron	_____
<input type="checkbox"/> Mercury	_____	<input type="checkbox"/> Mercury	_____	<input type="checkbox"/> Manganese	_____
<input type="checkbox"/> Selenium	_____	<input type="checkbox"/> Selenium	_____	<input type="checkbox"/> Nitrate	_____
<input type="checkbox"/> Silver	_____	<input type="checkbox"/> Silver	_____	<input type="checkbox"/> pH	_____
<input checked="" type="checkbox"/> Nickel	<u>&lt;0.05</u>	<input checked="" type="checkbox"/> Nickel	<u>43.5</u>	<input type="checkbox"/> Sulfates	_____
<input checked="" type="checkbox"/> Hexavalent Chromium	<u>&lt;0.05</u>	<input checked="" type="checkbox"/> Hexavalent Chromium	<u>&lt;1.0</u>	<input type="checkbox"/> TDS	_____
_____	_____	_____	_____	<input type="checkbox"/> Zinc	_____
_____	_____	_____	_____	<input type="checkbox"/> TOC	_____

ORGANIC CHEMISTRY

Parameter	Results mg/l	Parameter	Results mg/l	Parameter	Results mg/l
<input type="checkbox"/> Endrin	_____	<input type="checkbox"/> Toxaphene	_____	<input type="checkbox"/> PCB's	_____
<input type="checkbox"/> Lindane	_____	<input type="checkbox"/> 2,4-D	_____	<input type="checkbox"/> Petroleum	_____
<input type="checkbox"/> Methoxychlor	_____	<input type="checkbox"/> 2,4,5-TP (Silvex)	_____	<input type="checkbox"/> EDB	_____
_____	_____	_____	_____	<input type="checkbox"/> TOX	_____
_____	_____	_____	_____	_____	_____

MICROBIOLOGY

Parameter
<input type="checkbox"/> (MF) Coliform Colonies/100mls
<input type="checkbox"/> (MPN) Coliform Colonies/100mls
_____
_____

RADIOCHEMISTRY

Parameter	Results PCi/l
<input type="checkbox"/> Gross Alpha	_____
<input type="checkbox"/> Gross Beta	_____
_____	_____
_____	_____

Date Received \_\_\_\_\_ Date Reported 7 Feb 85  
 Date Extracted \_\_\_\_\_ Date Analyzed \_\_\_\_\_  
 Reported By \_\_\_\_\_ Lab Number 49656 DEC 20 84



N. C. DEPARTMENT OF HUMAN RESOURCES  
 DIVISION OF HEALTH SERVICES  
 STATE LABORATORY OF PUBLIC HEALTH  
 P. O. BOX 28047 - 306 N. WILMINGTON ST., RALEIGH 27611

Site Number NCD # 37160439 Field Sample Number 2641  
 Name of Site TOASTMASTER, INC. Site Location LAURENCEBURG  
 Collected By L. BRAMBLE ID# \_\_\_\_\_ Date Collected 12/18/84 Time 1:30 PM

Type of Sample:

Environmental	Concentrate	Comments
<input type="checkbox"/> Groundwater	<input type="checkbox"/> Solid	<u>Auger Sample from closed out</u> <u>Lagoon - slight odor and blue</u> <u>colored</u> <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">#2</span>
<input type="checkbox"/> Surface Water	<input type="checkbox"/> Liquid	
<input checked="" type="checkbox"/> Soil (wet)	<input type="checkbox"/> Sludge	
<input type="checkbox"/> Other	<input type="checkbox"/> Other	

INORGANIC CHEMISTRY

Extractables		Total			
Parameter	Results mg/l	Parameter	Results mg/l	Parameter	Results mg/l
— Arsenic	_____	— Arsenic	_____	— Chloride	_____
— Barium	_____	— Barium	_____	— Conductivity	_____
— Cadmium	_____	— Cadmium	_____	— Copper	_____
— Chromium	_____	— Chromium	_____	— Fluoride	_____
— Lead	_____	— Lead	_____	— Iron	_____
— Mercury	_____	— Mercury	_____	— Manganese	_____
— Selenium	_____	— Selenium	_____	— Nitrate	_____
— Silver	_____	— Silver	_____	— pH	_____
— _____	_____	— _____	_____	— Sulfates	_____
— _____	_____	— _____	_____	— TDS	_____
— _____	_____	— _____	_____	— Zinc	_____
— _____	_____	— _____	_____	— TOC	_____
— _____	_____	— _____	_____	— _____	_____

ORGANIC CHEMISTRY

Parameter	Results mg/l	Parameter	Results mg/l	Parameter	Results mg/l
— Endrin	_____	— Toxaphene	_____	— PCB's	_____
— Lindane	_____	— 2,4-D	_____	— Petroleum	_____
— Methoxychlor	_____	— 2,4,5-TP (Silvex)	_____	— EDB	_____
<input checked="" type="checkbox"/> TRICHLOROETHYLENE	< Oil ppm (None Detected)			— TOX	_____
<input checked="" type="checkbox"/> 1,1,1 TRICHLOROETHANE	< Oil ppm (None Detected)			— _____	_____

MICROBIOLOGY

RADIOCHEMISTRY

Parameter	Parameter	Results PCi/l
— (MF) Coliform Colonies/100mls	— Gross Alpha	_____
— (MPN) Coliform Colonies/100mls	— Gross Beta	_____
— _____	— _____	_____
— _____	— _____	_____

Date Received 12/19/84 Date Reported 1-10-85  
 Date Extracted - Date Analyzed 1-8-85 PM  
 Reported By John L. New Lab Number 407250

407250 - 407251

N. C. DEPARTMENT OF HUMAN RESOURCES  
 DIVISION OF HEALTH SERVICES  
 STATE LABORATORY OF PUBLIC HEALTH  
 P. O. BOX 28047 - 306 N. WILMINGTON ST., RALEIGH 27611

Site Number NCD 037160439 Field Sample Number 2609  
 Name of Site TOASTMASTER, INC. Site Location LAURENS, NC  
 Collected By L. BRAMBLE ID# \_\_\_\_\_ Date Collected 12/18/84 Time 2:50 PM  
 Type of Sample:

Environmental	Concentrate	Comments
<input type="checkbox"/> Groundwater	<input type="checkbox"/> Solid	<u>AUGER SAMPLE FROM CLOSED C/D SAND FILTER BED #3</u>
<input type="checkbox"/> Surface Water	<input type="checkbox"/> Liquid	
<input checked="" type="checkbox"/> Soil	<input type="checkbox"/> Sludge	
<input type="checkbox"/> Other	<input type="checkbox"/> Other	

**INORGANIC CHEMISTRY**

Extractables		Total		Parameter	Results mg/l
Parameter	Results mg/l	Parameter	Results mg/l	Parameter	Results mg/l
<input type="checkbox"/> Arsenic	_____	<input type="checkbox"/> Arsenic	_____	<input type="checkbox"/> Chloride	_____
<input type="checkbox"/> Barium	_____	<input type="checkbox"/> Barium	_____	<input type="checkbox"/> Conductivity	_____
<input checked="" type="checkbox"/> Cadmium	<u>&lt;0.05</u>	<input checked="" type="checkbox"/> Cadmium	<u>&lt;2.5</u>	<input type="checkbox"/> Copper	_____
<input checked="" type="checkbox"/> Chromium	<u>&lt;0.05</u>	<input checked="" type="checkbox"/> Chromium	<u>900</u>	<input type="checkbox"/> Fluoride	_____
<input checked="" type="checkbox"/> Lead	<u>&lt;0.1</u>	<input checked="" type="checkbox"/> Lead	<u>35</u>	<input type="checkbox"/> Iron	_____
<input type="checkbox"/> Mercury	_____	<input type="checkbox"/> Mercury	_____	<input type="checkbox"/> Manganese	_____
<input type="checkbox"/> Selenium	_____	<input type="checkbox"/> Selenium	_____	<input type="checkbox"/> Nitrate	_____
<input type="checkbox"/> Silver	_____	<input type="checkbox"/> Silver	_____	<input type="checkbox"/> pH	_____
<input checked="" type="checkbox"/> Nickel	<u>6.1</u>	<input checked="" type="checkbox"/> Nickel	<u>3400</u>	<input type="checkbox"/> Sulfates	_____
<input checked="" type="checkbox"/> Hexavalent Chromium	<u>&lt;0.05</u>	<input checked="" type="checkbox"/> Hexavalent Chromium	<u>&lt;25</u>	<input type="checkbox"/> TDS	_____
<input type="checkbox"/>	_____	<input type="checkbox"/>	_____	<input type="checkbox"/> Zinc	_____
<input type="checkbox"/>	_____	<input type="checkbox"/>	_____	<input type="checkbox"/> TOC	_____

**ORGANIC CHEMISTRY**

Parameter	Results mg/l	Parameter	Results mg/l	Parameter	Results mg/l
<input type="checkbox"/> Endrin	_____	<input type="checkbox"/> Toxaphene	_____	<input type="checkbox"/> PCB's	_____
<input type="checkbox"/> Lindane	_____	<input type="checkbox"/> 2,4-D	_____	<input type="checkbox"/> Petroleum	_____
<input type="checkbox"/> Methoxychlor	_____	<input type="checkbox"/> 2,4,5-TP(Silvex)	_____	<input type="checkbox"/> EDB	_____
<input type="checkbox"/>	_____	<input type="checkbox"/>	_____	<input type="checkbox"/> TOX	_____
<input type="checkbox"/>	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____

**MICROBIOLOGY**

Parameter
<input type="checkbox"/> (MF) Coliform Colonies/100mls
<input type="checkbox"/> (MPN) Coliform Colonies/100mls
<input type="checkbox"/>
<input type="checkbox"/>

**RADIOCHEMISTRY**

Parameter	Results PCi/l
<input type="checkbox"/> Gross Alpha	_____
<input type="checkbox"/> Gross Beta	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____



Date Received \_\_\_\_\_ Date Reported 7 Feb 85  
 Date Extracted \_\_\_\_\_ Date Analyzed \_\_\_\_\_  
 Reported By \_\_\_\_\_ Lab Number 49657-DEC 20 84

N. C. DEPARTMENT OF HUMAN RESOURCES  
 DIVISION OF HEALTH SERVICES  
 STATE LABORATORY OF PUBLIC HEALTH  
 P. O. BOX 28047 - 306 N. WILMINGTON ST., RALEIGH 27611

Site Number NCD 37160439 Field Sample Number 2642  
 Name of Site TOPMASTER, INC. Site Location LAURENS, SC  
 Collected By L. BIZAMBLE ID# \_\_\_\_\_ Date Collected 12/18/84 Time 2:30 PM

Type of Sample:

Environmental	Concentrate	Comments
<input type="checkbox"/> Groundwater	<input type="checkbox"/> Solid	<u>AUGER SAMPLE FROM CLOSED OUT SAND FILTER BED #4</u>
<input type="checkbox"/> Surface Water	<input type="checkbox"/> Liquid	
<input checked="" type="checkbox"/> Soil	<input type="checkbox"/> Sludge	
<input type="checkbox"/> Other	<input type="checkbox"/> Other	

INORGANIC CHEMISTRY

Extractables		Total		Parameter	Results mg/l
Parameter	Results mg/l	Parameter	Results mg/l	Parameter	Results mg/l
Asenic	_____	Asenic	_____	Chloride	_____
Barium	_____	Barium	_____	Conductivity	_____
Cadmium	_____	Cadmium	_____	Copper	_____
Chromium	_____	Chromium	_____	Fluoride	_____
Lead	_____	Lead	_____	Iron	_____
Mercury	_____	Mercury	_____	Manganese	_____
Selenium	_____	Selenium	_____	Nitrate	_____
Silver	_____	Silver	_____	pH	_____
_____	_____	_____	_____	Sulfates	_____
_____	_____	_____	_____	TDS	_____
_____	_____	_____	_____	Zinc	_____
_____	_____	_____	_____	TOC	_____

ORGANIC CHEMISTRY

Parameter	Results mg/l	Parameter	Results mg/l	Parameter	Results mg/l
Endrin	_____	Toxaphene	_____	PCB's	_____
Lindane	_____	2,4-D	_____	Petroleum	_____
Methoxychlor	_____	2,4,5-TP (Silvex)	_____	EDB	_____
<input checked="" type="checkbox"/> TRICHLOROETHYLENE	<u>&lt; 0.1 ppm (None Detected)</u>	_____	_____	TOX	_____
<input checked="" type="checkbox"/> 1,1,1 TRICHLOROETHANE	<u>&lt; 0.1 ppm (None Detected)</u>	_____	_____	_____	_____

MICROBIOLOGY

RADIOCHEMISTRY

Parameter	Parameter	Results PCi/l
(MF) Coliform Colonies/100mls	Gross Alpha	_____
(MPN) Coliform Colonies/100mls	Gross Beta	_____
_____	_____	_____
_____	_____	_____

Date Received 12/19/84 Date Reported 1-10-85  
 Date Extracted \_\_\_\_\_ Date Analyzed 1-8-85 PTM  
 Reported By John P. Neal Lab Number 607251

N. C. DEPARTMENT OF HUMAN RESOURCES  
 DIVISION OF HEALTH SERVICES  
 STATE LABORATORY OF PUBLIC HEALTH  
 P. O. BOX 28047 - 306 N. WILMINGTON ST., RALEIGH 27611

Site Number NCD 37160439 Field Sample Number 2610  
 Name of Site TOASTMASTER, INC. Site Location LAUREL BURG  
 Collected By L. BRAMBLE ID# \_\_\_\_\_ Date Collected 12/18/84 Time 3:30 PM

Type of Sample:

Environmental	Concentrate	Comments
<input type="checkbox"/> Groundwater	<input type="checkbox"/> Solid	<u>ANOTHER SAMPLE FROM SLUDGE</u>
<input type="checkbox"/> Surface Water	<input type="checkbox"/> Liquid	<u>BURIAL TRENCHES (45)</u>
<input checked="" type="checkbox"/> Soil	<input checked="" type="checkbox"/> Sludge	
<input type="checkbox"/> Other	<input type="checkbox"/> Other	

INORGANIC CHEMISTRY

Extractables		Total		Parameter	Results mg/l
Parameter	Results mg/l	Parameter	Results mg/l	Parameter	Results mg/l
<input type="checkbox"/> Arsenic	_____	<input type="checkbox"/> Arsenic	_____	<input type="checkbox"/> Chloride	_____
<input type="checkbox"/> Barium	_____	<input type="checkbox"/> Barium	_____	<input type="checkbox"/> Conductivity	_____
<input checked="" type="checkbox"/> Cadmium	<u>&lt;0.05</u>	<input checked="" type="checkbox"/> Cadmium	<u>&lt;2.5</u>	<input type="checkbox"/> Copper	_____
<input checked="" type="checkbox"/> Chromium	<u>&lt;0.05</u>	<input checked="" type="checkbox"/> Chromium	<u>2100</u>	<input type="checkbox"/> Fluoride	_____
<input checked="" type="checkbox"/> Lead	<u>&lt;0.1</u>	<input checked="" type="checkbox"/> Lead	<u>45</u>	<input type="checkbox"/> Iron	_____
<input type="checkbox"/> Mercury	_____	<input type="checkbox"/> Mercury	_____	<input type="checkbox"/> Manganese	_____
<input type="checkbox"/> Selenium	_____	<input type="checkbox"/> Selenium	_____	<input type="checkbox"/> Nitrate	_____
<input type="checkbox"/> Silver	_____	<input type="checkbox"/> Silver	_____	<input type="checkbox"/> pH	_____
<input checked="" type="checkbox"/> <u>NICKEL</u>	<u>5.0</u>	<input checked="" type="checkbox"/> <u>NICKEL</u>	<u>2550</u>	<input type="checkbox"/> Sulfates	_____
<input checked="" type="checkbox"/> <u>HEXAVALENT</u>	<u>&lt;0.05</u>	<input checked="" type="checkbox"/> <u>HEXAVALENT</u>	<u>&lt;25</u>	<input type="checkbox"/> TDS	_____
<input type="checkbox"/> <u>CHROMIUM</u>	_____	<input type="checkbox"/> <u>CHROMIUM</u>	_____	<input type="checkbox"/> Zinc	_____
_____	_____	_____	_____	<input type="checkbox"/> TOC	_____
_____	_____	_____	_____	_____	_____

ORGANIC CHEMISTRY

Parameter	Results mg/l	Parameter	Results mg/l	Parameter	Results mg/l
<input type="checkbox"/> Endrin	_____	<input type="checkbox"/> Toxaphene	_____	<input type="checkbox"/> PCB's	_____
<input type="checkbox"/> Lindane	_____	<input type="checkbox"/> 2,4-D	_____	<input type="checkbox"/> Petroleum	_____
<input type="checkbox"/> Methoxychlor	_____	<input type="checkbox"/> 2,4,5-TP(Silvex)	_____	<input type="checkbox"/> EDB	_____
_____	_____	_____	_____	<input type="checkbox"/> TOX	_____
_____	_____	_____	_____	_____	_____

MICROBIOLOGY

Parameter
<input type="checkbox"/> (MF) Coliform Colonies/100mls
<input type="checkbox"/> (MPN) Coliform Colonies/100mls
_____
_____

RADIOCHEMISTRY

Parameter	Results PCi/l
<input type="checkbox"/> Gross Alpha	_____
<input type="checkbox"/> Gross Beta	_____
_____	_____
_____	_____



Date Received \_\_\_\_\_ Date Reported 7 Feb 85  
 Date Extracted \_\_\_\_\_ Date Analyzed \_\_\_\_\_  
 Reported By \_\_\_\_\_ Lab Number 49658 DEC 20 84

N. C. DEPARTMENT OF HUMAN RESOURCES  
 DIVISION OF HEALTH SERVICES  
 STATE LABORATORY OF PUBLIC HEALTH  
 P. O. BOX 28047 - 306 N. WILMINGTON ST., RALEIGH 27611

Site Number NCD 37160439 Field Sample Number 2643  
 Name of Site TOASTMASTER, INC. Site Location LAURINBURG  
 Collected By L. BRAMBLE ID# \_\_\_\_\_ Date Collected 12/18/84 Time 3:30 PM

Type of Sample:

Environmental	Concentrate	Comments
<input type="checkbox"/> Groundwater	<input type="checkbox"/> Solid	<u>Auger sample from sludge</u>
<input type="checkbox"/> Surface Water	<input type="checkbox"/> Liquid	<u>BURIAL TRENCHES #6</u>
<input checked="" type="checkbox"/> Soil	<input checked="" type="checkbox"/> Sludge	
<input type="checkbox"/> Other	<input type="checkbox"/> Other	

INORGANIC CHEMISTRY

Extractables		Total			
Parameter	Results mg/l	Parameter	Results mg/l	Parameter	Results mg/l
— Arsenic	_____	— Arsenic	_____	— Chloride	_____
— Barium	_____	— Barium	_____	— Conductivity	_____
— Cadmium	_____	— Cadmium	_____	— Copper	_____
— Chromium	_____	— Chromium	_____	— Fluoride	_____
— Lead	_____	— Lead	_____	— Iron	_____
— Mercury	_____	— Mercury	_____	— Manganese	_____
— Selenium	_____	— Selenium	_____	— Nitrate	_____
— Silver	_____	— Silver	_____	— pH	_____
— _____	_____	— _____	_____	— Sulfates	_____
— _____	_____	— _____	_____	— TDS	_____
— _____	_____	— _____	_____	— Zinc	_____
— _____	_____	— _____	_____	— TOC	_____
— _____	_____	— _____	_____		

ORGANIC CHEMISTRY

Parameter	Results mg/l	Parameter	Results mg/l	Parameter	Results mg/l
— Endrin	_____	— Toxaphene	_____	— PCB's	_____
— Lindane	_____	— 2,4-D	_____	— Petroleum	_____
— Methoxychlor	_____	— 2,4,5-TP(Silvex)	_____	— EDB	_____
<input checked="" type="checkbox"/> TRICHOETHYLENE	<u>&lt; 0.1 ppm (None Detected)</u>			— TOX	_____
<input checked="" type="checkbox"/> 1,1-TRICHLOROETHANE	<u>&lt; 0.1 ppm (None Detected)</u>				

MICROBIOLOGY

RADIOCHEMISTRY

Parameter	Parameter	Results PCi/l
— (MF) Coliform Colonies/100mls	— Gross Alpha	_____
— (MPN) Coliform Colonies/100mls	— Gross Beta	_____
— _____	— _____	_____
— _____	— _____	_____

Date Received 12/19/84 Date Reported 1-10-85  
 Date Extracted - Date Analyzed 1-8-85 PTM  
 Reported By J. R. Neal Lab Number 607252

STATE LABORATORY OF PUBLIC HEALTH  
DIVISION OF HEALTH SERVICES  
N.C. DEPARTMENT OF HUMAN RESOURCES  
P.O. BOX 28047 - 306 N. WILMINGTON ST., RALEIGH 27611

REPORT: E70RSL30

INORGANIC CHEMICAL ANALYSIS  
HAZARDOUS WASTE SITE

DATE: 01/18/85

Hazardous Waste Site Nr: 83D037160439 Field Sample Number: 02611

Name of Site: Toastmaster Inc. Time Products



SAMPLE #7

Type of Sample: ENVIRONMENTAL GROUND [GROUNDWATER - WELL #4]

Collected on: Date: 12/18/84 Time: 0430PM Collected By: BRAMBLE

PARAM ID	NAME	METHOD	MG/L RESULTS	PARAM ID	NAME	METHOD	MG/L RESULTS
1015T	CADMIUM	101	0.0100				
1020T	CHROMIUM	101	0.0100				
1030T	LEAD	101	0.5800				
1036T	NICKEL	101	0.2400				

Date Received: 12/20/84 Date Reported: 01/18/85 Date Analyzed: 12/20/84  
Laboratory Number: 449648 Reported By: E33 Comments: WELL DOWNGRADIENT (WELL #4)

Mildred A. Kerbaugh  
Director

## GENERAL INFORMATION

A sample analyses request form (DHS 3191) must be completed for each type of evaluation requested (e.g., inorganic, organic, microbiology, radio-chemistry). For sampling conditions which require more than one (1) container (i.e., ground or surface water from landfills) a sample label must be affixed to one of the containers. The collector must then write the site and sample number on the duplicate.

Do not submit an analysis request sheet with no parameters indicated.

Equivalent measurements:

ppm =  $\mu\text{g/ml}$  =  $\text{mg/l}$  =  $\mu\text{g/g}$  =  $\text{mg/kg}$   
ppb =  $\mu\text{g/l}$  =  $\mu\text{g/1000g}$  =  $\mu\text{g/kg}$

## DEFINITIONS/INSTRUCTIONS

Site Number - A twelve-digit site/location identifier, assigned only by the district field representative.

Field Sample Number - A six-digit sample identifier which is pre-printed on the sample label.

Name of Site - Name of landfill, facility, etc.

Site Location - Address, street number, state road, etc.

Collected By - Name and ID of sample collector.

Date and Time Collected - Self-explanatory.

Environmental - A sample of a naturally occurring substance such as groundwater, surface water or soils which may be contaminated.

Concentrate - A sample of a waste, including but not limited to, sludges, resins, treatment effluents or drummed wastes.

Comments - Lists details regarding sample or sample point, including but limited to, phase separation, and/or odors.

Inorganic Chemistry - Check (✓) the desired parameters to be analyzed. Extractables are only performed on a solid or semi-solid. For routine landfill samples, check all parameters in the second and third columns.

Organic Chemistry - Check (✓) the desired parameter to be analyzed. If not listed, enter the name in the space provided.

Microbiology and Radiochemistry - The Raleigh office should be consulted prior to sampling for either of these.

Solid & Hazardous Waste Management Branch  
Division of Health Services  
N.C. Department of Human Resources  
P.O. Box 2091, Raleigh, N.C. 27602

CHAIN OF CUSTODY RECORD  
Hazardous Waste Materials

Location of Sampling:  Generator  Transporter  Treatment Facility  
 Storage Facility  Disposal Facility  Landfill  
Other: LAGOON, SAND FILTER BED, BURIAL TRENCHES

Company's Name TOASTMASTER, INC Telephone (919) 276-3101

Address P.O. Box 1609 LAURINBURG NC 28352  
number street city state zip

Collector's Name Lenox E. Bumble Telephone (919) 733-2178  
signature

Date Sample Dec 18, 1984 Time Sampled 1:30 PM - 4:30 PM hours

Type of Process Generating Waste ELECTROPLATING

Field Information (sketch sampling location on back)

Field Sample No. 2608 2609 2610 2611 \_\_\_\_\_

Chain of Possession

1. Lenox E. Bumble Environmental Engineer 12/18/84 - 12/19/84  
signature title inclusive dates
2. W. C. Walker Chemist 20 Dec 84  
signature title inclusive dates
3. \_\_\_\_\_  
signature title inclusive dates

Results Reported

W. C. Walker Chemist 28 Jan 85  
signature title date

Solid & Hazardous Waste Management Branch  
Division of Health Services  
N.C. Department of Human Resources  
P.O. Box 2091, Raleigh, N.C. 27602

CHAIN OF CUSTODY RECORD  
Hazardous Waste Materials

Location of Sampling:  Generator  Transporter  Treatment Facility

Storage Facility  Disposal Facility  Landfill

Other: LAGOON, SANDFILTER BED, BURIAL TRENCHES

Company's Name TOASTMASTER INC Telephone (919) 276-3101

Address P.O. Box 1609 LAURENSBURG NC 28352  
number street city state zip

Collector's Name Lenox E. Bramble Telephone (919) 733-2178  
signature

Date Sample Dec 18, 1984 Time Sampled 1:30 PM - 3:30 PM hours

Type of Process Generating Waste ELECTROPLATING

Field Information (sketch sampling location on back)

Field Sample No. 2641 2642 2643 \_\_\_\_\_

Chain of Possession

1. Lenox E. Bramble Environmental Engineer 12/18/84-12/19/84  
signature title inclusive/dates
2. Paul Lyman CHEMIST 12-19-84  
signature title inclusive/dates
3. \_\_\_\_\_  
signature title inclusive/dates

Results Reported

\_\_\_\_\_ signature title date

 **Toastmaster Inc.**

P.O. Box 1609 Laurinburg, North Carolina 28352 919 276 3101

March 13, 1985

Mr. Lenox E. Bramble  
Environmental Engineer  
Solid and Hazardous Waste Management Branch  
Environmental Health Section  
N. C. Department of Human Resources  
P. O. Box 2091  
Raleigh, North Carolina 27602-2091

Dear Mr. Bramble:

After receiving your letter of February 29, 1985 regarding the analysis results of samples which you collected at our site on December 18, 1984, we elected to sample all wells and have samples analysed for cadmium and lead. Attached is a copy of the results of the analyses.

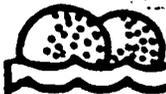
Sincerely,  
TOASTMASTER, INC.  
INGRAHAM, TIME PRODUCTS DIV.

  
Ralph J. Ronalter  
Vice President, Gen. Mgr.

RJR:jb

Enclosure

# ENVIRONMENTAL LABORATORY



OF FAYETTEVILLE

"SECURING TOMORROW TODAY"

Water and Wastewater Analysis

North Carolina Certification No. 11

P. O. Box 49 — Phone (919) 864-1920  
Fayetteville, North Carolina 28301

NAME Toxmaster, Inc. Date of Sample: February 28, 1985

ADDRESS Post Office Box 1809 Comments:  
Laurinburg, NC 28352

- Analysis
- A. Well #1
  - B. Well #2
  - C. Well #3
  - D. Well #4
  - E. Well #5

	A	B	C	D	E
pH					
BOD (mg/l)					
COD (mg/l)					
Fecal Coliform (/100ml)					
Total Coliform (/100ml)					
Total Solids (mg/l)					
Total Suspended Solids (mg/l)					
Total Kjeldahl Nitrogen (mg/l)					
Ammonia (as N) (mg/l)					
Oil & Grease (mg/l)					
Total Phosphorus					
Turbidity (NTU)					
Chloride (mg/l)					
Synthetic Detergent (MBAS)					
Acidity (as mg/l CaCO <sub>3</sub> )					
Alkalinity (as mg/l CaCO <sub>3</sub> )					
Chlorine (mg/l)					
Temperature					
Chromium - Total (mg/l)					
Copper (mg/l)					
Nickel (mg/l)					
Zinc (mg/l)					
Dissolved Oxygen (mg/l)					
Volatile Solids (mg/l)					
Aluminum (mg/l)					
Iron (mg/l)					
Sulfates - SO <sub>4</sub> (mg/l)					
Chloride (mg/l)					
Fluoride (mg/l)					
Cadmium	< 0.01	< 0.01	< 0.01	< 0.01	< 0.01
Lead	< 0.1	< 0.1	< 0.1	< 0.1	< 0.1



North Carolina Department of Human Resources  
Division of Health Services  
P.O. Box 2091 • Raleigh, North Carolina 27602-2091

James G. Martin, Governor  
Phillip J. Kirk, Jr., Secretary

Ronald H. Levine, M.D., M.P.H.  
State Health Director  
919/733-3446

February 19, 1985

Mr. Ralph J. Ronalter  
Toastmaster, Inc.  
Old Laurel Hill Church Road  
P.O. Box 1609  
Laurinburg, NC 28352

Dear Mr. Ronalter:

As promised during our Site Investigation and conversation with you on December 18, 1984, enclosed you will find copies of:

- 1) Organic chemical analyses
- 2) Inorganic chemical analyses
- 3) Consent for access to property, and
- 4) Receipt for samples

It should be noted that the organic results did not show the presence of any suspected contaminants. However, the inorganic results show high levels (totals) of chromium, lead, and nickel in the sediment samples and high levels of cadmium, lead, and nickel in the one well we sampled. In fact, analysis of the well water showed concentrations of cadmium (0.01 MG/L) equal to, and lead (0.58 MG/L) greater than, drinking water standards as set forth by the Environmental Protection Agency (EPA) and North Carolina Department of Natural Resources and Community Development (NRCD).

Based on these results, I will recommend a Medium priority for follow-up work at Toastmaster. Any follow up would probably begin with additional sampling, particularly from the wells that were not sampled during our Site Investigation.

If you have any questions, please call me at (919) 733-2178.

Sincerely,

A handwritten signature in cursive script that reads "Lenox E. Bramble".

Lenox E. Bramble, Environmental Engineer  
Solid and Hazardous Waste Management Branch  
Environmental Health Section

LEB/LW/2072A

CONSENT FOR ACCESS TO PROPERTY

PROPERTY

ADDRESS: TOASTMASTER, Inc.  
LANINGBURG, N.C.

I, Ralph J. Nowalter, am the owner/authorized representative of the owner of real property located at the above address. I hereby consent to the inspection of said property by officers, employees, and authorized representatives of the North Carolina Solid and Hazardous Waste Management Branch. My consent gives the above named parties a right of entry to, upon or through said property, and the right to take photographs and make visual observations of the property as necessary for the inspection. My consent also gives the above named parties a right to bore holes into the subsurface, to survey the elevation of the bore holes, and to sample the surface water and/or ground water on or underlying the property.

Henry E. Swarth 12/18/84

Witness Date

Ralph J. Nowalter 12-18-

Signature Date

N. C. DEPARTMENT OF S  
 DIVISION OF HEALTH SERVICES  
 SOLID AND HAZARDOUS WASTE MANAGEMENT BRANCH

Receipt for Samples

The samples described below were collected in connection with the administration, enforcement, and documentation of the:

- ( ) North Carolina Hazardous Waste Management Rules, 10 NCAC 10F
- ( ) North Carolina Solid Waste Management Rules, 10 NCAC 10G
- ( ) Comprehensive Environmental Response, Compensation and Liability Act (CERCLA)
- ( ) Toxic Substances Control Act (TSCA), 15 U.S.C. §2601, et seq., specifically Section 11 of TSCA, 15-U.S.C. § 2610.

Lenox E. Bramble, RCRA 3012, Raleigh, NC  
 Inspector's Name Inspector's Address

TOASTMASTER, INC. LAURINSBORO, NC  
 Name of Firm Firm Address

Ralph J. Amalte V.P. GEN. MGR.  
 Firm Owner, Operator, or Agent Title

SAMPLE NUMBER	COLLECTED		SAMPLE TYPE			DUPLICATE SAMPLES			SAMPLE LOCATION	
	DATE	TIME	WATER	SOIL	OTHER	OFFERED	ACCEPTED	REJECTED	ON-SITE	OFF-SIT
1	12/18	1:30 PM		✓		✓	✓		✓	
2	12/18	1:30 PM		✓		✓	✓		✓	
3	12/18	2:30 PM		✓		✓	✓		✓	
4	12/18	2:30 PM		✓		✓	✓		✓	
5	12/18	3:30 PM		✓		✓	✓		✓	
6	12/18	3:30 PM		✓		✓	✓		✓	
7	12/18	4:30 PM	✓			✓	✓		✓	

Receipt for the sample(s) described above is hereby acknowledged:

Receipt/rejection of duplicate or split samples is hereby acknowledged:

Lenox E. Bramble  
 Signature of Inspector  
Environmental Engineer  
 Title

Ralph J. Amalte  
 Signature of Firm Owner, Operator, or Ag  
V.P. GEN. MGR  
 Title

COMMENTS

APPENDIX C

MISCELLANEOUS INFORMATION



# Toastmaster Inc.

P.O. Box 1609 Laurinburg, North Carolina 28352 919 276 3101

September 13, 1984



Mr. Lenox E. Bramble  
Environmental Engineer  
Environmental Health Section  
Solid & Hazardous Waste Management Branch  
Division of Health Services  
P. O. Box 2091  
Raleigh, N. C. 27602-2091

Dear Mr. Bramble:

The following information is provided as requested in your letter of August 27, 1984.

Electroplating operations have been conducted at this plant since 1959 (with the exception of the years 1970 through 1974). Attachment 1, hereto, gives a general description of the waste water treatment system and procedures in effect prior to closure of our lagoons and the sand filter bed in August, 1983. Attachment 2 describes the system and operation subsequent to this closure. All hexavalent chrome present in waste waters was converted to trivalent state during treatment. Burial of treated sludge on-site was minimal from 1977 until discontinued (prior to November 19, 1980), due primarily to utilization of rinse waters as make-up water for the chrome and nickle plating baths. All sludge has been shipped to SCA Services, Pinewood, S. C., since. Copies of our annual reports on hazardous waste generation and disposal for the years 1981, 1982, and 1983 are Attachment 3.

Attachment 4 shows the location and depth of five ground water sampling wells, and copies of analysis reports of samples from these

wells is Attachment 5.

Site operation has continued under the same management since 1959 although corporate management has changed as follows:

1959 - 1968	Ingraham Co.	Bristol, Conn.
1968 - 1980	McGraw Edison Co.	Elgin, Ill.
1980 - 1983	Toastmaster Inc.	Columbia, Mo.
1983 - Present	Magic Chef	Cleveland, Tenn.

Both Jerry Rhodes and Terry Dover of your organization are familiar with our site and operations.

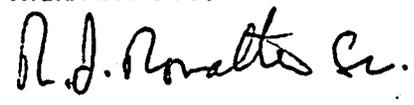
27801-20911

Please advise if additional information is required.

Dear Mr. Bramble:

Sincerely yours,

TOASTMASTER INC.  
INGRAHAM DIV.



R.J. Ronalter, Sr.  
Vice-Pres. & Gen. Mgr.

Following information is provided to you for your information only. This information is confidential and is not to be distributed outside your organization.

The following information is provided to you for your information only. This information is confidential and is not to be distributed outside your organization.

herein gives a general description of the site and operations. The information is confidential and is not to be distributed outside your organization.

**Attachments**

Attachment 1 is a copy of the site plan as of August, 1983. Attachment 2 is a copy of the site plan as of August, 1983. Attachment 3 is a copy of the site plan as of August, 1983. Attachment 4 is a copy of the site plan as of August, 1983. Attachment 5 is a copy of the site plan as of August, 1983.

Attachment 6 shows the location and depth of the wells. Attachment 7 shows the location and depth of the wells. Attachment 8 shows the location and depth of the wells. Attachment 9 shows the location and depth of the wells. Attachment 10 shows the location and depth of the wells.

Attachment 11 shows the location and depth of the wells. Attachment 12 shows the location and depth of the wells. Attachment 13 shows the location and depth of the wells. Attachment 14 shows the location and depth of the wells. Attachment 15 shows the location and depth of the wells.

Attachment 16 shows the location and depth of the wells. Attachment 17 shows the location and depth of the wells. Attachment 18 shows the location and depth of the wells. Attachment 19 shows the location and depth of the wells. Attachment 20 shows the location and depth of the wells.

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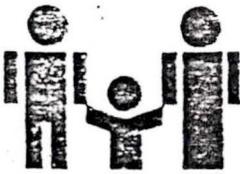
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Ronald H. Levine, M.D., M.P.H.  
STATE HEALTH DIRECTOR

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

June 25, 1984

Mr. Ralph J. Ronalter, V. P. & Gen. Mgr.  
Toastmaster, Inc.  
P.O. Box 1609  
Laurinburg, N. C. 28352

Dear Mr. Ronalter:

Subject: Groundwater Monitoring

This office is in receipt of the April 18, 1984, groundwater analyses. The results indicate that the nickel and cyanide concentrations in the groundwater have increased. In order to substantiate these results, another set of groundwater samples should be collected and analyzed by July 20, 1984. These samples (from wells 1-5) should be analyzed for cyanide and nickel. Copies of the results should be submitted to this office within 15 days of receipt from the laboratory.

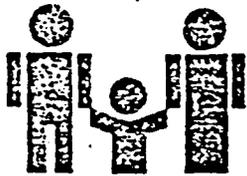
If there are any questions, please call Jerry Rhodes at (919) 733-2178.

Sincerely,

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

RLG:ct

cc: Flint Worrell



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

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

November 7, 1983

Mr. Ralph J. Ronalter  
Toastmaster, Inc.  
P.O. Box 1609  
Laurinburg, NC 28352

Dear Mr. Ronalter:

Closure certification for the surface impoundments at the Toastmaster, Inc. Laurinburg Plant, EPA ID #NCD037160439, have been received in this office. Certification was by yourself, Mr. Sam R. Noble, Jr., P.E. with Koonce, Noble and Associates, Inc., and Mr. Richard L. Gay, Waste Management Specialist from this branch. This completes closure for these surface impoundments.

One set of well-water samples are to be collected about April 3, 1984 and analyzed for the same constituents that were tested in October, 1983. However, results must be reported at a level sufficient for comparison to primary drinking water standards.

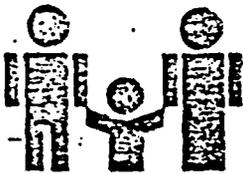
The RCRA classification for Toastmaster will now change to that of a small generator. Therefore, financial assurance for closure and liability insurance will no longer be required.

Sincerely,

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

OWS:nlc

cc: Mr. Richard Gay  
Mr. Glenn Dunn



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

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

Date: November 7, 1983

Mr. Ralph J. Ronalter  
Toastmaster, Inc.  
P.O. Box 1609  
Laurinburg, NC 28352

Re: Facility ID No. NCD037160439

Dear Mr. Ronalter:

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 checked="" type="checkbox"/>	generator
<input type="checkbox"/>	<input type="checkbox"/>	transporter
<input type="checkbox"/>	<input checked="" type="checkbox"/>	treater
<input type="checkbox"/>	<input checked="" type="checkbox"/>	storer
<input type="checkbox"/>	<input checked="" type="checkbox"/>	disposer

The OWS classification for Toastmaster is  small generator  to that of a small generator. Therefore, financial assistance to that of a small generator. We are advising EPA of the changes 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:nlc

cc: Mr. Edward Gay  
Mr. Glenn Dunn

cc: Doug McCurry  
EPA Region IV  
Emil Breckling

KOONCE, NOBLE & ASSOCIATES, Inc.  
CONSULTING ENGINEERS

November 2, 1983



Mr. O. W. Strickland, Head  
Solid Hazardous Waste Management Branch  
Environmental Health Section  
North Carolina Division of Health Services  
Post Office Box 2091  
Raleigh, North Carolina 27602-2091

Attention Mr. Jerry Rhodes

Dear Sir:

RE: Closure Plan for Primary Lagoon, Filter Bed, and Secondary Lagoon, Toastmaster, Inc., Laurinburg, North Carolina

The purpose of this letter is to certify that on October 31, 1983, a final inspection was held on the above-referenced project. As of that date, the primary lagoon and sand filter had been closed in accordance with the specifications in the closure plan as approved in your letter of May 23, 1983. The certification is expanded to also include the secondary lagoon which was closed in accordance with an agreed to modification of the closure plan.

Well water samples were collected October 3, 1983, and are to be collected again in six months.

Sincerely,

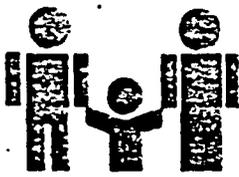
KOONCE, NOBLE & ASSOC., INC.

A handwritten signature in cursive script that reads "Sam R. Noble, Jr.".

Sam R. Noble, Jr., P. E.

SRNjr/ftf

cc: Mr. Richard Page



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

DIVISION OF HEALTH SERVICES  
SOUTH CENTRAL REGIONAL OFFICE  
Wachovia Bank Bldg. - Suite 506  
225 Green Street  
Fayetteville, N.C. 28301  
(919) 486-1191



October 31, 1983

Mr. O. W. Strickland, Head  
Solid & Hazardous Waste Management Branch  
Environmental Health Section  
Division of Health Services  
PO Box 2091  
Raleigh, NC 27602

Dear Mr. Strickland:

On October 3, 1983 and October 27, 1983, inspections were made at Toastmaster, Inc. in Laurinburg, N. C. to determine compliance with their closure plan for the primary surface impoundment used in electroplating operations. All samples outlined in the closure plan had been collected and analyses received at the time of the October 30, 1983 inspection. It appears the surface lagoon has been closed in accordance with the closure plan approved by our office.

A sludge filter press is in place and in operation. The present facility operation eliminates the need for the surface impoundment.

If you have questions regarding closure of Toastmaster's surface impoundment, please call.

Sincerely,

Sincerely,

Richard L. Gay  
Waste Management Specialist  
Solid & Hazardous Waste Management Branch  
Environmental Health Section

RLG/ps



# Toastmaster Inc.

P.O. Box 1609 Laurinburg, North Carolina 28352 919 276 3101

October 14, 1983 -



Mr. O. W. Strickland, Head  
Solid & Hazardous Waste Management Branch  
Environmental Health Section  
North Carolina Division of Health Services  
P. O. Box 2091  
Raleigh, N. C. 27602-2091

ATTEN: Jerry Rhodes

Dear Sir:

This is to certify that the primary lagoon and sand filter have been closed in accordance with the specifications in the closure plan as approved in your letter of May 23, 1983.

With the direction and assistance of Richard Gay, of your office, samples were collected as recommended in your letter of June 29, 1983, and analyzed. The results of these analyses and the requested special analysis of a sample of sand remaining in the filter bed are attachment 1 and 2 hereto.

Shipment and disposal of 181.6 tons of material by SCA Services, Pinewood, S. C., was accomplished in seven shipments, manifests for which are attachments 3 through 9. Final shipment was completed on August 30, 1983.

Cost Summary:

SCA Services container rental, transportation, tax, & disposal	\$ 17,326.00
Contractor labor and equipment	1,136.00
Toastmaster labor and overhead	4,160.00
Grainger Labs. testing and analysis	2,400.00
Other-P. E. Services, equip. rental & transp., grading (est.)	<u>800.00</u>
<b>Total</b>	<b>\$ 25,822.00</b>

Richard Gay visited our plant on September 30, 1983, and we discussed the advantages of including closure of the secondary lagoon as part of the present effort, if analysis of soil samples would show that this area could also be satisfactorily closed. He agreed and directed and assisted in the proper collection of samples. Analysis of these samples are attachment 10 hereto. In light of these results, we expand our certification to state that the secondary lagoon has also been closed in accordance with an agreed-



 **Toastmaster Inc.**

P.O. Box 1609 Laurinburg, North Carolina 28352 919 276 3101

May 18, 1983



Mr. O. W. Strickland, Head  
Solid & Hazardous Waste Management Branch  
Environmental Health Section  
North Carolina Division of Health Services  
P. O. Box 2091  
Raleigh, N. C. 27602-2091

ATTEN: Jerry Rhodes

Dear Sir:

The attached Closure Plan for the Primary Lagoon and Sand Filter has been revised as requested in your letter of May 2, 1983.

Since our NPDES Permit has subsequently been renewed, a copy of the permit now replaces the draft copy originally attached to our plan.

Sincerely yours,

TOASTMASTER INC.  
INGRAHAM, TIME PRODUCTS DIVISION

  
Ralph J. Ronalter  
Vice President, General Manager

RJR:mn

Enclosure

1000

CLOSURE PLAN FOR SURFACE IMPOUNDMENTS IN WHICH WASTES ARE REMOVED AT CLOSURE

EPA Facility I. D. No. NC. D.037160439

Owner/Operator Toastmaster, Inc.  
P. O. Box 1609  
Old Laurel Hill Church Road  
Laurinburg, N. C. 28352  
Phone: (919) 276-3101

I. Facility conditions

A. General information

This plan includes two impoundments (see attached ref. map)

1. Primary lagoon

Size: 50' X 80' X 5' Deep

Volume: 150,000 Gals.

Use: Impoundment of treated electroplating waste water effluent.

2. Filter bed

Size: 20' X 40' X 3' Deep

Use: Separation of sludge from effluent for treated electroplating waste water & drying of sludge.

Note: Although an NPDES permit has been issued, no releases under this permit have been required since 1978 due to controlled restrictions on the amount of waste water generated. The most recent renewal of this permit was effective April 20, 1983.

Since a copy attached.

B. Schedule of final closure

INSPECTION, TIME PRODUCTS DIVISION

1. Final date wastes accepted: Jan. 15, 1983

2. Date all treatment completed: Jan. 15, 1983

3. Date all free liquids removed: (Est.) June, 1983

4. Date all sludges removed: July, 1983

5. Final date of completed closure: Aug. 31, 1983

6. Total time required to close facility: 6 months

II. Removing all inventory

A. Maximum amount of waste on site: (Est.) 140 Cu. Yds.

1. Bulk waste: 140 cu. yds.

2. Maximum quantity of liquid in impoundment: (Est.) -0- evaporated.  
(If evaporation is not sufficient, remaining liquid will be re-treated as required to meet approved release specification under NPDES permit or necessary approval be obtained for disposal in an approved facility.)

3. Maximum quantity of sludge in impoundment: (Est.) 50 cu. yds.

B. Removing sludge

1. Volume of sludge to be removed: (Est.) 50 cu. yds.
2. Method for removing sludge & residuals:  
 Using both equipment & labor on-site & contractor furnished, an estimated three inch depth of dried sludge & soil (sand in the case of the filter bed) will be stripped and loaded for shipment in sealed & covered trucks or into approved one cubic yard plastic containers, followed by stripping of contaminated soil (est. 6 inches) until soil appears uncontaminated. Core samples will be analyzed for level of chromium, cadmium, and nickel (when samples measure less than 20 ppm nickel in leachate. Other contaminants should be well below specified limits.) All material removed will be shipped (either bulk or in approved containers) for disposal in an approved facility (SCA, Pinewood, S. C. - distance approximately 113 miles).

III. Decontamination

All equipment used will be brushed clean of residue, scrubbed and rinsed. Residue (including liquid combined with bulking agent), estimated two cubic yards, will be disposed of in the same manner as other inventory in Section II. Estimate of equipment to be used is a powered barrow, hand tools, shovels, etc., and possibly a backhoe. Owner/operator labor will be primarily used with possibly some contracted labor to operate contracted equipment.

IV. Ground water monitoring

After completion of stripping & decontamination of equipment & determination that all contamination has been removed to the required level, the ground water sampling (see attached report for analysis of samples in December, 1982) and analysis will be repeated. One additional sampling and analysis of ground water will be made six months after soil removal to verify water quality.

V. Closure certification

Concurrent with in-house sampling & analysis, the services of a qualified registered professional engineer will be utilized to inspect the completed work. Core samples, well samples & analyses will be provided as required for closure certification. Estimate one preliminary & one final inspection of the site. Certification by owner/operator and the independent registered professional engineer that the facility has been closed in accordance with the specifications in the approved closure plan will be submitted to the Solid & Hazardous Waste Management Branch, Division of Health Services.

VI. Costs

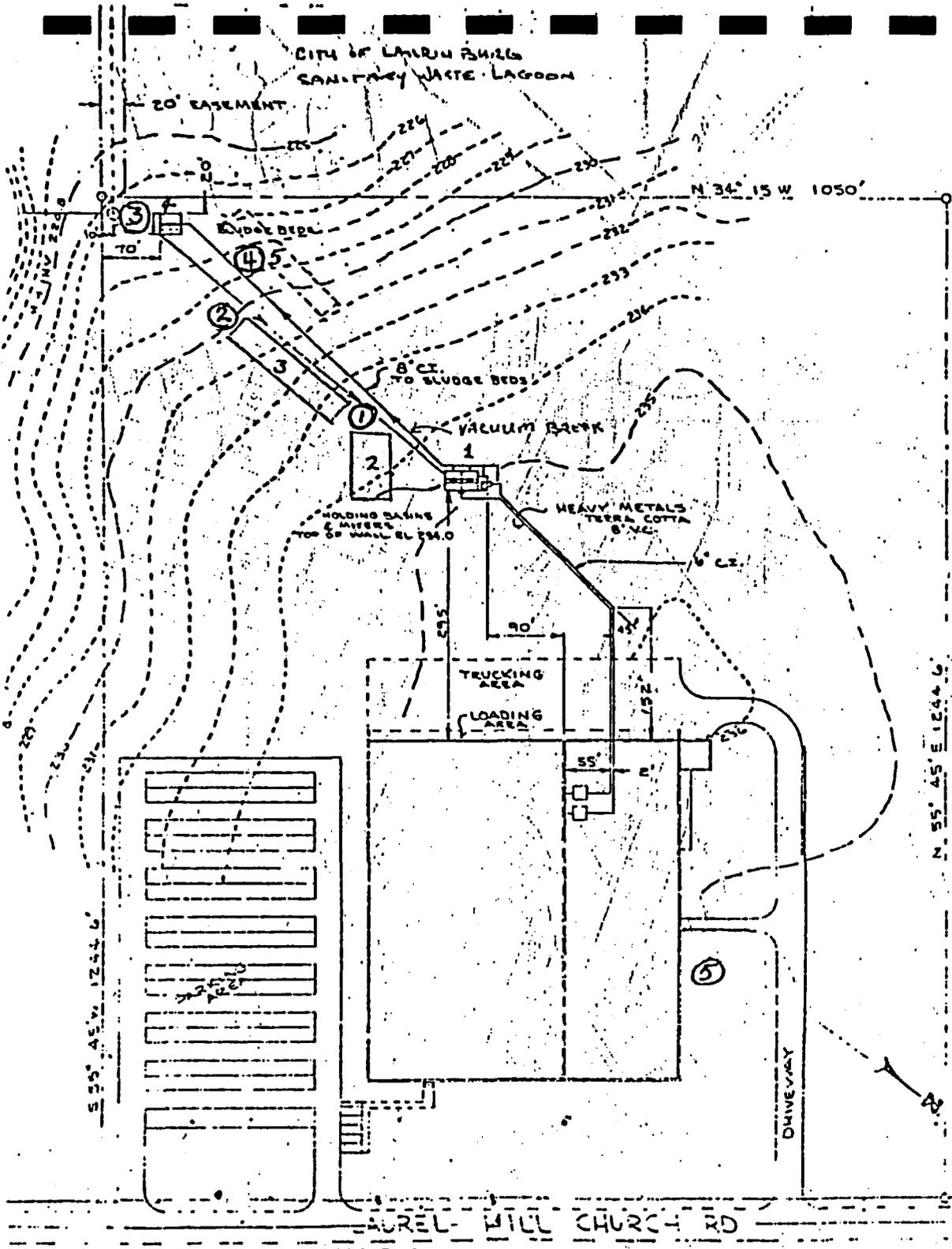
	sludge waste: 140 cu. yds.	
	minimum quantity of sludge in imp.	
(SCA)	Disposal 140 cu. yds. X 1 ton X \$70/ton	\$ 9,800.
	located as required to Cup Ydepr...	
(SCA)	Transp: 7 truckloads X 113 mi. X \$3.78/mi.	3,000.
	Labor & equipment	5,400.
	Containers superbags 140 @ \$20.	2,800.
	Professional engineering services	1,000.
		<hr/>
	TOTAL	\$ 22,000.

CITY OF LAURINBURG  
SANITARY WASTE LAGOON

 **Toastmaster Inc.**

 Ingram  
Since 1911

Time Products Division  
Laurinburg, N.C. 28355



1. Waste Treatment Tanks - 2 @ 15,000 Gal. Each (Security Fenced)      2 @ 3,000 Gal. Each
2. Lagoon (Primary) For Holding Treated Supernate (Overflow Drain Is Permanently Deactivated.) (Security Fenced.)  
50 Ft. X 80 Ft. X 5 Ft. Deep
3. Standby Lagoon For Temporary Retention Of Treated Supernate When Cleaning Primary Lagoon  
30 Ft. X 170 Ft. X 5 Ft.
4. Filter Beds - 2 - 20 Ft. X 20 Ft. With Sump Pump For Returning Supernate To Treatment 1 (Drain Line Is Permanently Deactivated.) (Security Fenced)
5. Burial Area, Stabilized And Dried Sludge.

GROUNDWATER WELLS

<u>WELL No.</u>	<u>DEPTH</u>
①	24.6 FT.
②	30.0 FT.
③	19.5 FT.
④	18.0 FT.
⑤	25.0 FT. (REFERENCE)

 **Toaster Inc.**

P. O. Box 1664 Laurinburg, North Carolina 28352 919 276 3101

August 12, 1981

Mr. Dennis R. Ramsey, Regional Supervisor  
N. C. Department of Natural Resources and  
Community Development  
Fayetteville Regional Office  
Wachovia Building, Suite 714  
Fayetteville, North Carolina 28301

Dear Mr. Ramsey,

This is to provide the information as requested in your letter of May 18, 1981.

We estimate we are presently generating 500 kilograms of stabilized and dried sludge from our electroplating water waste treatment facility per calendar month. The following are the treatment procedure steps which are normally applied to approximately 15,000 gallons of waste water:

- a. pH is dropped to 2-2.5 with sulfuric acid.
- b. Sodium Bisulfite is added to convert hexavalent chrome to its trivalent state.
- c. Mixed for 30 minutes.
- d. Checked with comparator (Hach Co.) for no hexavalent chrome residual.
- e. pH raised to 8.5 to precipitate out metals.
- f. Retained a minimum of 24 hours for settling.
- g. Final pH checked.
- h. Supernate pumped to primary lagoon.
- i. Sludge pumped to sand filter beds.
- j. Supernate filtered from sludge is returned from filter sump to treatment tanks or primary lagoon.

In the past, the stabilized and thoroughly dried sludge has been removed from the filter bed and buried on-site in pre-prepared trenches. Attached hereto is

 **Toaster Inc.**

P. O. Box 1669 Laurinburg, North Carolina 28352 919 276 3101

August 12, 1981

Mr. Dennis R. Ramsey, Regional Supervisor  
N. C. Department of Natural Resources and  
Community Development  
Fayetteville Regional Office  
Wachovia Building, Suite 714  
Fayetteville, North Carolina 28301

Dear Mr. Ramsey,

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- e. pH raised to 8.5 to precipitate out metals.
- f. Retained a minimum of 24 hours for settling.
- g. Final pH checked.
- h. Supernate pumped to primary lagoon.
- i. Sludge pumped to sand filter beds.
- j. Supernate filtered from sludge is returned from filter sump to treatment tanks or primary lagoon.

In the past, the stabilized and thoroughly dried sludge has been removed from the filter bed and buried on-site in pre-prepared trenches. Attached hereto is

page 2  
Mr. Ramsey  
8/12/81

a site plan delineating location of burial site and elements of the waste treatment system. (attachment 1)

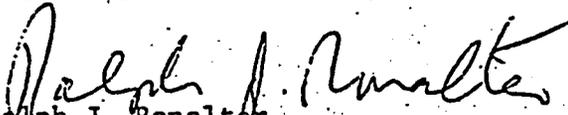
In July 1979 we determined the feasibility of disposal of electroplating waste water sludge by utilization of S. C. SCA Services, Inc., Pinewood, South Carolina and obtained approval from the South Carolina Department of Health and Environmental Control (attachment 2) for disposal of 1600 cubic feet of treatment waste water sludge per year by that means. We have updated our contact with SCA Services (attachment 3) as an alternate to on-site burial and will hereinafter plan to dispose of our stabilized sludge through that facility.

The volume of the primary lagoon is approximately 150,000 gallons and it is presently approximately one-third full. The volume of the secondary lagoon is 190,000 gallons. The secondary lagoon is presently empty. Lagooning and on-site burial have been employed since 1959 (during the years 1970-1974, nickel and chromium electroplating operations were not conducted).

I trust our letter of May 26, 1981 to you clarified the status of our request for renewal of Permit No. N. C. 0005053 and that the information provided herein complies fully with your request of May 18, 1981.

Sincerely,

TOASTMASTER, INC.  
Ingraham, Time Products Division

  
Ralph J. Ronalter  
Vice President, General Manager

RJR:gl

enclosures

APPENDIX D

PRELIMINARY ASSESSMENT







POTENTIAL HAZARDOUS WASTE SITE  
PRELIMINARY ASSESSMENT  
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION  
01 STATE: NC 02 SITE NUMBER: D037160439

II. HAZARDOUS CONDITIONS AND INCIDENTS

01  A. GROUNDWATER CONTAMINATION 02  OBSERVED (DATE: \_\_\_\_\_)  POTENTIAL  ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_ 04 NARRATIVE DESCRIPTION

Monitoring wells showed low levels of contaminaton since installation. Levels of nickel and cyanide have actually increased slightly.

01  B. SURFACE WATER CONTAMINATION 02  OBSERVED (DATE: \_\_\_\_\_)  POTENTIAL  ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_ 04 NARRATIVE DESCRIPTION

Possible leaching of contaminants into Leith Creek.

01  C. CONTAMINATION OF AIR 02  OBSERVED (DATE: \_\_\_\_\_)  POTENTIAL  ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_ 04 NARRATIVE DESCRIPTION

Not suspected at this time.

01  D. FIRE/EXPLOSIVE CONDITIONS 02  OBSERVED (DATE: \_\_\_\_\_)  POTENTIAL  ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_ 04 NARRATIVE DESCRIPTION

Not suspected at this time.

01  E. DIRECT CONTACT 02  OBSERVED (DATE: \_\_\_\_\_)  POTENTIAL  ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_ 04 NARRATIVE DESCRIPTION

If levels of contamination in closed out lagoon and filter bed areas remain sufficiently high

01  F. CONTAMINATION OF SOIL 02  OBSERVED (DATE: \_\_\_\_\_)  POTENTIAL  ALLEGED  
03 AREA POTENTIALLY AFFECTED: \_\_\_\_\_ (Acres) 04 NARRATIVE DESCRIPTION

Shown via sampling of soil from closed lagoons and filter bed.

01  G. DRINKING WATER CONTAMINATION 02  OBSERVED (DATE: \_\_\_\_\_)  POTENTIAL  ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_ 04 NARRATIVE DESCRIPTION

Potential exist although there are no known surface water supplies downstream and no downgradient wells. Nearest wells sampled for Rea Magnet Site Inspection ( /84) showed no contamination.

01  H. WORKER EXPOSURE/INJURY 02  OBSERVED (DATE: \_\_\_\_\_)  POTENTIAL  ALLEGED  
03 WORKERS POTENTIALLY AFFECTED: \_\_\_\_\_ 04 NARRATIVE DESCRIPTION

If existing levels of contaminaton are high enough.

01  I. POPULATION EXPOSURE/INJURY 02  OBSERVED (DATE: \_\_\_\_\_)  POTENTIAL  ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_ 04 NARRATIVE DESCRIPTION

Not suspected at this time.



POTENTIAL HAZARDOUS WASTE SITE  
PRELIMINARY ASSESSMENT

PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER  
NC D037160439

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01  J. DAMAGE TO FLORA  
04 NARRATIVE DESCRIPTION

02  OBSERVED (DATE: \_\_\_\_\_)  POTENTIAL  ALLEGED

Not suspected at this time.

01  K. DAMAGE TO FAUNA  
04 NARRATIVE DESCRIPTION (include name(s) of species)

02  OBSERVED (DATE: \_\_\_\_\_)  POTENTIAL  ALLEGED

Not suspected at this time

01  L. CONTAMINATION OF FOOD CHAIN  
04 NARRATIVE DESCRIPTION

02  OBSERVED (DATE: \_\_\_\_\_)  POTENTIAL  ALLEGED

Not suspected at this time.

01  M. UNSTABLE CONTAINMENT OF WASTES  
(Soils/runoff/leaking liquids/leaking drums)  
03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_ 04 NARRATIVE DESCRIPTION

02  OBSERVED (DATE: \_\_\_\_\_)  POTENTIAL  ALLEGED

Closed out lagoons, filter bed, and burial trenches are unlined although monitoring wells are installed.

01  N. DAMAGE TO OFFSITE PROPERTY  
04 NARRATIVE DESCRIPTION

02  OBSERVED (DATE: \_\_\_\_\_)  POTENTIAL  ALLEGED

Not suspected at this time  
Most likely via groundwater contaminaton

01  O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs  
04 NARRATIVE DESCRIPTION

02  OBSERVED (DATE: \_\_\_\_\_)  POTENTIAL  ALLEGED

Not suspected at this time.

01  P. ILLEGAL/UNAUTHORIZED DUMPING  
04 NARRATIVE DESCRIPTION

02  OBSERVED (DATE: \_\_\_\_\_)  POTENTIAL  ALLEGED

N/A

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

None suspected at this time.

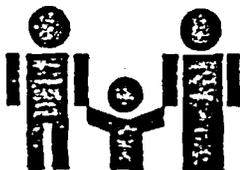
III. TOTAL POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_

IV. COMMENTS

Recommend a site inspection to access extent of groundwater, surface water, sediment, and soil contamination. Although there is presently no reason to suspect contamination of water supply sources, a site inspection should give a better idea of this threat.

V. SOURCES OF INFORMATION (Cite specific references, e. g., state files, sample analysis, reports)

See Part 2, Section VI.



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

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

January 2, 1985

Ms. Denise Bland  
EPA NC 3012 Project Officer  
Air & Hazardous Material Division  
345 Courtland St., NE  
Atlanta, Ga. 30365

Dear Ms. Bland:

Enclosed are Preliminary Assessments for the following ERRIS sites in North Carolina:

1. Diamond Shamrock Corporation  
Castle Hayne  
NC D057454670
2. Dow Chemical Corporation  
Charlotte  
NC D074518671
3. General Tire & Rubber Company  
Charlotte  
NC D043679349
4. Kelly-Springfield Tire Company  
Fayetteville  
NC D048958615
5. Koppers Company, Inc.  
Morrisville  
NC D003200383
6. Toastmaster, Inc.  
Laurinburg  
NC D037160439
7. Uniroyal Inc./Uniroyal Chemical Division  
Gastonia  
NC D003164464
8. Whittaker Chemical Company  
Lenoir  
NC D039058524

Diamond Shamrock Corporation was entered into ERRIS due to a RCRA 3001 notification for storage of spent pickle liquor, lead, and chromium, treatment

Ms. Denise Bland  
January 2, 1985  
Page 2

of spent pickle liquor and chromium and disposal of chromium. An on-site lagoon has received process waste-water and waste-water treatment plant sludge for some time. A spillage of an estimated 1072 tons of chromic acid and sodium bichromate occurred in 1974. The North Carolina Department of Natural Resources and Community Development monitors remedial actions to recover this chromium contamination with approximately 857 tons being recovered through a series of at least 24 recovery wells. A low priority for site inspection is recommended in order to evaluate the possibility of contamination in the lagoon and at the location of the chromic acid/sodium bichromate spill.

Dow Chemical Corporation was entered into ERRIS due to its inclusion on the Eckhardt Waste Disposal Site Survey. This site, according to Dow, was nothing more than a sales facility. No storage or disposal activities occurred at this site. Dow moved from this site on August 3, 1984 to 5727 Westpark Drive in Charlotte. No further action is recommended for this site based on current information.

General Tire & Rubber Company was entered into ERRIS due to a RCRA 3001 notification for storage of halogenated solvents (1-1-1 trichloroethane), heavy metals (chromium and lead), thiram, toluene, and asbestos. All was drummed except for chromium and lead which was stored in waste piles for a period of time. A low priority for site inspection is recommended in order to evaluate the presence of contaminants in the drum storage, waste pile, and evaporation drum areas.

Kelly-Springfield Tire Company was entered into ERRIS due to a RCRA 3001 notification for storage of methylene chloride, thiram, and N-nitrosodiphenylamine. Kelly also informed this office of the transportation of PCB materials from several transformer cleanups and of the transportation of 1-1-1 trichloroethane. According to Kelly officials, all spills were of small quantity and were adequately cleaned up, containerized, and shipped to a hazardous waste disposal facility. Several employees, however, have indicated that either Kelly-Springfield or its industrial maintenance contractor, Defender, have disposed of cleaning fluids on-site. Due to the relatively small quantities of known hazardous materials utilized at this site and the low potential for contamination of public water supplies, a low priority for site inspection is recommended to assess the possibility of any on-site contamination.

Koppers Company was entered into ERRIS due to a CERCLA 103 (c) notification for land treatment of organic wastes (in 1978) and for an on-site surface impoundment. Wood treatment using pentachlorophenol (PCP) occurred at this site from 1968 to 1975. Waste materials such as bark, saw dust, and excess PCP were dumped into pits for disposal. According to an EPA site investigation report (dated January 27, 1981) waste piles and disposal pits were still present on-site on September 24, 1980. Koppers removed approximately 220 tons of contaminated soil in April, May, and November of 1980, shipping it to SCA. A hydrogeologic investigation by Koppers (11/13/84) indicated pentachlorophenol contamination in seven on-site wells. Due to the existence of private groundwater supply wells in the immediate vicinity a medium priority for site inspection is recommended for this site.

Ms. Denise Bland  
January 2, 1985  
Page 3

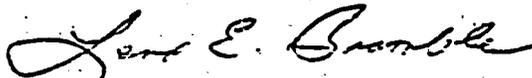
Toastmaster was entered into ERRIS due to a RCRA 3001 notification for treatment and storage of chromium and wastewater treatment sludges from electroplating operations. Possible or suspected contaminants are chromium, hexavalent chromium, cadmium, nickel, cyanide, 1-1-1 trichloroethane, and trichloroethylene. Areas of most concern are the closed out primary and secondary lagoons, closed out sand filter bed, and the existing sludge burial trenches. Monitoring wells at this site show low levels of nickel and cyanide (0.3 MG/L and 0.08 MG/L respectively). A medium priority for site inspection was assigned to this site based on the potential problems at this facility and the existence of private water supply wells in the immediate vicinity. A site inspection was conducted at this facility December 18, 1984. The site inspection report will be forwarded to EPA/Region IV upon completion.

Uniroyal Inc./Uniroyal Chemical Division was entered into ERRIS due to a RCRA 3001 notification for storage of various hazardous materials in drums or waste piles. Thiram, maleic hydrazide, and phthalic anhydride were stored in waste piles. Substances containerized are acetone, chloroform, formaldehyde, methanol, 1-naphthylamine, toluene diisocyanate, xylene, pyridine, methyl ethyl ketone, and Z-sec-butyl-4,6-dinitrophenol. A low priority for site inspection has been assigned to this site to assess the likelihood of soil contamination in the drum storage and waste pile areas.

Whittaker Chemical Company was entered into ERRIS due to a RCRA 3001 notification for storage of spent non-halogenated solvents, and storage of solvent and water cleaning wastes from paint manufacturing. This notification is a duplication of Reliance Universal of Kentucky (NC D053009510). A low priority for site inspection is recommended for this site to assess the effectiveness of remedial actions at this site.

If you have any questions, please contact me at (919) 733-2178.

Sincerely,



Lenox E. Bramble, Environmental Engineer  
Solid and Hazardous Waste Management Branch  
Environmental Health Section

LEB/lw/1706  
Enclosures

APPENDIX E

COMPLETED SITE INSPECTION FORM (2070-13)



**POTENTIAL HAZARDOUS WASTE SITE  
SITE INSPECTION REPORT  
PART 1 - SITE LOCATION AND INSPECTION INFORMATION**

**I. IDENTIFICATION**

01 STATE: NC 02 SITE NUMBER: D037160439

**II. SITE NAME AND LOCATION**

01 SITE NAME (Legal, common, or descriptive name of site) <u>Toastmaster, Inc.</u>		02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER <u>Old Laurel Hill Church Road</u>			
03 CITY <u>Laurinburg</u>		04 STATE <u>NC</u>	05 ZIP CODE <u>28352</u>	06 COUNTY <u>Scotland</u>	07 COUNTY CODE <u>83</u>
09 COORDINATES LATITUDE <u>34 48 10</u>		LONGITUDE <u>079 27 42</u>		10 TYPE OF OWNERSHIP (Check one) <input checked="" type="checkbox"/> A. PRIVATE <input type="checkbox"/> B. FEDERAL <input type="checkbox"/> C. STATE <input type="checkbox"/> D. COUNTY <input type="checkbox"/> E. MUNICIPAL <input type="checkbox"/> F. OTHER <input type="checkbox"/> G. UNKNOWN	

**III. INSPECTION INFORMATION**

01 DATE OF INSPECTION <u>12 / 18 / 84</u> MONTH DAY YEAR	02 SITE STATUS <input checked="" type="checkbox"/> ACTIVE <input type="checkbox"/> INACTIVE	03 YEARS OF OPERATION (on-site TSD activity ceased August 1983) <u>1959</u>   <u>    </u>   <u>    </u> BEGINNING YEAR ENDING YEAR UNKNOWN	
04 AGENCY PERFORMING INSPECTION (Check all that apply) <input type="checkbox"/> A. EPA <input type="checkbox"/> B. EPA CONTRACTOR <input type="checkbox"/> C. MUNICIPAL <input type="checkbox"/> D. MUNICIPAL CONTRACTOR <input checked="" type="checkbox"/> E. STATE <input type="checkbox"/> F. STATE CONTRACTOR <input type="checkbox"/> G. OTHER			

05 CHIEF INSPECTOR <u>Ien Bramble</u>	06 TITLE <u>Envir. Engineer</u>	07 ORGANIZATION <u>NC DHR/DHS</u>	08 TELEPHONE NO. <u>919 733-2178</u>
09 OTHER INSPECTORS <u>Mark Durway</u>	10 TITLE <u>Geologist</u>	11 ORGANIZATION <u>NC DHR/DHS</u>	12 TELEPHONE NO. <u>919 733-2178</u>
			( )
			( )
			( )
			( )

13 SITE REPRESENTATIVES INTERVIEWED <u>Ralph J. Ronalter, VP &amp; GM</u>	14 TITLE <u>V.P., Gen. Mgr.</u>	15 ADDRESS <u>Toastmaster, Laurinburg</u>	16 TELEPHONE NO. <u>919 276-3101</u>
<u>Frankie Ciandella, Chem.</u>		<u>Toastmaster, Laurinburg</u>	<u>919 276-3101</u>
<u>Richard Page</u>		<u>Toastmaster, Laurinburg</u>	<u>919 276-3101</u>
<u>L.J. Watts</u>		<u>Toastmaster, Laurinburg</u>	<u>919 276-3101</u>
			( )
			( )

17 ACCESS GAINED BY (Check one) <input checked="" type="checkbox"/> PERMISSION <input type="checkbox"/> WARRANT	18 TIME OF INSPECTION <u>1200-1600</u>	19 WEATHER CONDITIONS <u>Partly cloudy, About 65 Degrees F</u>
---	---	---

**IV. INFORMATION AVAILABLE FROM**

01 CONTACT <u>Ralph J. Ronalter</u>	02 OF (Agency/Organization) <u>Toastmaster, Laurinburg</u>	03 TELEPHONE NO. <u>919 276-3101</u>
04 PERSON RESPONSIBLE FOR SITE INSPECTION FORM <u>Ien Bramble</u>	05 AGENCY <u>NC DHR/DHS</u>	06 ORGANIZATION <u>SHW Mgmt. Br.</u>
	07 TELEPHONE NO. <u>(919) 733-2178</u>	08 DATE <u>03 / 29 / 85</u> MONTH DAY YEAR



POTENTIAL HAZARDOUS WASTE SITE  
SITE INSPECTION REPORT  
PART 2 - WASTE INFORMATION

I. IDENTIFICATION  
01 STATE NC 02 SITE NUMBER D037160439

II. WASTE STATES, QUANTITIES, AND CHARACTERISTICS

01 PHYSICAL STATES (Check all that apply) <input type="checkbox"/> A. SOLID <input type="checkbox"/> B. POWDER, FINES <input checked="" type="checkbox"/> C. SLUDGE <input type="checkbox"/> D. OTHER (Specify) _____ <input type="checkbox"/> E. SLURRY <input checked="" type="checkbox"/> F. LIQUID <input type="checkbox"/> G. GAS	02 WASTE QUANTITY AT SITE (Measures of waste quantities must be independent) TONS _____ CUBIC YARDS <u>Unknown</u> NO. OF DRUMS _____	03 WASTE CHARACTERISTICS (Check all that apply) <input checked="" type="checkbox"/> A. TOXIC <input type="checkbox"/> B. CORROSIVE <input type="checkbox"/> C. RADIOACTIVE <input type="checkbox"/> D. PERSISTENT <input checked="" type="checkbox"/> E. SOLUBLE <input type="checkbox"/> F. INFECTIOUS <input type="checkbox"/> G. FLAMMABLE <input type="checkbox"/> H. IGNITABLE <input type="checkbox"/> I. HIGHLY VOLATILE <input type="checkbox"/> J. EXPLOSIVE <input type="checkbox"/> K. REACTIVE <input type="checkbox"/> L. INCOMPATIBLE <input type="checkbox"/> M. NOT APPLICABLE
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III. WASTE TYPE

CATEGORY	SUBSTANCE NAME	01 GROSS AMOUNT	02 UNIT OF MEASURE	03 COMMENTS
SLU	SLUDGE	Unknown		Electroplating sludge was treated on-site; treatment system utilized unlined surface impoundments and filter beds. From 1977 to 1980, treated electroplating sludge was disposed in on-site burial trenches.
OLW	OILY WASTE			
SOL	SOLVENTS	Unknown		
PSQ	PESTICIDES			
OCC	OTHER ORGANIC CHEMICALS			
IOC	INORGANIC CHEMICALS			
ACD	ACIDS			
BAS	BASES			
MES	HEAVY METALS			

IV. HAZARDOUS SUBSTANCES (See Appendix for most frequently cited CAS Numbers)

01 CATEGORY	02 SUBSTANCE NAME	03 CAS NUMBER	04 STORAGE/DISPOSAL METHOD	05 CONCENTRATION	06 MEASURE OF CONCENTRATION
MES	Chromium	7440473	These wastes were treated and disposed on-site from 1977 till 10-31-80.	N.D.	---
MES	Lead	7440439		0.58	mg/l
MES	Nickel	7440020		5.0	mg/l
IOC	Cyanide	57125		Unknown	---
SOL	Trichloroethylene	79016		N.D.	---
SOL	1,1,1-Trichloroethane	71556	N.D.	---	
					(Above concentrations were obtained using extraction procedure)

V. FEEDSTOCKS (See Appendix for CAS Numbers)

CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER	CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER
FDS	N/A		FDS		
FDS			FDS		
FDS			FDS		
FDS			FDS		

VI. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

1. Sample Analyses (See Appendix B) provided by the NC DHR/DHS State Laboratory of Public Health.
2. Preliminary Assessment form for this site.
3. Files at the NC Solid and Hazardous Waste Management Branch, Raleigh, NC.



**POTENTIAL HAZARDOUS WASTE SITE  
SITE INSPECTION REPORT**  
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION	
01 STATE NC	02 SITE NUMBER D037160439

**II. HAZARDOUS CONDITIONS AND INCIDENTS**

01  A. GROUNDWATER CONTAMINATION      02  OBSERVED (DATE: 12/18/84)       POTENTIAL       ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_      04 NARRATIVE DESCRIPTION  
See sample analysis from Well #4 (lead and nickel).

01  B. SURFACE WATER CONTAMINATION      02  OBSERVED (DATE: \_\_\_\_\_)       POTENTIAL       ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_      04 NARRATIVE DESCRIPTION  
Site is adjacent to Leith Creek.

01  C. CONTAMINATION OF AIR      02  OBSERVED (DATE: \_\_\_\_\_)       POTENTIAL       ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_      04 NARRATIVE DESCRIPTION  
Not suspected at this time.

01  D. FIRE/EXPLOSIVE CONDITIONS      02  OBSERVED (DATE: \_\_\_\_\_)       POTENTIAL       ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_      04 NARRATIVE DESCRIPTION  
Not suspected at this time.

01  E. DIRECT CONTACT      02  OBSERVED (DATE: \_\_\_\_\_)       POTENTIAL       ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_      04 NARRATIVE DESCRIPTION  
In area of sludge burial trenches although these are covered at present.

01  F. CONTAMINATION OF SOIL      02  OBSERVED (DATE: 12/18/84)       POTENTIAL       ALLEGED  
03 AREA POTENTIALLY AFFECTED: \_\_\_\_\_ (Acres)      04 NARRATIVE DESCRIPTION  
Around sludge burial trenches.

01  G. DRINKING WATER CONTAMINATION      02  OBSERVED (DATE: \_\_\_\_\_)       POTENTIAL       ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_      04 NARRATIVE DESCRIPTION  
Groundwater contamination is known although there are no known users nearby.

01  H. WORKER EXPOSURE/INJURY      02  OBSERVED (DATE: \_\_\_\_\_)       POTENTIAL       ALLEGED  
03 WORKERS POTENTIALLY AFFECTED: \_\_\_\_\_      04 NARRATIVE DESCRIPTION  
Not suspected at this time.

01  I. POPULATION EXPOSURE/INJURY      02  OBSERVED (DATE: \_\_\_\_\_)       POTENTIAL       ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_      04 NARRATIVE DESCRIPTION  
Not suspected at this time.



POTENTIAL HAZARDOUS WASTE SITE  
SITE INSPECTION REPORT  
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

NC D037160439

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01  J. DAMAGE TO FLORA 02  OBSERVED (DATE: \_\_\_\_\_)  POTENTIAL  ALLEGED  
04 NARRATIVE DESCRIPTION

Not suspected at this time.

01  K. DAMAGE TO FAUNA 02  OBSERVED (DATE: \_\_\_\_\_)  POTENTIAL  ALLEGED  
04 NARRATIVE DESCRIPTION (Include name(s) of species)

Not suspected at this time.

01  L. CONTAMINATION OF FOOD CHAIN 02  OBSERVED (DATE: \_\_\_\_\_)  POTENTIAL  ALLEGED  
04 NARRATIVE DESCRIPTION

Not suspected at this time.

01  M. UNSTABLE CONTAINMENT OF WASTES 02  OBSERVED (DATE: 12/18/84)  POTENTIAL  ALLEGED  
(Spills/Runoff, Standing liquids, Leaking drums)  
03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_ 04 NARRATIVE DESCRIPTION

Sludge burial trenches.

01  N. DAMAGE TO OFFSITE PROPERTY 02  OBSERVED (DATE: \_\_\_\_\_)  POTENTIAL  ALLEGED  
04 NARRATIVE DESCRIPTION

Via groundwater contamination.

01  O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs 02  OBSERVED (DATE: \_\_\_\_\_)  POTENTIAL  ALLEGED  
04 NARRATIVE DESCRIPTION

Not suspected at this time.

01  P. ILLEGAL/UNAUTHORIZED DUMPING 02  OBSERVED (DATE: \_\_\_\_\_)  POTENTIAL  ALLEGED  
04 NARRATIVE DESCRIPTION

Not suspected at this time.

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

None known.

III. TOTAL POPULATION POTENTIALLY AFFECTED: None known

IV. COMMENTS

Recommend sampling of all wells that were not sampled as part of this site investigation.

V. SOURCES OF INFORMATION (Cite specific references, e.g., State files, sample analysis reports)

As previously cited.



**POTENTIAL HAZARDOUS WASTE SITE  
SITE INSPECTION  
PART 4 - PERMIT AND DESCRIPTIVE INFORMATION**

I. IDENTIFICATION	
01 STATE NC	02 SITE NUMBER D037160439

**II. PERMIT INFORMATION**

01 TYPE OF PERMIT ISSUED <i>(Check all that apply)</i>	02 PERMIT NUMBER	03 DATE ISSUED	04 EXPIRATION DATE	05 COMMENTS
<input type="checkbox"/> A. NPDES	NC 0005053	4-20-83	3-31-88	
<input type="checkbox"/> B. UIC				
<input type="checkbox"/> C. AIR	4302R			
<input type="checkbox"/> D. RCRA				
<input type="checkbox"/> E. RCRA INTERIM STATUS				
<input type="checkbox"/> F. SPCC PLAN				
<input type="checkbox"/> G. STATE <i>(Specify)</i>				
<input type="checkbox"/> H. LOCAL <i>(Specify)</i>				
<input type="checkbox"/> I. OTHER <i>(Specify)</i>				
<input type="checkbox"/> J. NONE				

**III. SITE DESCRIPTION**

01 STORAGE/DISPOSAL <i>(Check all that apply)</i>	02 AMOUNT	03 UNIT OF MEASURE	04 TREATMENT <i>(Check all that apply)</i>	05 OTHER
<input checked="" type="checkbox"/> A. SURFACE IMPOUNDMENT (2)	150,000 190,000	gal. gal.	<input type="checkbox"/> A. INCENERATION	<input checked="" type="checkbox"/> A. BUILDINGS ON SITE
<input type="checkbox"/> B. PILES			<input type="checkbox"/> B. UNDERGROUND INJECTION	
<input type="checkbox"/> C. DRUMS, ABOVE GROUND			<input type="checkbox"/> C. CHEMICAL/PHYSICAL	06 AREA OF SITE <u>10</u> (Acres)
<input type="checkbox"/> D. TANK, ABOVE GROUND			<input type="checkbox"/> D. BIOLOGICAL	
<input type="checkbox"/> E. TANK, BELOW GROUND			<input type="checkbox"/> E. WASTE OIL PROCESSING	
<input checked="" type="checkbox"/> F. LANDFILL	0.5	acres	<input type="checkbox"/> F. SOLVENT RECOVERY	
<input type="checkbox"/> G. LANDFARM			<input type="checkbox"/> G. OTHER RECYCLING/RECOVERY	
<input type="checkbox"/> H. OPEN DUMP			<input type="checkbox"/> H. OTHER <i>(Specify)</i>	
<input type="checkbox"/> I. OTHER <i>(Specify)</i>				

**07 COMMENTS**

Surface Impoundments - closed under RCRA in August 1983.

Landfill - sludge, buried in on-site trenches, remains in situ.

**IV. CONTAINMENT**

01 CONTAINMENT OF WASTES <i>(Check one)</i>
<input type="checkbox"/> A. ADEQUATE, SECURE <input type="checkbox"/> B. MODERATE <input checked="" type="checkbox"/> C. INADEQUATE, POOR <input type="checkbox"/> D. INSECURE, UNSOUND, DANGEROUS

**02 DESCRIPTION OF DRUMS, DUKING, LINERS, BARRIERS, ETC.**

N/A

**V. ACCESSIBILITY**

01 WASTE EASILY ACCESSIBLE: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
02 COMMENTS
Unrestricted access to sludge burial area.

**VI. SOURCES OF INFORMATION *(Cite specific references, e.g. state files, sample analysis, reports)***

1. RCRA Part A.
2. As previously cited.



POTENTIAL HAZARDOUS WASTE SITE  
SITE INSPECTION REPORT  
PART 5 - WATER, DEMOGRAPHIC, AND ENVIRONMENTAL DATA

I. IDENTIFICATION  
01 STATE NC 02 SITE NUMBER D037160439

DRINKING WATER SUPPLY

01 TYPE OF DRINKING SUPPLY (Check as applicable)		02 STATUS Not affected at present/ wells are upgradient from site.			03 DISTANCE TO SITE	
COMMUNITY	SURFACE A. <input type="checkbox"/>	WELL B. <input checked="" type="checkbox"/>	ENDANGERED A. <input type="checkbox"/>	AFFECTED B. <input type="checkbox"/>	MONITORED C. <input type="checkbox"/>	A. _____ (mi)
NON-COMMUNITY	C. <input type="checkbox"/>	D. <input checked="" type="checkbox"/>	D. <input type="checkbox"/>	E. <input type="checkbox"/>	F. <input type="checkbox"/>	B. $\frac{1}{2}$ (mi)

GROUNDWATER

01 GROUNDWATER USE IN VICINITY (Check one)

A. ONLY SOURCE FOR DRINKING  
 B. DRINKING (Other source available)  
 C. COMMERCIAL, INDUSTRIAL, IRRIGATION (Limited other sources available)  
 D. NOT USED, UNUSEABLE  
 COMMERCIAL, INDUSTRIAL, IRRIGATION (No other water sources available)

02 POPULATION SERVED BY GROUND WATER 25-50		03 DISTANCE TO NEAREST DRINKING WATER WELL $\frac{1}{2}$ (mi)			
04 DEPTH TO GROUNDWATER 4-8 (ft)	05 DIRECTION OF GROUNDWATER FLOW S-SW	06 DEPTH TO AQUIFER OF CONCERN Unknown (ft)	07 POTENTIAL YIELD OF AQUIFER Unknown (gpd)	08 SOLE SOURCE AQUIFER <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

09 DESCRIPTION OF WELLS (including usage, depth, and location relative to population and buildings)

No known wells closer than  $\frac{1}{2}$  mile. These wells were sampled during 8/84 site investigation of Rea Magnet Wire (NC D002972966).

10 RECHARGE AREA <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	COMMENTS For Leith Creek watershed.	11 DISCHARGE AREA <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	COMMENTS Leith Creek is adjacent to site.
--	--	---	--

SURFACE WATER

01 SURFACE WATER USE (Check one)

A. RESERVOIR, RECREATION DRINKING WATER SOURCE  
 B. IRRIGATION, ECONOMICALLY IMPORTANT RESOURCES  
 C. COMMERCIAL, INDUSTRIAL  
 D. NOT CURRENTLY USED

02 AFFECTED/POTENTIALLY AFFECTED BODIES OF WATER

NAME	AFFECTED	DISTANCE TO SITE
Leith Creek	<input type="checkbox"/>	adjacent (mi)
_____	<input type="checkbox"/>	_____ (mi)
_____	<input type="checkbox"/>	_____ (mi)

DEMOGRAPHIC AND PROPERTY INFORMATION

01 TOTAL POPULATION WITHIN			02 DISTANCE TO NEAREST POPULATION
ONE (1) MILE OF SITE A. 1000 NO. OF PERSONS	TWO (2) MILES OF SITE B. 10,000 NO. OF PERSONS	THREE (3) MILES OF SITE C. 15,000 NO. OF PERSONS	$\frac{1}{2}$ (mi)

03 NUMBER OF BUILDINGS WITHIN TWO (2) MILES OF SITE Hundreds	04 DISTANCE TO NEAREST OFF-SITE BUILDING $\frac{1}{2}$ (mi)
---	--

05 POPULATION WITHIN VICINITY OF SITE (Provide narrative description of nature of population within vicinity of site, e.g., rural, village, densely populated urban area)

Predominately rural within  $\frac{1}{2}$  mile radius of site.



**POTENTIAL HAZARDOUS WASTE SITE  
SITE INSPECTION REPORT  
PART 5 - WATER, DEMOGRAPHIC, AND ENVIRONMENTAL DATA**

**I. IDENTIFICATION**

01 STATE: **NC** 02 SITE NUMBER: **D037160439**

**VI. ENVIRONMENTAL INFORMATION**

**01 PERMEABILITY OF UNSATURATED ZONE (Check one)**

A.  $10^{-6} - 10^{-8}$  cm/sec    B.  $10^{-4} - 10^{-6}$  cm/sec    C.  $10^{-4} - 10^{-3}$  cm/sec    D. GREATER THAN  $10^{-3}$  cm/sec

**02 PERMEABILITY OF BEDROCK (Check one)**

A. IMPERMEABLE (Less than  $10^{-6}$  cm/sec)    B. RELATIVELY IMPERMEABLE ( $10^{-4} - 10^{-6}$  cm/sec)    C. RELATIVELY PERMEABLE ( $10^{-2} - 10^{-4}$  cm/sec)    D. VERY PERMEABLE (Greater than  $10^{-2}$  cm/sec)

**03 DEPTH TO BEDROCK**

300 (ft)

**04 DEPTH OF CONTAMINATED SOIL ZONE**

several feet at burial trenches (ft)

**05 SOIL pH**

6.0

**06 NET PRECIPITATION**

4 (in)

**07 ONE YEAR 24 HOUR RAINFALL**

3.25 (in)

**08 SLOPE**

1.7 %

**DIRECTION OF SITE SLOPE**

SW

**TERRAIN AVERAGE SLOPE**

low-mod. %

**09 FLOOD POTENTIAL**

SITE IS IN \_\_\_\_\_ YEAR FLOODPLAIN

**10.**

SITE IS ON BARRIER ISLAND, COASTAL HIGH HAZARD AREA, RIVERINE FLOODWAY

**11 DISTANCE TO WETLANDS (8 acre minimum)**

ESTUARINE

OTHER

A. N/A (mi)

B. 0.1 (mi)

**12 DISTANCE TO CRITICAL HABITAT (of endangered species)**

N/A (mi)

ENDANGERED SPECIES: \_\_\_\_\_

**13 LAND USE IN VICINITY.**

**DISTANCE TO:**

COMMERCIAL/INDUSTRIAL

RESIDENTIAL AREAS; NATIONAL/STATE PARKS, FORESTS, OR WILDLIFE RESERVES

AGRICULTURAL LANDS  
PRIME AG LAND      AG LAND

A. 0 (mi)

B. 3/2 (mi)

C. 3/2 (mi)

D. 3/2 (mi)

**14 DESCRIPTION OF SITE IN RELATION TO SURROUNDING TOPOGRAPHY**

Site is situated on low to moderately sloping terrain. Slope direction is to the south towards Leith Creek. Site slope is approximately 7'/420' or 1.7%.

**VII. SOURCES OF INFORMATION (cite specific references, e.g., state files, sample analysis, reports)**

1. North Carolina Atlas, Clay, Orr, Stuart, 1975, which includes maps from US Environmental Data Service and National Weather Service.
2. Site map of facility plan and topography, provided by Toastmaster.



POTENTIAL HAZARDOUS WASTE SITE  
SITE INSPECTION REPORT  
PART 6 - SAMPLE AND FIELD INFORMATION

I. IDENTIFICATION

01 STATE | 02 SITE NUMBER  
NC | D037160439

II. SAMPLES TAKEN

SAMPLE TYPE	01 NUMBER OF SAMPLES TAKEN	02 SAMPLES SENT TO	03 ESTIMATED DATE RESULTS AVAILABLE
GROUNDWATER	1	NC DHS	Now
SURFACE WATER			
WASTE	1	NC DHS	Now
AIR			
RUNOFF			
SPILL			
SOIL	2	NC DHS	Now
VEGETATION			
OTHER			

III. FIELD MEASUREMENTS TAKEN

01 TYPE	02 COMMENTS

IV. PHOTOGRAPHS AND MAPS

01 TYPE <input checked="" type="checkbox"/> GROUND <input type="checkbox"/> AERIAL	02 IN CUSTODY OF <u>NC Solid and Haz. Waste Mgmt. Branch.</u> <small>(Name of organization or individual)</small>
03 MAPS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	04 LOCATION OF MAPS <u>NC DHR/DHS Solid and Hazardous Waste Mgmt. Branch, Raleigh, NC.</u>

V. OTHER FIELD DATA COLLECTED (Provide narrative description)

Photographs and notes.

VI. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

As previously cited.



POTENTIAL HAZARDOUS WASTE SITE  
SITE INSPECTION REPORT  
PART 7 - OWNER INFORMATION

I. IDENTIFICATION  
01 STATE 02 SITE NUMBER  
NC D037160439

II. CURRENT OWNER(S)

PARENT COMPANY (if applicable)

01 NAME Magic Chef Inc.		02 D+B NUMBER		08 NAME		09 D+B NUMBER		
03 STREET ADDRESS (P.O. Box, RFD #, etc.) 740 King Edward Avenue			04 SIC CODE	10 STREET ADDRESS (P.O. Box, RFD #, etc.)			11 SIC CODE	
05 CITY Cleveland		06 STATE TN	07 ZIP CODE 37311		12 CITY		13 STATE	14 ZIP CODE
01 NAME (Tel. 615/472-3371)		02 D+B NUMBER		08 NAME		09 D+B NUMBER		
03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE	10 STREET ADDRESS (P.O. Box, RFD #, etc.)			11 SIC CODE	
05 CITY		06 STATE	07 ZIP CODE		12 CITY		13 STATE	14 ZIP CODE
01 NAME		02 D+B NUMBER		08 NAME		09 D+B NUMBER		
03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE	10 STREET ADDRESS (P.O. Box, RFD #, etc.)			11 SIC CODE	
05 CITY		06 STATE	07 ZIP CODE		12 CITY		13 STATE	14 ZIP CODE
01 NAME		02 D+B NUMBER		08 NAME		09 D+B NUMBER		
03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE	10 STREET ADDRESS (P.O. Box, RFD #, etc.)			11 SIC CODE	
05 CITY		06 STATE	07 ZIP CODE		12 CITY		13 STATE	14 ZIP CODE
01 NAME		02 D+B NUMBER		08 NAME		09 D+B NUMBER		
03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE	10 STREET ADDRESS (P.O. Box, RFD #, etc.)			11 SIC CODE	
05 CITY		06 STATE	07 ZIP CODE		12 CITY		13 STATE	14 ZIP CODE

III. PREVIOUS OWNER(S) (List most recent first)

IV. REALTY OWNER(S) (if applicable; list most recent first)

01 NAME Toastermaster, Inc.		02 D+B NUMBER		01 NAME		02 D+B NUMBER		
03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE	03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE	
05 CITY Columbia		06 STATE MO	07 ZIP CODE		05 CITY		06 STATE	07 ZIP CODE
01 NAME McGraw Edison Co.		02 D+B NUMBER		01 NAME		02 D+B NUMBER		
03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE	03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE	
05 CITY Elgin		06 STATE IL	07 ZIP CODE		05 CITY		06 STATE	07 ZIP CODE
01 NAME Ingraham Co.		02 D+B NUMBER		01 NAME		02 D+B NUMBER		
03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE	03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE	
05 CITY Bristol		06 STATE CT	07 ZIP CODE		05 CITY		06 STATE	07 ZIP CODE

V. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

As previously cited.



POTENTIAL HAZARDOUS WASTE SITE  
SITE INSPECTION REPORT  
PART 8 - OPERATOR INFORMATION

I. IDENTIFICATION

01 STATE	02 SITE NUMBER
NC	D037160439

II. CURRENT OPERATOR (Provide if different from owner)

OPERATOR'S PARENT COMPANY (if applicable)

01 NAME Toastmaster Inc.			02 D+B NUMBER 037160439		10 NAME			11 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.) Old Laurel Hill Church Rd.				04 SIC CODE	12 STREET ADDRESS (P.O. Box, RFD #, etc.)			13 SIC CODE	
05 CITY Laurinburg		06 STATE NC	07 ZIP CODE 28352		14 CITY		15 STATE	16 ZIP CODE	
08 YEARS OF OPERATION		09 NAME OF OWNER							

III. PREVIOUS OPERATOR(S) (List most recent first; provide only if different from owner)

PREVIOUS OPERATORS' PARENT COMPANIES (if applicable)

01 NAME			02 D+B NUMBER		10 NAME			11 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)				04 SIC CODE	12 STREET ADDRESS (P.O. Box, RFD #, etc.)			13 SIC CODE	
05 CITY		06 STATE	07 ZIP CODE		14 CITY		15 STATE	16 ZIP CODE	
08 YEARS OF OPERATION		09 NAME OF OWNER DURING THIS PERIOD							

01 NAME			02 D+B NUMBER		10 NAME			11 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)				04 SIC CODE	12 STREET ADDRESS (P.O. Box, RFD #, etc.)			13 SIC CODE	
05 CITY		06 STATE	07 ZIP CODE		14 CITY		15 STATE	16 ZIP CODE	
08 YEARS OF OPERATION		09 NAME OF OWNER DURING THIS PERIOD							

01 NAME			02 D+B NUMBER		10 NAME			11 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)				04 SIC CODE	12 STREET ADDRESS (P.O. Box, RFD #, etc.)			13 SIC CODE	
05 CITY		06 STATE	07 ZIP CODE		14 CITY		15 STATE	16 ZIP CODE	
08 YEARS OF OPERATION		09 NAME OF OWNER DURING THIS PERIOD							

IV. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis reports)

1. Letter to Lenox E. Bramble from R.J. Ronalter, Sr. at Toastmaster, Inc., 9-13-84.
2. As previously cited.



POTENTIAL HAZARDOUS WASTE SITE  
SITE INSPECTION REPORT  
PART 9 - GENERATOR/TRANSPORTER INFORMATION

I. IDENTIFICATION

01 STATE | 02 SITE NUMBER  
NC | D037160439

II. ON-SITE GENERATOR

01 NAME see Part 8, II .01		02 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE	
05 CITY	06 STATE	07 ZIP CODE	

III. OFF-SITE GENERATOR(S)

01 NAME		02 D+B NUMBER		01 NAME		02 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE		03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE	
05 CITY	06 STATE	07 ZIP CODE		05 CITY	06 STATE	07 ZIP CODE	
01 NAME		02 D+B NUMBER		01 NAME		02 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE		03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE	
05 CITY	06 STATE	07 ZIP CODE		05 CITY	06 STATE	07 ZIP CODE	

IV. TRANSPORTER(S)

01 NAME		02 D+B NUMBER		01 NAME		02 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE		03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE	
05 CITY	06 STATE	07 ZIP CODE		05 CITY	06 STATE	07 ZIP CODE	
01 NAME		02 D+B NUMBER		01 NAME		02 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE		03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE	
05 CITY	06 STATE	07 ZIP CODE		05 CITY	06 STATE	07 ZIP CODE	

V. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis reports)

As previously cited.



POTENTIAL HAZARDOUS WASTE SITE  
SITE INSPECTION REPORT  
PART 10 - PAST RESPONSE ACTIVITIES

I. IDENTIFICATION

01 STATE | 02 SITE NUMBER  
NC | D037160439

II. PAST RESPONSE ACTIVITIES

01  A. WATER SUPPLY CLOSED      02 DATE \_\_\_\_\_      03 AGENCY \_\_\_\_\_  
04 DESCRIPTION \_\_\_\_\_

01  B. TEMPORARY WATER SUPPLY PROVIDED      02 DATE \_\_\_\_\_      03 AGENCY \_\_\_\_\_  
04 DESCRIPTION \_\_\_\_\_

01  C. PERMANENT WATER SUPPLY PROVIDED      02 DATE \_\_\_\_\_      03 AGENCY \_\_\_\_\_  
04 DESCRIPTION \_\_\_\_\_

01  D. SPILLED MATERIAL REMOVED      02 DATE \_\_\_\_\_      03 AGENCY \_\_\_\_\_  
04 DESCRIPTION \_\_\_\_\_

01  E. CONTAMINATED SOIL REMOVED      02 DATE 8/1983      03 AGENCY \_\_\_\_\_  
04 DESCRIPTION 181.6 tons of contaminated soil was removed during closure of lagoons and sand filter bed. Waste was manifested to SCA in Pinewood, SC.

01  F. WASTE REPACKAGED      02 DATE \_\_\_\_\_      03 AGENCY \_\_\_\_\_  
04 DESCRIPTION \_\_\_\_\_

01  G. WASTE DISPOSED ELSEWHERE      02 DATE \_\_\_\_\_      03 AGENCY \_\_\_\_\_  
04 DESCRIPTION \_\_\_\_\_

01  H. ON SITE BURIAL      02 DATE \_\_\_\_\_      03 AGENCY \_\_\_\_\_  
04 DESCRIPTION Sludge burial trenches from 1977 to 1980.

01  I. IN SITU CHEMICAL TREATMENT      02 DATE \_\_\_\_\_      03 AGENCY \_\_\_\_\_  
04 DESCRIPTION \_\_\_\_\_

01  J. IN SITU BIOLOGICAL TREATMENT      02 DATE \_\_\_\_\_      03 AGENCY \_\_\_\_\_  
04 DESCRIPTION \_\_\_\_\_

01  K. IN SITU PHYSICAL TREATMENT      02 DATE \_\_\_\_\_      03 AGENCY \_\_\_\_\_  
04 DESCRIPTION \_\_\_\_\_

01  L. ENCAPSULATION      02 DATE \_\_\_\_\_      03 AGENCY \_\_\_\_\_  
04 DESCRIPTION \_\_\_\_\_

01  M. EMERGENCY WASTE TREATMENT      02 DATE \_\_\_\_\_      03 AGENCY \_\_\_\_\_  
04 DESCRIPTION \_\_\_\_\_

01  N. CUTOFF WALLS      02 DATE \_\_\_\_\_      03 AGENCY \_\_\_\_\_  
04 DESCRIPTION \_\_\_\_\_

01  O. EMERGENCY DIKING/SURFACE WATER DIVERSION      02 DATE \_\_\_\_\_      03 AGENCY \_\_\_\_\_  
04 DESCRIPTION \_\_\_\_\_

01  P. CUTOFF TRENCHES/SUMP      02 DATE \_\_\_\_\_      03 AGENCY \_\_\_\_\_  
04 DESCRIPTION \_\_\_\_\_

01  Q. SUBSURFACE CUTOFF WALL      02 DATE \_\_\_\_\_      03 AGENCY \_\_\_\_\_  
04 DESCRIPTION \_\_\_\_\_



POTENTIAL HAZARDOUS WASTE SITE  
SITE INSPECTION REPORT  
PART 10 - PAST RESPONSE ACTIVITIES

I IDENTIFICATION	
01 STATE NC	02 SITE NUMBER D037160439

II PAST RESPONSE ACTIVITIES (Continued)

01  R. BARRIER WALLS CONSTRUCTED  
04 DESCRIPTION \_\_\_\_\_ 02 DATE \_\_\_\_\_ 03 AGENCY \_\_\_\_\_

01  S. CAPPING/COVERING  
04 DESCRIPTION \_\_\_\_\_ 02 DATE \_\_\_\_\_ 03 AGENCY \_\_\_\_\_

01  T. BULK TANKAGE REPAIRED  
04 DESCRIPTION \_\_\_\_\_ 02 DATE \_\_\_\_\_ 03 AGENCY \_\_\_\_\_

01  U. GROUT CURTAIN CONSTRUCTED  
04 DESCRIPTION \_\_\_\_\_ 02 DATE \_\_\_\_\_ 03 AGENCY \_\_\_\_\_

01  V. BOTTOM SEALED  
04 DESCRIPTION \_\_\_\_\_ 02 DATE \_\_\_\_\_ 03 AGENCY \_\_\_\_\_

01  W. GAS CONTROL  
04 DESCRIPTION \_\_\_\_\_ 02 DATE \_\_\_\_\_ 03 AGENCY \_\_\_\_\_

01  X. FIRE CONTROL  
04 DESCRIPTION \_\_\_\_\_ 02 DATE \_\_\_\_\_ 03 AGENCY \_\_\_\_\_

01  Y. LEACHATE TREATMENT  
04 DESCRIPTION \_\_\_\_\_ 02 DATE \_\_\_\_\_ 03 AGENCY \_\_\_\_\_

01  Z. AREA EVACUATED  
04 DESCRIPTION \_\_\_\_\_ 02 DATE \_\_\_\_\_ 03 AGENCY \_\_\_\_\_

01  1. ACCESS TO SITE RESTRICTED  
04 DESCRIPTION Unrestricted. 02 DATE \_\_\_\_\_ 03 AGENCY \_\_\_\_\_

01  2. POPULATION RELOCATED  
04 DESCRIPTION \_\_\_\_\_ 02 DATE \_\_\_\_\_ 03 AGENCY \_\_\_\_\_

01  3. OTHER REMEDIAL ACTIVITIES  
04 DESCRIPTION \_\_\_\_\_ 02 DATE \_\_\_\_\_ 03 AGENCY \_\_\_\_\_

III SOURCES OF INFORMATION (Cite specific references, e.g., State files, sample analysis, reports)

1. letter from Ralph J. Ronalter of Toastmaster to O.W. Strickland, 10-14-83.
2. As previously cited.



POTENTIAL HAZARDOUS WASTE SITE  
SITE INSPECTION REPORT  
PART 11 - ENFORCEMENT INFORMATION

I. IDENTIFICATION	
01 STATE	02 SITE NUMBER
NC	D037160439

II. ENFORCEMENT INFORMATION

01 PAST REGULATORY/ENFORCEMENT ACTION  YES  NO

02 DESCRIPTION OF FEDERAL, STATE, LOCAL REGULATORY/ENFORCEMENT ACTION

The NC DHR/DHS Solid and Hazardous Waste Management Branch approved Toastmaster's plan for closure of its filter bed and two lagoons in a letter dated 5-23-83. Closure called for removal of contaminated soil at these three land units, installation of five monitoring wells, and sampling.

III. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis reports)

As previously cited.

# POTENTIAL HAZARDOUS WASTE SITE SITE INSPECTION REPORT

## General Information

The Potential Hazardous Waste Site, Site Inspection Report form is used to record information collected during, or associated with, an inspection of the site and other information about responsible parties and past response activities.

The Site Inspection Report form contains eleven parts:

Part 1 — Site Location and Inspection Information

Part 2 — Waste Information

Part 3 — Description of Hazardous Conditions and Incidents

Part 4 — Permit and Descriptive Information

Part 5 — Water, Demographic, and Environmental Data

Part 6 — Sample and Field Information

Part 7 — Owner Information

Part 8 — Operator Information

Part 9 — Generator/Transporter Information

Part 10 — Past Response Activities

Part 11 — Enforcement Information

Part 1 — Site Location and Inspection Information contains all of the data elements also contained on the Site Identification and Preliminary Assessment forms required to add a site to the automated Site Tracking System (STS). It is therefore possible to add a site to STS at the Site Inspection stage. Instructions are given below.

Part 2 — Waste Information and Part 3 — Description of Hazardous Conditions and Incidents are used to record specific information about substances, amounts, hazards, and targets, e.g., population potentially affected. Parts 2 and 3 are also contained in the Potential Hazardous Waste Site, Preliminary Assessment form. Information recorded on Part 2 and Part 3 during a preliminary assessment may be updated, added, deleted, or corrected on the Site Inspection Report form.

An Appendix with feedstock names and CAS Numbers and the most frequently cited hazardous substances and CAS Numbers is located behind the instructions for the Site Inspection Report.

A number of the data items collected throughout the Site Inspection Report support the Site Ranking Model. The majority of these data items are found in Part 5 — Water, Demographic, and Environmental Data.

## General Instructions

1. Complete the Site Inspection Report form as completely as possible.

2. Starred items (\*) are required before inspection information can be added to STS. The system will not accept incomplete inspection information.

3. To add a site to STS at the Site Inspection stage, write "New" across the top of the form and complete items 11-01, 02, 03, 04, and 06, Site Name and Location, 11-09 Coordinates, and 11-10, Type of Ownership.

4. Data items carried in STS, which are identical to those on the Site Identification and Preliminary Assessment

Site Inspection Report form, are indicated with a pound sign (#). To ensure that the proper action is taken, outline the item(s) to be added, deleted, or changed with a bright color and indicate the proper action with "A" (add), "D" (delete) or "C" (change).

5. There are two options available for adding, deleting, or changing information supplied on the Site Inspection Report form. The first is to use a new Site Inspection Report form, completing only those items to be added, deleted, or changed. Mark the form clearly, using "A", "D", or "C", to indicate the action to be taken. If only data in STS are to be altered, the Site Source Data Report may be used. Using the report, mark clearly the items to be changed and the action to be taken.

## Detailed Instructions

### Part 1 Site Location and Inspection Information

I. Identification: Identification (State and Site Number) is the site record key, or primary identifier, for the site. Site records in the STS are updated based on Identification. It is essential that State and Site Number are correctly entered on each form.

\*1-01 State: Enter the two character alpha FIPS code for the state in which the site is located. It must be identical to State on the Site Identification form.

\*1-02 Site Number: Enter the ten character alphanumeric code for sites which have a Dun and Bradstreet or EPA "user" Dun and Bradstreet number or the ten character numeric GSA identification code for federal sites. The Site Number must be identical to the Site Number on the Site Identification and Preliminary Assessment forms.

II. Site Name and Location: If Site Name and Location information require no additions or changes, these items are not required on the Site Inspection Report form. However, completing these items will facilitate use of the completed form and records management procedures.

#11-01 Site Name: Enter the legal, common, or descriptive name of the site.

#11-02 Site Street: Enter the street address and number (if appropriate) where the site is located. If the precise street address is unavailable for this site, enter brief direction identifier, e.g., NW Jct 1-295 & US 99; Post Rd, 5 mi W of Rt. 5.

#11-03 Site City: Enter the city, town, village, or other municipality in which the site is located. If the site is not located in a municipality, enter the name of the municipality (or place) which is nearest the site or which most easily locates the site.

#11-04 Site State: Enter the two character alpha FIPS code for the state in which the site is located. The code must be the same as in item 1-01.

#11-05 Site Zip Code: Enter the five character numeric zip code for the postal zone in which the site is located

- #11-06 Site County: Enter the name of the county, parish (Louisiana), or borough (Alaska) in which the site is located.
- #11-07 County Code: Enter the three character numeric FIPS county code for the county, parish, or borough in which the site is located. (The regional data analyst can furnish this data item.)
- #11-08 Site Congressional District: Enter the two character number for the congressional district in which the site is located.
- #11-09 Coordinates: Enter the Coordinates, Latitude and Longitude, of the site in degrees, minutes, seconds, and tenths of seconds. If a tenth of a second is insignificant at this site, enter "0" in the tenths position.
- #11-10 Type of Ownership: Check the appropriate box to indicate the type of site ownership. If the site is under the jurisdiction of an activity of the federal government, enter the name of the department, agency, or activity. If Other is indicated, specify the type of ownership and name.

#### I. Inspection Information

- \*111-01 Date of Inspection: Enter the date the inspection occurred, or began for multiple day inspections.
- \*111-02 Site Status: Check the appropriate box(es) to indicate the current status of the site. Active sites are those which treat, store, or dispose of wastes. Check Active for those active sites with an inactive storage or disposal area. Inactive sites are those at which treatment, storage, or disposal activities no longer occur.
- #111-03 Years of Operation: Enter the beginning and ending years (or beginning only if operations at the site are on-going), e.g., 1878/1932, of site operation. Check Unknown if years of operation are not known.
- \*111-04 Agency Performing Inspection: Check the appropriate box(es) to indicate parties participating in the inspection. If contractors participate, provide the name of the firm(s).
- 111-05 Chief Inspector: Enter the name of the chief, or lead inspector.
- 111-06 Title: Enter the Chief Inspector's title, e.g., Team Leader, FIT team.
- 111-07 Organization: Enter the name of the organization where the Chief Inspector is employed, e.g., EPA - Region 4, VA State Health Dept., Environmental Research Co.
- 111-08 Telephone Number: Enter the Chief Inspector's area code and local commercial telephone number.
- 111-09 Other Inspectors: Enter the names of other parties participating in the inspection.
- 111-10 Title: Enter the titles of other parties participating in the inspection.
- 111-11 Organization: Enter the names of the organizations where other parties participating in the inspection are employed.
- 111-12 Telephone Number: Enter the area code and local phone numbers of other parties par-

- 111-13 Site Representatives Interviewed: Enter the names of individuals representing responsible parties interviewed in connection with the inspection. Interviews do not necessarily occur during the inspection.
- 111-14 Title: Enter the titles of the individuals interviewed.
- 111-15 Address: Enter the business, mailing, or residential addresses of the individuals interviewed.
- 111-16 Telephone Number: Enter the area code and local commercial telephone numbers of the individuals interviewed.
- 111-17 Access Gained By: Check the appropriate box to indicate whether access to the site was gained through permission or warrant.
- 111-18 Time of Inspection: Using a 24-hour clock, enter the time the inspection began, e.g., for 3:24 p.m. enter 1524.
- 111-19 Weather Conditions: Describe the weather conditions during the site inspection, especially any unusual conditions which might affect results or observations taken.

#### IV. Information Available From

- IV-01 Contact: Enter the name of the individual who can provide information about the site.
- IV-02 Of: If appropriate, enter the name of the public or private agency, firm, or company and the organization within the agency, firm, or company of the individual named as Contact.
- IV-03 Telephone Number: Enter the area code and local telephone number of the individual named as contact.
- IV-04 Person Responsible for Site Inspection Report Form: Enter the name of the individual who was responsible for the information entered on the Site Inspection Report form. The person responsible for the Site Inspection Report form may be different from the individual who prepared the form.
- IV-05 Agency: Enter the name of the Agency where the individual who is responsible for the Site Inspection Report form is employed.
- IV-06 Organization: Enter the name of the organization within the Agency.
- IV-07 Telephone Number: Enter the area code and local telephone number of the individual who is responsible for the Site Inspection Report form.
- IV-08 Date: Enter the date the Site Inspection Report form was prepared.

#### Part 2 Waste Information

- \*I. Identification: Refer to Part 1-1.
- II. Waste States, Quantities, and Characteristics: Was States, Quantities, and Characteristics provide information about the physical structure and form of the waste, measures of gross amounts at the site, and the hazards posed by the waste, considering acute and chronic health effects and mobility along

**I-01 Physical States:** Check the appropriate box(es) to indicate the state(s) of waste present at the site. If Other is indicated, specify the physical state of the waste.

**II-02 Waste Quantity at Site:** Enter estimates of amounts of waste at the site. Estimates may be in weight (Tons) or volume (Cubic Yards or Number of Drums): Use as many entries as are appropriate; however, measurements must be independent. For example, do not measure the same amounts of waste as both tons and cubic yards.

**II-03 Waste Characteristics:** Check all appropriate entries to indicate the hazards posed by waste at the site. If waste at the site poses no hazard, check Not Applicable.

**Waste Category:** General categories of waste typically found are listed here. Enter the estimated gross amount of each category of waste and the appropriate unit of measure.

**III-01 Gross Amount:** Gross Amount is the estimate of the amount of the waste category found at the site. Estimates should be furnished in metric tons (MT), tons (TN), cubic meters (CM), cubic yards (CY), drums (DR), acres (AC), acre feet (AF), liters (LT), or gallons (GA). Enter the estimated amount next to the appropriate waste category.

**III-02 Unit of Measure:** Enter the appropriate unit of measure, MT (metric tons), TN (tons), CM (cubic meters), CY (cubic yards), DR (number of drums), AC (acres), AF (acre feet), LT (liters), or GA (gallons) next to the estimate of gross amount.

**III-03 Comments:** Comments may be used to further explain, or provide additional information, about particular waste categories.

**Hazardous Substances:** Specific hazardous, or potentially hazardous, chemicals, mixtures, and substances found at the site are listed here. For each substance listed those data items marked with an "at" sign (@) must be included.

**@IV-01 Category:** Enter in front of the substance name the three character waste category from Section III which best describes the substance, e.g., OLW (Oily Waste).

**@IV-02 Substance Name:** Enter one of the following: the name of the substance registered with the Chemical Abstract Service, the common or accepted abbreviation of the substance, the generic name of the substance, or commercial name of the substance.

**@IV-03 CAS Number:** Enter the number assigned to the substance when it was registered with the Chemical Abstract Service. Refer to the Appendix for most frequently cited CAS Numbers. CAS Numbers must be furnished for each substance listed. If a CAS Number for this substance has not been assigned, enter "999".

**@IV-04 Storage/Disposal Method:** Enter the type of storage or disposal facility in which the substance was found: SI (surface impoundment, including pits, ponds, and lagoons), PL (pile), DR (drum), TK (landfill), LM (landfarm), OD (open

**IV-05 Concentration:** Enter the concentration of the substance found in samples taken at the site.

**IV-06 Measure of Concentration:** Enter the appropriate unit of measure for the measured concentration of the substance found in the sample, e.g., MG/L, UG/L.

## V. Feedstocks

**V-01 Feedstock Name:** If feedstocks, or substances derived from one or more feedstocks, are present at the site, enter the name of each feedstock found. See the Appendix for the feedstock list.

**V-02 CAS Number:** Enter the CAS Number for each feedstock named. See the Appendix for feedstock CAS Numbers.

**VI. Sources of Information:** List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

## Part 3 Description of Hazardous Conditions and Incidents

**\*I. Identification:** Refer to Part 1-1.

### II. Hazardous Conditions and Incidents:

**II-01 Hazards:** Indicate each hazardous, or potentially hazardous, condition known, or claimed, to exist at the site.

**II-02 Observed, Potential, or Alleged:** Check Observed and enter the date, or approximate date, of occurrence if a release of contaminants to the environment, or some other hazardous incident, is known to have occurred. In cases of a continuing release, e.g., groundwater contamination, enter the date, or approximate date, the condition first became apparent. If conditions exist for a potential release, check potential. Check Alleged for hazardous, or potentially hazardous, conditions claimed to exist at the site.

**II-03 Population Potentially Affected:** For each hazardous condition at the site, enter the number of people potentially affected. For Soil enter the number of acres potentially affected.

**II-04 Narrative Description:** Provide a narrative description, or explanation, of each condition. Include any additional information which further explains the condition.

**II-05 Description of Any Other Known, Potential, or Alleged Hazards:** Provide a narrative description of any other hazardous, or potentially hazardous, conditions at the site not covered above.

**III. Total Population Potentially Affected:** Enter the total number of people potentially affected by the existence of hazardous, or potentially hazardous conditions at the site. Do not sum the number shown for each condition.

**IV. Comments:** Other information relevant to observed potential, or alleged hazards may be entered here.

Sources of Information: List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

#### art 4 Permit and Descriptive Information

Identification: Refer to Part 1-1.

##### I. Permit Information

I-01 Type of Permit Issued: Check the appropriate box(es) to indicate the types of permits issued to the site. If state, local, or other types of environmental permits have been issued, specify the type.

I-02 Permit Number: Enter the permit number for each issued permit.

I-03 Date Issued: Enter the date each permit was issued.

I-04 Expiration Date: Enter the date each permit expires or expired.

I-05 Comments: Enter any information which further explains the types of permits issued or status of the permits.

##### Site Description

III-01 Storage/Disposal: Check the appropriate box(es) to indicate the types of storage/disposal facilities found at the site. If Other is checked, specify the type of facility.

III-02 Amount: Enter the gross amount of waste associated with each type of storage/disposal facility. Amounts may be measured in: metric tons, tons, cubic meters, cubic yards, drums, acres, acre feet, liters, or gallons.

III-03 Unit of Measure: Enter the appropriate unit of measure for each entry. Units of measure are MT (metric tons), TN (tons), CM (cubic meters), CY (cubic yards), DR (drums), AC (acres), AF (acre feet), LT (liters), or GA (gallons).

III-04 Treatment: If waste is treated at the site, check the appropriated box(es) to indicate treatment methods used. If Other is checked, specify treatment method.

III-05 Other: If there are buildings on site, check this box.

III-06 Area of Site: Enter total area of site in acres.

III-07 Comments: Enter any other pertinent information.

V. Containment: Containment is a measure of the natural or artificial means taken to minimize or preclude health hazards and to minimize or prevent contamination of the environment from waste at the site.

IV-01 Containment of Wastes: Check the appropriate box to indicate the condition of containment measures at the site. When choosing the appropriate box, consider the potential for environmental contamination, i.e., the worst case for containment in conjunction with the most hazardous substances.

IV-02 Description of Drums, Diking, Liners, Barriers: Provide description of the condition of con-

quately contained, drums rusting and leaking, diking collapsing, liners leaking and contaminants leaching into soil and groundwater.

V. Accessibility: Accessibility is an indicator of the potential for direct contact with hazardous substances.

\*V-01 Waste Easily Accessible: If there are no real barriers preventing human access to hazardous waste, check Yes, otherwise check No.

V-02 Comments: Additional information about accessibility to hazardous waste may be provided.

VI. Sources of Information: List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

#### Part 5 Water, Demographic, and Environmental Data

\*I. Identification: Refer to Part 1-1.

##### II. Drinking Water Supply

II-01 Type of Drinking Water Supply: Check the appropriate box(es) to indicate the types and sources of drinking water within the vicinity of the site. Community refers to municipal sources. Non-community refers to private sources, e.g., private wells.

II-02 Status: Check the appropriate box(es) to indicate whether the water supply is endangered or affected by contaminants from the site. Check the appropriate box to indicate if the water supply is being monitored for possible contamination.

II-03 Distance to Site: Enter the distance in miles to the nearest tenth, hundredth, or thousandth (as needed to indicate the precision required) from the site to nearest drinking water source.

##### III. Groundwater

III-01 Groundwater Use in Vicinity: Check the appropriate box to indicate groundwater use in the vicinity of the site. The concern is to indicate the seriousness of groundwater contamination from waste at the site. Only Source for Drinking indicates that current water sources are limited to wells in the vicinity of the site. Drinking; Commercial, Industrial, Irrigation indicates that groundwater is used for drinking, but that other limited drinking sources are available and that no other sources for these additional uses are available. Commercial, Industrial, Irrigation indicates that groundwater is used for these purposes, but that limited other sources of water are available. Not used, Unuseable indicates that groundwater use in the area is not critical.

III-02 Population Served by Groundwater: Enter the number of people served by groundwater in the vicinity of the site. Population for the purposes of the Site Inspection Report includes residents and daytime workers and students but excludes transients in the neighborhood or on local highways and roads. When estimating population from aerial photographs or other sources, the conversion factor is 3.8 persons f

III-03 Distance to Nearest Drinking Water Well: Enter the distance in miles to the nearest tenth, hundredth, or thousandth (as needed to indicate the precision required) from the site to the nearest drinking water well.

III-04 Depth to Groundwater: Enter the depth in feet to groundwater.

III-05 Depth of Groundwater Flow: Enter the cardinal direction of groundwater flow, e.g., NNW.

III-06 Depth to Aquifer of Concern: Enter the depth in feet to the aquifer of concern.

III-07 Potential Yield of Aquifer: Enter the potential yield of the aquifer in gallons per day.

III-08 Sole Source Aquifer: Check the appropriate box to indicate the aquifer of concern is, or is not, a sole source aquifer.

III-09 Description of Wells: Provide a narrative description of wells in the vicinity of the site, including usage, depth, and location relative to population and buildings.

III-10 Recharge Area: Check the appropriate box to indicate the site is located in a recharge area. Comments provide additional information on the recharge area.

III-11 Discharge Area: Check the appropriate box to indicate the site is located in a discharge area. Comments provide additional information on the discharge area.

#### Surface Water

IV-01 Surface Water Use: Check the appropriate box to indicate surface water use in the vicinity of the site. The order of precedence is Reservoir, Recreation, Drinking Water Source; Irrigation, Economically Important Reserves; Commercial/Industrial; Not Currently Used.

IV-02 Affected/Potentially Affected Bodies of Water: Enter the names of bodies of surface water affected, or potentially affected, by contaminants from the site. List the body of surface water nearest the site first. For each body of water check Affected if contaminants have been identified in samples of the water. Enter the shortest distance from the body of water to the site in miles to the nearest tenth, hundredth, or thousandth (as needed to indicate the precision required).

#### Demographic and Property Information

V-01 Total Population Within: Enter the total population within one (1) mile, two (2) miles, and three (3) miles of the site. Distances are measured from site boundaries. Population for the purposes of the Site Inspection Report includes residents and daytime workers and students but excludes transients in the neighborhood or on local highways and roads. When estimating population from aerial photographs or other sources, the conversion factor is 3.8 persons for each dwelling unit or 3 persons per acre in rural areas.

V-02 Distance to Nearest Population: Enter in miles to the nearest tenth, hundredth, or thousandth (as

tance from the site boundary to the nearest population (one person minimum).

V-03 Number of Buildings Within Two (2) Miles of Site: Enter the number of buildings within two miles from the boundaries of the site.

V-04 Distance to Nearest Off-Site Building: Enter the distance in miles to the nearest tenth, hundredth, or thousandth (as needed to indicate the precision required) from the site boundary to the nearest off-site building.

V-05 Population in Vicinity of Site: Provide a narrative description of the nature of the population within the vicinity of the site. Examples include rural area, small truck farms, urban industrial area, densely populated urban residential area.

#### VI. Environmental Information

VI-01 Permeability of Unsaturated Zone: Check the appropriate box to indicate the permeability of the earth material above the water table in the vicinity of the site.

VI-02 Permeability of Bedrock: Check the appropriate box to indicate the permeability of the bedrock in the vicinity of the site.

VI-03 Depth to Bedrock: Enter the depth to bedrock in feet.

VI-04 Depth of Contaminated Soil Zone: Enter the depth of the contaminated soil zone in feet.

VI-05 Soil pH: Enter the pH of the soil in the vicinity of the site.

VI-06 Net Precipitation: Enter net precipitation in inches. If net precipitation is not known, subtract the average evaporation figure on the U.S. National Weather Service map showing average annual evaporation in inches from the U.S. Environmental Data Service map showing mean annual precipitation.

VI-07 One Year 24 Hour Rainfall: Enter in inches the figure for one year 24 hour rainfall.

VI-08 Slope: Enter the percentage of site slope, the direction of site slope, and the percentage of the surrounding terrain average slope.

VI-09 Flood Potential: Enter the boundary year for the floodplain in which the site is located. Sites flooded annually are in a 1 (one) year floodplain. Other examples include 10, 20, 50, 100, 500, etc., indicating the probability of flooding within that time period.

VI-10 Site is on Barrier Island, Coastal High Hazard Area, Riverine Floodway: If site is located in one of these areas, check this box.

VI-11 Distance to Wetlands: If applicable, enter the distance in miles to the nearest tenth, hundredth, or thousandth (as needed to indicate the precision required) from the site to the closest wetlands (five acre minimum) for Estuarine and Other types of wetlands.

VI-12 Distance to Critical Habitat: If applicable, enter the distance in miles to the nearest tenth, hundredth, or thousandth (as needed to indicate the precision required) from the site to the nearest critical habitat

of an endangered species. Enter the name(s) of the endangered species.

**VI-13 Land Use in Vicinity:** Enter the distance in miles to the nearest tenth, hundredth, or thousandth (as needed to indicate the precision required) to the nearest Commercial/Industrial area; Residential Area, National/State Parks, Forests, or Wildlife Reserves; or Agricultural Lands, Prime Ag Land and Ag Land. Prime Ag Land is that crop, pasture, range, or forest land which produces the highest yield in relation to inputs. Ag Land is the remaining agricultural land, frequently considered marginal.

**VI-14 Description of Site in Relation to Surrounding Topography:** Provide a narrative description of significant or unusual aspects of the surrounding topography in relation to the site. Examples might include: site is in a valley surrounded on all sides by mountains, site is at edge of a river or stream which floods frequently, etc.

**VII. Sources of Information:** List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

**Part 6 Sample and Field Information**

**\*I. Identification:** Refer to Part 1-1.

**II. Samples Taken**

**II-01 Number of Samples Taken:** Next to each sample type enter the number of samples of that type taken.

**II-02 Samples Sent To:** Enter the name of the laboratory or other facility where the samples were sent for analysis.

**II-03 Estimated Date Results Available:** Enter the estimated date the results are expected to be available.

**III. Field Measurements Taken**

**III-01 Type:** Enter the type, e.g., radioactivity, explosivity, organic vapor or gas detection and analysis, reagent type gas detection, of each field measurement taken.

**III-02 Comments:** Describe results of field measurements, whether they were taken on or off site, and if applicable, the type of disposal facility tested, e.g., drum, surface impoundment, landfill.

**IV. Photographs and Maps**

**IV-01 Type:** If photographs of the site have been taken, check the appropriate box(es) to indicate the type.

**IV-02 In Custody Of:** Enter the name of the organization or person who has custody of the photographs.

**IV-03 Maps:** Check the appropriate box to indicate that maps of the site area have been prepared or obtained.

**IV-04 Location of Maps:** If site maps are available, indicate their location, e.g., Region 1 Air and Hazardous Materials Division.

**VI. Sources of Information:** List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

**Part 7 Owner Information**

**\*I. Identification:** Refer to Part 1-1.

**II. Current Owner(s) - Parent Company:** Current owner(s) and parent companies, for those owners which are companies partly or wholly owned by another company, provide locator information about responsible parties. Each Part 7 provides space for four (4) current owners and their respective parent companies. If additional space is required, complete another Part 7.

**II-01 Name:** Enter the legal name of the owner of the site. The owner may be a firm, government agency, association, individual, etc.

**II-02 D&B Number:** Where available, enter the owner's D&B (Dun and Bradstreet) number. If the current owner is a federal agency, enter the GSA identification code.

**II-03 Street Address:** Enter the business, mailing, or residential street address of the owner.

**II-04 SIC Code:** If applicable, enter the owner's primary SIC Code.

**II-05 City:** Enter the city of the owner's business, mailing, or residential address.

**II-06 State:** Enter the two character alpha FIPS code for the state of the owner's business, mailing, or residential address.

**II-07 Zip Code:** Enter the five digit zip code for the owner's business, mailing, or residential address.

**II-08 Name:** If the owner is a partly or wholly owned subsidiary of another company, enter the legal name of the owner's parent company.

**II-09 D&B Number:** Enter the parent company's Dun and Bradstreet number.

**II-10 Street Address:** Enter the business or mailing street address of the parent company.

**II-11 SIC Code:** If applicable, enter the parent company's primary SIC code.

**II-12 City:** Enter the city of the parent company's business or mailing address.

**II-13 State:** Enter the two character alpha FIPS code for the state of the parent company's business or mailing address.

**II-14 Zip Code:** Enter the five digit zip code for parent company's business or mailing address.

**III. Previous Owner(s):** List previous owners in reverse chronological order, i.e., most recent first. If additional space is required, complete another Part 7.

**III-01 Name:** Enter the legal name of the previous owner. The previous owner may have been a firm, gov

III-02 D&B Number: Enter the previous owner's Dun and Bradstreet number if available. If the previous owner was a federal agency, enter the GSA identification code if available.

III-03 Street Address: Enter the business, mailing, or residential street address of the previous owner.

III-04 SIC Code: If applicable, enter the primary SIC Code of the previous owner.

III-05 City: Enter the city of the previous owner's business, mailing, or residential address.

III-06 State: Enter the two character alpha FIPS code for the state of the previous owner's business, mailing, or residential address.

III-07 Zip Code: Enter the zip code of the previous owner's business, mailing, or residential address.

V. Realty Owner(s): Realty owner applies when the owner leased to another entity property which was used for the storage or disposal of hazardous waste. List current or most recent first.

V-01 Name: Enter the legal name of the realty owner. The realty owner may be a firm, government agency, association, individual, etc.

V-02 D&B Number: Enter the previous owner's Dun and Bradstreet number if available. If the previous owner was a federal agency, enter the GSA identification code if available.

V-03 Street Address: Enter the realty owner's business, mailing, or residential street address.

V-04 SIC Code: If applicable, enter the realty owner's primary SIC Code.

V-05 City: Enter the city of the realty owner's business, mailing, or residential address.

V-06 State: Enter the two character alpha FIPS code for the state of the realty owner's business, mailing, or residential address.

V-07 Zip Code: Enter the zip code of the realty owner's business, mailing, or residential address.

Sources of Information: List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

#### Part B Operator Information

Identification: Refer to Part 1-I.

Current Operator—Operator's Parent Company: Information on operators is applicable when the operator is not the owner.

II-01 Name: Enter the legal name of the operator. The operator may be a firm, government agency, association, individual, etc.

II-02 D&B Number: Enter the operator's Dun and Bradstreet number if available. If the operator is a fed-

II-03 Street Address: Enter the operator's business, mailing, or residential street address.

II-04 SIC Code: If applicable, enter the operator's primary SIC Code.

II-05 City: Enter the city of the operator's business, mailing, or residential address.

II-06 State: Enter the two character alpha FIPS code for the state of the operator's business, mailing, or residential address.

II-07 Zip Code: Enter the zip code of the operator's business, mailing, or residential address.

II-08 Years of Operation: Enter the beginning and ending years (or beginning only if operations are on-going), e.g., 1932/1948, of operation at the site.

II-09 Name of Owner: Enter the name of the owner for the period cited for this operator.

II-10 Name: If applicable, enter the legal name of the operator's parent company.

II-11 D&B Number: Enter the operator's parent company Dun and Bradstreet number if available.

II-12 Street Address: Enter the operator's parent company business, mailing, or residential street address.

II-13 SIC Code: If applicable, enter the operator's parent company primary SIC Code.

II-14 City: Enter the city of the operator's parent company business, mailing, or residential address.

II-15 State: Enter the two character alpha FIPS code for the state of the operator's parent company business, mailing, or residential address.

II-16 Zip Code: Enter the zip code of the operator's parent company business, mailing, or residential address.

#### III. Previous Operator(s)—Previous Operators' Parent Companies

III-01 Name: Enter the legal name of the previous operator. The previous operator may be a firm, government agency, association, individual, etc.

III-02 D&B Number: Enter the previous operator's Dun and Bradstreet number if available. If the previous operator was a federal agency, enter the GSA identification code if available.

III-03 Street Address: Enter the previous operator's business, mailing, or residential street address.

III-04 SIC Code: If applicable, enter the previous operator's primary SIC Code.

III-05 City: Enter the city of the previous operator's business, mailing, or residential address.

III-06 State: Enter the two character alpha FIPS code for the state of the previous operator's business, mailing, or residential address.

III-07 Zip Code: Enter the zip code of the previous operator's business, mailing, or residential address.

III-08 Years of Operation: Enter the beginning and ending years of operation for this operator at the site.

III-10 Name: If applicable, enter the legal name of the previous operator's parent company.

III-11 D&B Number: Enter the previous operator's parent company Dun and Bradstreet number if available.

III-12 Street Address: Enter the previous operator's parent company business, mailing, or residential street address.

III-13 SIC Code: If applicable, enter the previous operator's parent company primary SIC Code.

III-14 City: Enter the city of the previous operator's parent company business, mailing, or residential address.

III-15 State: Enter the two character alpha FIPS code for the state of the previous operator's parent company business, mailing, or residential address.

III-16 Zip Code: Enter the zip code of the previous operator's parent company business, mailing, or residential address.

V. Sources of Information: List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

#### Part 9 Generator/Transporter Information

I. Identification: Refer to Part 1-1.

II. On-Site Generator: A company or agency, located within the contiguous area of the site and generating waste disposed on the site, is entered here.

II-01 Name: If there is an on-site generator, enter the legal name of the on-site generator. The on-site generator may be a firm or government agency.

II-02 D&B Number: Where available, enter the on-site generator's D&B (Dun and Bradstreet) number. If the on-site generator is a federal agency, enter the GSA identification code.

II-03 Street Address: Enter the business or mailing street address of the on-site generator.

II-04 SIC Code: If applicable, enter the on-site generator's primary SIC Code.

II-05 City: Enter the city of the on-site generator's business or mailing address.

II-06 State: Enter the two character alpha FIPS code for the state of the on-site generator's business or mailing address.

II-07 Zip Code: Enter the five digit zip code for the on-site generator's business or mailing address.

III. Off-Site Generator(s): Those companies or agencies off-site who have generated waste which has been disposed at the site are listed here.

III-01 Name: Enter the legal name of the off-site generator. The off-site generator may be a firm or government agency.

III-03 Street Address: Enter the business or mailing street address of the off-site generator.

III-04 SIC Code: If applicable, enter the off-site generator's primary SIC Code.

III-05 City: Enter the city of the off-site generator's business or mailing address.

III-06 State: Enter the two character alpha FIPS code for the state of the off-site generator's business or mailing address.

III-07 Zip Code: Enter the five digit zip code for the off-site generator's business or mailing address.

IV. Transporter(s): Those carriers who are known to have transported waste to the site are listed here.

IV-01 Name: Enter the legal name of the transporter. The transporter may be a firm, government agency, association, individual, etc.

IV-02 D&B Number: Where available, enter the transporter's D&B (Dun and Bradstreet) number. If the transporter is a federal agency, enter the GSA identification code.

IV-03 Street Address: Enter the business, mailing, or residential street address of the transporter.

IV-04 SIC Code: If applicable, enter the transporter's primary SIC Code.

IV-05 City: Enter the city of the transporter's business, mailing, or residential address.

IV-06 State: Enter the two character alpha FIPS code for the state of the transporter's business, mailing, or residential address.

IV-07 Zip Code: Enter the five digit zip code for the transporter's business, mailing, or residential address.

V. Sources of Information: List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

#### Part 10 Past Response Activities

I. Identification: Refer to Part 1-1.

II. Past Response Activities

II-01 Past Response Activities: Check the appropriate box(es) to indicate response activities initiated prior to the passage of CERCLA, December, 1980.

II-02 Date: Enter the start date (or approximate date) of the activity.

II-03 Agency: Enter the name of the Agency responsible for the activity.

II-04 Description: Provide a brief narrative description of the activity.

III. Sources of Information: List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources

**Part 11 Enforcement Information**

**Identification:** Refer to Part 1-I.

**Enforcement Information**

**11-01 Past Regulatory/Enforcement Action:** Check the appropriate box to indicate past regulatory or enforcement action at the federal, state, or local level related to this site.

**11-02 Description of Federal, State, Local Regulatory or Enforcement Action:** Provide a narrative description

of regulatory or enforcement action to date. Do not include any enforcement action contemplated in the process of development.

**III.**

**Sources of Information:** List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

APPENDIX F

SITE SAFETY PLAN

Site Safety Plan  
For  
Toastmaster, Inc.  
Laurinburg, North Carolina  
November 29, 1984

by

Lenox E. Bramble, Environmental Engineer  
NC Department of Human Resources  
Division of Health Services  
Solid & Hazardous Waste Management Branch  
RCRA 3012

DATE OF PLAN PREPARATION

November 29, 1984

SCHEDULED DATE OF SITE INSPECTION

December 18, 1984

HAZARDOUS WASTE SITE

Site Name: Toastmaster, Inc.  
Site Number: NC D037160439

HAZARDOUS/TOXIC MATERIALS

Chromium  
Cadmium  
Nickel  
Cyanide  
Hexavalent Chromium  
Trichloroethylene  
1-1-1-Trichloroethane

HAZARD ASSESSMENT

Chromium/Hexavalent Chromium: Hexavalent Chromium compounds have an irritating and corrosive effect on tissue, resulting in ulcers and dermatitis on prolonged contact. Chromium is a known carcinogen.

Cadmium: Highly toxic, especially by inhalation of dust or fumes. Carcinogenic. Flammable in powder form.

Nickel: Flammable and toxic as dust or fume. Carcinogenic.

Cyanide: Highly toxic.

Trichloroethylene: Toxic by inhalation

1-1-1-Trichloroethane: Irritating to eyes and tissue.

PERSONNEL IN ATTENDANCE

Len Bramble, 1901 Environmental Engineer  
Mark Durway Geologist

LEVEL OF PROTECTION

Based on prior sampling results at this site, the recommended level of protection for all site inspection participants working in the primary working/sampling area is Level D. See attachment for appropriate equipment.

PRELIMINARY INVENTORY OF SAMPLING LOCATIONS AND TYPES

<u>LOCATION</u>	<u>SAMPLE TYPE</u>
Primary Lagoon	Soil, Sludge/Heavy Metals, Solvents, Organics
Secondary Lagoon	Soil, Sludge/Heavy Metals, Solvents, Organics
Sand Filter Bed	Soil, Sludge/Heavy Metals, Solvents, Organics
Burial Trenches	Soil, Sludge/Heavy Metals, Solvents, Organics
5 Monitoring Wells	Water/Heavy Metals, Solvents, Organics

EMERGENCY PROCEDURES

If, in the course of the Toastmaster Site Inspection, the Personnel in attendance or any others either participating in or observing this Site Inspection become subjected to actual physical exposure or come in contact with any hazardous or toxic substances resulting in (or potentially resulting in) any adverse and/or abnormal physical reaction, the following criteria applies:

SEVERE EXPOSURE/REACTION - Proceed immediately to the Toastmaster front offices and place a telephone call to the following:

Scotland County Emergency Service  
1226 South Main Street  
Laurinburg, NC  
(919) 276-1313

LESSER DEGREE OF EXPOSURE/REACTION NOT REQUIRING EMERGENCY TRANSPORTATION - Proceed to the Scotland County Memorial Hospital, as illustrated on the attached map, at the following location:

Scotland County Memorial Hospital  
Lauchwood Drive  
Laurinburg, NC  
(919) 276-2121

LB/lw/1670A

## LEVEL D PROTECTION

### Equipment

1. Coveralls, cotton
2. Underwear, cotton
3. Boots/Shoes, safety
4. Safety Glasses
5. Hard Hat and Face Shield \*
6. Work Gloves, leather

### When to Use

1. Sites: Apparent No-Problem Site; Industrial Workplate Site; Uncontrolled Hazardous Substance Facility
2. Site set-up operations in support area
3. On sites that have been investigated and characterized as having no apparent toxic hazards

### Used By

Team members working in the support area or on-site (providing no toxic hazards have been detected).

\* Optional