

**HAZARDOUS WASTE SECTION - COMPLIANCE BRANCH  
FILE TRANSMITTAL & DATA ENTRY FORM**

**Your Name:** Anthony Foster

**Facility ID Number:** NCD980842132

**Facility Name:** ECOFLO, Inc.

**Document Group:** Inspection/Investigation (I)

**Document Type:** I - Focused Compliance Inspection (FCI)

**File Description/Comments:** TSDF

**Date of Document:** 2/29/2016

**Author(s) of Document:** Anthony Foster

**Inspector ID #:** NC055

**Suborganization:** Resident Inspector Program

**County (if not on report):** Guilford

# COMMERCIAL FACILITY REPORT

## Resident Inspector Program

Waste Management Division  
Department of Environmental Quality

DOCKET #: N/A

### INSPECTION AND EVALUATION

EPA ID #: <b>NCD 980842132</b>	FACILITY NAME: <b>ECOFLO, Inc.</b>
ADDRESS: <b>2750 Patterson St.</b>	CITY: <b>Greensboro, NC</b>
NEW <input checked="" type="checkbox"/>	UPDATE <input type="checkbox"/>
DATE(S) OF INSPECTION: <b>2/29/16</b>	
STAFF ID #: <b>55</b>	

EVALUATION TYPE: <b>6,7,9</b>	1 = Compliance Evaluation (CEI for HWS) 2 = Sampling / Monitoring. 3 = Record Review (Logs, Annual Report) 4 = Air / Water Permit Requirements 5 = Reinspection (Compliance Schedule). 6 = Cont. Plan / Prev & Prep (Safety/OSHA)	7 = Part B Permit 8 = Manifests / LDRs 9 = General 10 = Waste Analysis Plan 11 = Complaint Investigation 12 = BIF 80 = Informal Meeting
JOINT / SUB <input checked="" type="checkbox"/>	OFF SHIFT <input type="checkbox"/>	DURATION (Hrs) <u>5.0</u>

REINSPECTION ONLY: Date of Initial Evaluation: N/A

Original Docket #: N/A

### CLASS OF VIOLATION / DEFICIENCY

Class	O2/H2O	Safety/CP	FIN	Part B	Comp Sch	Man	LB	OT	W Mgt	BIF
SNC		O		O				O	O	
SV		O		O				O	O	

SNC = Significant Noncomplier

SV = Secondary Violation

#### Acceptable Codes

RS	XS	XS	XS	XS	XS	XS	XS	XS	XS	XS
ZO	ZO	ZO	ZO	ZO	ZO	ZO	ZO	ZO	ZO	ZO
H	HR	HI*	H	H	H	H	H	H	H	H

**Key:**  
 X = Violation(s)  
 O = No Violation  
 R = Referral to DEM or OSHA  
 H = HPV Violations Present  
 Z = Pending / Deficiency  
 S = Same Violation (repeated)  
 I = No Insurance Only  
 \* = SNC Only

### ENFORCEMENT ACTIONS: Area of Violation(s) = CP, PP, FI, PB, CS, MA, LB, OT, WM, BIF

CLASS	AREA OF VIOLATION	TYPE CODE	DATE ACTION TAKEN	COMPLIANCE DATES		PENALTY ASSES. COLL.		RESP AG
				SCHED.	ACTUAL			

**Codes for Types of Enforcement Actions:**

01 = Warning Letter	10 = Informal
02 = Ticket NOV	11 = Filed Civil Action
03 = Draft NOV	12 = Filed Criminal Action
04 = Admin. Complaint	13 = Civil Referral to AG
05 = Final Admin. Order	90 = Hearing

**Comments / Recommendations:** \_\_\_\_\_

**North Carolina Department of Environmental Quality  
Division of Waste Management**

**RESIDENT INSPECTOR REPORT**

**1) Facility Information**

ECOFLO  
2750 Patterson Street  
Greensboro, NC

**EPA ID# NCD 980842132**

**Permit Status:**     RCRA  
                               Air  
                               Water

**2) Facility Contact**

Ray Dudley

**Arrived:** 11:00 AM

**Departed:** 4:00 PM

**3) Date of Inspection / Inspector**

2/29/16  
Anthony Foster

**Shift:**             1st  
                           2nd  
                           3rd  
                           *Wkend*

**4) Facility Description Changes**

None

**5) Areas of Concentration**

General	Part B Permit	Physical	Container Management
Aisle Spacing	Labeling	Waste Management	Waste Compatibility

**6) Site Deficiencies**

None

**Docket #:** N/A

**7) Recommendations/Comments**

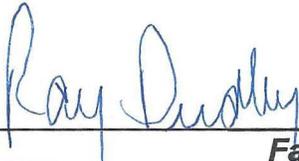
1. Please be reminded that all waste containers, including HHW waste containers, must be covered and closed tightly at all times unless the container is being directly worked with.

**8) Corrections Since Last Inspection**

None

**9) Referrals to DAQ/DWQ/OSHA**

None

	_____	2-29-16
	<b>Facility Representative</b>	<b>Date</b>
	_____	2-29-16
	<b>Anthony Foster - Resident Inspector</b>	<b>Date</b>