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North Carolina Department of Environment and Natural Resources
Division of Waste Management
Superfund Section
Inactive Hazardous Sites Branch

NCDENR

NOTIFICATION OF AN INACTIVE HAZARDOUS SUBSTANCE OR WASTE DISPOSAL SITE

Please read instructions before completing and type or print in black ink.

I. SITE NAME AND LOCATION:

Site Name (one site per form) Engineered Controls International, LLC
Location (street address) 100 Rego Drive
City Elon US EPA ID# (if known) _____
County Alamance
Directions to Site Site is located at the intersection of Rego Drive and W. Haggard Avenue (SR100) in Elon.

Attach a USGS topographic map or map of equal or reasonably similar scale (1 inch = 2000 ft.) showing the location and vicinity of the site or facility. Label map with the site name.

II. PERSON COMPLETING FORM:

Name _____
Mailing Address 100 Rego Drive
City Elon State NC Zip Code 27244
Telephone (__) _____

Present Owner X
Past Owner _____
Present Operator X
Past Owner _____
Other _____
(specify) _____

III. PRESENT OWNER:

Individual Owner or Company Name
Engineered Controls, International, LLC
Executive Officer _____
Mailing Address 100 Rego Drive
City Elon State NC Zip Code 27244
Telephone (__) _____

Corporation _____
Partnership _____
Individual _____
Government Unit _____
Other X

(specify) Limited Liability Company

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IV. CURRENT SITE USE:

Check the item or items which describe the current use of the site.

Residential	____	Forest Land	____	Retirement Home	____
Business	____	Farm Land	____	Other	____
Industrial	__X__	School/Day Care	____	*(specify)*	____
Pasture Land	____	Hospital	____		____

V. ON-SITE RESIDENTS:

Are there any on-site residents? ___ Yes _X_ No
Number of children (6 years old) living on site _____ Number of adults _____

VI. SURROUNDING PROPERTY USE:

Check the appropriate description of the area surrounding the site. (More than one may apply.)

Residential	__X__	Forest Land	____	Retirement Home	____
Business	__X__	Farm Land	____	Other	____
Industrial	__X__	School/Day Care	____	*(specify)*	____
Pasture Land	____	Hospital	____		____

VII. SITE OPERATIONS *(MORE THAN ONE MAY APPLY.)*:

		Current	Previous
1.	Mining	___	___
2.	Paper and wood production	___	___
3.	Textiles	___	___
4.	Fertilizer	___	___
5.	Printing/painting	___	___
6.	Leather tanning	___	___
7.	Iron/steel foundry	___	___
8.	Chemical, general	___	___
9.	Plating/polishing	___	___
10.	Military/ammunition	___	___
11.	Firing range	___	___
12.	Rubber/plastics	___	___
13.	Utility companies/transformers	___	___
14.	Sanitary/refuse	___	___
15.	Photo finishing	___	___
16.	Lab/hospital	___	___
17.	Wood treating	___	___
18.	Battery reclamation	___	___
19.	Pesticides formulation, packaging and/or distribution	___	___
20.	Herbicide formulation, packaging and/or distribution	___	___
21.	Other agrichemical formulation, packaging and/or distribution	___	___
22.	Dry cleaning	___	___
23.	Petrochemical processing or refining	___	___
24.	Furniture manufacturing or finishing	___	___
25.	Drum reconditioning	___	___
26.	Unknown	___	___
27.	Other (specify) Current: Manufacturing of metal valves; previous cardboard box manufacturing	X	X

VIII. ENVIRONMENTAL PERMITS:

List all previous and current environmental permits below.

Type of Permit *(e.g. landfill. nondischarge. etc.)*	Past Present *(circle one)*	Permit Number	Date Issued	Issuing Agency
	Past Present			
	Past Present			
	Past Present			
	Past Present			
	Past Present			
	Past Present			
	Past Present			

IX. KNOWN OR SUSPECTED RELEASES OF HAZARDOUS SUBSTANCES OR WASTE TO THE ENVIRONMENT:

List all on-site spills, disposals and other releases of hazardous substances or materials containing hazardous substances.

Material/ Chemical Released (Known and suspected)	Physical State of Material (Use codes below)	Approx. Volume Released	Date of Released	Suspected Contaminants (Use codes below)	Source of Release (e.g. tank, buried drums, landfill product spill, etc.)	Known or Suspected Contamination: Ground water	Surface Water	Sediment	Soil
Chlorinated Solvent	L	Unknown	Unknown	O	Unknown	K			K
Petroleum Compound	L	Unknown	Unknown	Pe	Unknown	K			
Metals	S	Unknown	Unknown	M	Unknown	K			K

Physical State Codes

G	-	Containerized Gas
L	-	Liquid
S	-	Solid/Powder
Sl	-	Sludge

A	-	Acids
Ab	-	Asbestos
Am	-	Ammonia
B	-	Base
C	-	Cyanide

Codes for Suspected Contaminants

D	-	Dioxins
M	-	Metals
Mu	-	Mixed Municipal Waste
O	-	Organic Chemicals

P	-	PCBs
Pe	-	Petroleum Products
PS	-	Pesticides
W	-	Waste Oil

X. TOTAL AREA OF ALL DISPOSALS, SPILLS, OR RELEASES OF HAZARDOUS SUBSTANCES OR WASTE:

___ less than 1 acre
___ 1 acre or more, but less than 5 acres
___ 5 acres or more, but less than 10 acres
___ 10 acres or more
_X_ Unknown

XI. AVAILABILITY OF ENVIRONMENTAL ANALYTICAL DATA:

Do any environmental reports or laboratory analytical data exist for the site? ___X__ Yes __ No
If yes, attach reports or data to this form.

XII. IDENTIFY WHETHER ANY OF THE FOLLOWING ARE PRESENT OR WERE PRESENT IN THE PAST AT THE SITE (More than one may apply.):

___	Debris pile(s)	_X_	Tank(s) above ground	___	Spill(s)
___	Land treatment of sludges	___	Septic tank(s)	___	Wastewater lagoon(s)
___	Landfill(s) or buried waste	___	Surface impoundment(s)	___	Drum(s)
_X_	Tank(s) underground	___	Underground injection of waste		

___ Other (specify) _____

XIII. ACCESSIBILITY OF SITE (More than one may apply.):

___ 24-hour security guard
___ Security guard 24-hour/day
___ Physical barrier (steep bank, creek, walls, etc.
___ Describe physical barriers _____
_____

__ Site completely surrounded by fence
___ Site partially surrounded by fence
___ Locked gate
___ Unlocked gate
___ No control of access to site
___ Other (specify) _____

XIV. WATER SUPPLY SOURCES:

Identify whether the following are present on site or on adjacent property.

	Present on Site		Present on Adjacent Property	
	Yes	No	Yes	No
Spring	___	_X_	___	___
Well	___	_X_	___	___
Surface Water Intake	___	_X_	___	___

XV. SITE SURFACE WATER:

Indicate whether any surface water bodies (e.g. streams and lakes) exist on the site or the property adjacent to the site.
An intermittent creek is present near the eastern property boundary
_____
_____
_____

XVI. CERTIFICATION AND SIGNATURE:

I certify that to the best of my knowledge and belief, the information supplied on this form is complete and accurate.

Signature Boone Date 4-24-12

Name and Title (Type or print) GARY L. BOONE, CEO

Mailing Address 100 Rego DR.
ELON, NC 27244

North Carolina STATE

Alamance COUNTY

I, Patricia T. Hill, a Notary Public for said County and State, do hereby certify that Gary R. Boone personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and official seal, this the 24th day of April 2012.

(Official Seal)

OFFICIAL SEAL
PATRICIA T. HILL
Notary Public - North Carolina
ALAMANCE COUNTY
My Commission Expires

Patricia T. Hill
Patricia T. Hill
Notary Public

My commission expires 2-7 2017.

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