

Hazardous Waste Section
File Room Document Transmittal Sheet

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Your Name: MEL DEAVER
EPA ID: NCR000163733
Facility Name: TRACTOR SUPPLY #1263
Document Group: General (G)
Document Type: Notification 8700 (8700)
Description:
Date of Doc: 5/7/2014
Author of Doc: TREY BROWN

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Date Recieved by File Room:

Date Scanned:

Month	Day	Year
4	14	16

NCR000163733

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North Carolina Department of Environment and Natural Resources

Pat McCrory
Governor

John E. Skvaria, III
Secretary

June 02, 2014

TREY BROWN
TRACTOR SUPPLY #1263
200 POWELL PLACE
BRENTWOOD TN 37027

RE: EPA ID # NCR000163733 - TRACTOR SUPPLY #1263

Dear Facility Contact:

Thank you for notifying the North Carolina Hazardous Waste Section of your activities as a Conditionally Exempt Small Quantity Generator of hazardous waste. The EPA ID Number assigned to your site is shown above. Please notify us if any information about your site changes: such as the facility name, site address, regulatory status, facility contact/address/phone number, or if your facility plans to close, by completing an EPA Form 8700-12.

NC Hazardous Waste Section
1646 Mail Service Center
Raleigh, NC 27699-1646

If you are considered a Large Quantity Generator (LQG), Small Quantity Generator (SQG), Transporter, or a Treater, Storer or Disposer (TSD) facility, you are required to pay an annual fee to the State of North Carolina. Accordingly, an invoice is attached to this letter. These fees are used to support NC State programs and ensure the safe management of hazardous waste. We encourage you to become familiar with the NC Hazardous Waste Management Rules that have been codified in the NC Administrative Code at 15A NCAC 13A. You may obtain a printed copy of the rules for \$32.00 by contacting Patricia Davalos at 919-707-8233. For more information on the rules, visit <http://portal.ncdenr.org/web/wm/hw/rules>. We specifically draw your attention to Rules .0101, .0102, .0106 and .0107. These provisions address requirements potentially applicable to generators of hazardous waste. For an explanation of EPA requirements, go to <http://www.epa.gov/wastes/hazard/downloads/tool.pdf>.

If you have any questions, please contact Melodi Deaver at (919)-707-8204.

Sincerely,

Patricia Davalos, Supervisor
Hazardous Waste Section

cc: Central Files(General)

IBEAM - RCRA Site Detail

Report run on: June 02, 2014

NCR000163733 TRACTOR SUPPLY #1263

County: BEAUFORT Source Type: N Seq. Number: 1 Receive Date: 14-May-2014

Location 608 W 15TH ST
Address: WASHINGTON, NC 27889

Mailing 200 POWELL PLACE
Address: BRENTWOOD, TN 37027

Contact Person TREY BROWN
For Source (615) 440-4660
Information

200 POWELL PLACE
BRENTWOOD, TN 37027
US

Owner (current)
MIDTOWN CROSSING LLC

1468 CAROLINA AVE
WASHINGTON, NC 27889

Type: P

From: 08/17/2010

To:

Phone: (252) 946-8021

Operator (current)
TRACTOR SUPPLY COMPANY

608 W 15TH ST
WASHINGTON, NC 27889

Type: P

From: 08/05/2010

To:

Phone:

Land Type: P

Non Notifier : E

Commercial Availability:

Tsd Date:

Accessibility:

No. Employees :

State District:

Regulated Waste Activities

Hazardous Waste Generator Status - Federal: Conditionally Exempt SQG; State: Conditionally Exempt SQG

Transfer Facility:

Used Oil Activities

Other Hazardous Waste Generator Activities

Used Oil Transport Activity

Off-Specification Used Oil Burner: No

Importer Activity: No

Transporter: No

Used Oil Fuel Marketer Activity

Mixed Waste Generator: No

Transfer Facility: No

Marketer who direct shipment

Transporter Activity: No

Used Oil Processor and/or
Re-refiner Activity

off-specification used oil to
off-specification used oil burner: No

TSD Activity: No

Processor: No

Marketer who first claims the used

Recycler Activity: No

Refiner No

oil meets the specifications: No

Exempt Boiler and/or Industrial Furnace

Underground
Injection Control: No

Destination Facility for
Universal Waste: No

Small Quantity Onsite Burner Exemption: No

Smelting, melting, Refining Furnace

Exemption: No

Certification Information

First Name : TREY

Title RISK ANALYST

Last Name : BROWN

Date Signed 05/07/2014

NAICS Codes

453998

Comments

CREATED NEW 8700-12 DATED 5/7/2014 AS A CESQG. MD 6/2/2014

10. Type of Regulated Waste Activity (at your site)

Mark "Yes" or "No" for all current activities (as of the date submitting the form); complete any additional boxes as instructed.

A. Hazardous Waste Activities; Complete all parts 1-10.

- Y N 1. Generator of Hazardous Waste
If "Yes", mark only one of the following - a, b, or c.
 - a. LQG: Generates, in any calendar month, 1,000 kg/mo (2,200 lbs./mo.) or more of hazardous waste; or Generates, in any calendar month, or accumulates at any time, more than 1 kg/mo (2.2 lbs./mo) of acute hazardous waste; or Generates, in any calendar month, or accumulates at any time, more than 100 kg/mo (220 lbs./mo) of acute hazardous spill cleanup material.
 - b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs./mo) of non-acute hazardous waste.
 - c. CESQG: Less than 100 kg/mo (220 lbs./mo) of non-acute hazardous waste.

If "Yes" above, indicate other generator activities in 2-4.

- Y N 2. Short-Term Generator (generate from a short-term or one-time event and not from on-going processes). If "Yes", provide an explanation in the Comments section.
- Y N 3. United States Importer of Hazardous Waste
- Y N 4. Mixed Waste (hazardous and radioactive) Generator

- Y N 5. Transporter of Hazardous Waste
If "Yes", mark all that apply.
 - a. Transporter
 - b. Transfer Facility (at your site)
- Y N 6. Treater, Storer, or Disposer of Hazardous Waste Note: A hazardous waste Part B permit is required for these activities.
- Y N 7. Recycler of Hazardous Waste
- Y N 8. Exempt Boiler and/or Industrial Furnace
If "Yes", mark all that apply.
 - a. Small Quantity On-site Burner Exemption
 - b. Smelting, Melting, and Refining Furnace Exemption

- Y N 9. Underground Injection Control
- Y N 10. Receives Hazardous Waste from Off-site

B. Universal Waste Activities; Complete all parts 1-2.

- Y N 1. Large Quantity Handler of Universal Waste (you accumulate 5,000 kg or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste managed at your site. If "Yes", mark all that apply.
 - a. Batteries
 - b. Pesticides
 - c. Mercury containing equipment
 - d. Lamps
 - e. Other (specify) _____
 - f. Other (specify) _____
 - g. Other (specify) _____

- Y N 2. Destination Facility for Universal Waste
Note: A hazardous waste permit may be required for this activity.

C. Used Oil Activities; Complete all parts 1-4.

- Y N 1. Used Oil Transporter
If "Yes", mark all that apply.
 - a. Transporter
 - b. Transfer Facility (at your site)
- Y N 2. Used Oil Processor and/or Re-refiner
If "Yes", mark all that apply.
 - a. Processor
 - b. Re-refiner
- Y N 3. Off-Specification Used Oil Burner
- Y N 4. Used Oil Fuel Marketer
If "Yes", mark all that apply.
 - a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner
 - b. Marketer Who First Claims the Used Oil Meets the Specifications

D. Eligible Academic Entities with Laboratories—Notification for opting into or withdrawing from managing laboratory hazardous wastes pursuant to 40 CFR Part 262 Subpart K

❖ You can ONLY Opt into Subpart K if:

- you are at least one of the following: a college or university; a teaching hospital that is owned by or has a formal affiliation agreement with a college or university; or a non-profit research institute that is owned by or has a formal affiliation agreement with a college or university; AND
- you have checked with your State to determine if 40 CFR Part 262 Subpart K is effective in your state

Y N 1. Opting into or currently operating under 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories See the item-by-item instructions for definitions of types of eligible academic entities. Mark all that apply:

- a. College or University
- b. Teaching Hospital that is owned by or has a formal written affiliation agreement with a college or university
- c. Non-profit Institute that is owned by or has a formal written affiliation agreement with a college or university

Y N 2. Withdrawing from 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories

11. Description of Hazardous Waste

A. Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.

D001

D002

F005

B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-Regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed.

N/A

EPA ID Number

NCR000163733

OMB#: 2050-0024; Expires 12/31/2014

12. Notification of Hazardous Secondary Material (HSM) Activity

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

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

13. Comments

*USED OIL DIY PROGRAM

14. Certification. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations. For the RCRA Hazardous Waste Part A Permit Application, all owner(s) and operator(s) must sign (see 40 CFR 270.10(b) and 270.11).

Signature of legal owner, operator, or an authorized representative

Name and Official Title (type or print)

Date Signed (mm/dd/yyyy)



TREY BROWN
RISK ANALYST

05/07/2014