

File Room Document Transmittal Sheet

Your Name: BELLA NGUYEN
EPA ID: NCR000167122
Facility Name: TJ MAXX DC#894
Document Group: General (G)
Document Type: Notification 8700 (8700)
Description:
Date of Doc: 3/25/2016
Author of Doc: ASHLEY CAMPBELL

File Room Use Only

Date Recieved by File Room:

Date Scanned:

Month	Day	Year
5	11	16

NCR000167122

Scanner's Initials:

SA



Waste Management
ENVIRONMENTAL QUALITY

PAT MCCRORY
Governor

DONALD R. VAN DER VAART
Secretary

MICHAEL SCOTT
Acting Director

April 14, 2016

GLENN LYMOUS
TJ MAXX DC#894
14300 CAROWINDS BLVD
CHARLOTTE NC 28273

RE: EPA ID # NCR000167122 - TJ MAXX DC#894

Dear Facility Contact:

Thank you for notifying the North Carolina Hazardous Waste Section of your activities as a 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,

Julie Woosley, Chief
Hazardous Waste Section

cc: Central Files(General)



Waste Management
ENVIRONMENTAL QUALITY

2015 INVOICE

ATTENTION: ACCOUNTS PAYABLE
TJ MAXX DC#894
14300 CAROWINDS BLVD
CHARLOTTE, NC 28273

FACILITY LOCATION ADDRESS:

GLENN LYMOUS
TJ MAXX DC#894
14300 CAROWINDS BLVD
CHARLOTTE, NC 28273

FACILITY EPA ID #	INVOICE #	INVOICE DATE	AMOUNT DUE	DUE DATE	ENTER AMOUNT PAID
NCR000167122	HW71477	4/14/2016	175.00	05/14/2016	

- A. Fee Requirements: Pursuant to North Carolina General Statute 130A-294.1, a Facility must pay fee(s) based on its hazardous waste management activities. The fees are used to support government programs that ensure the safe management of hazardous waste. Failure to pay the required fees could result in an enforcement action with a penalty.
- B. Invoice amount is based on the registered status as of the invoice date and includes any past-due balances. A 10% late-payment penalty has been assessed for Fiscal Year 2014 if the annual fee was not paid by June 30, 2015.
- C. If Fiscal Year 2015 annual fees are not paid by June 30, 2016, the facility must pay a late-payment of 10% of the total amount due.
- D. In accordance with N.C.G.S. § 147-86.23, a facility may petition for waiver of any late-payment penalty but the Hazardous Waste Section will only grant a waiver for good cause shown.

FACILITY STATUS	FEE	TONNAGE	AMOUNT DUE
SMALL QUANTITY GENERATOR	\$175.00	-----	\$175.00
		PAST DUE	\$0.00
		CREDIT	\$0.00
		TOTAL AMOUNT DUE	\$175.00

E. Remit Payment:

To pay via electronic bank transfer, go to <http://portal.ncdenr.org/web/wm/hw/epayment>. You will need your EPA facility ID# and invoice number, as well as your bank routing and account numbers. There is no fee for electronic transfers. Partial payments are not allowed with this payment method.

To pay via mail with a paper check or money order, please make payable to N.C. Hazardous Waste Section. Include EPA ID# and Invoice # on check. Please note per NC General Statute (G.S. 25-3-506), a \$25.00 processing fee will be charged on all returned checks. Please return a copy of this invoice with your payment to:

**ATTN: PATRICIA DAVALOS
NC HAZARDOUS WASTE SECTION
1646 MAIL SERVICE CENTER
RALEIGH, NC 27699-1646**

IBEAM - RCRA Site Detail

Report run on: April 14, 2016

NCR000167122 TJ MAXX DC#894

County: MECKLENBURG Source Type: N Seq. Number: 2 Receive Date: 13-Apr-2016

Location 14300 CAROWINDS BLVD Address: CHARLOTTE, NC 28273	Mailing 14300 CAROWINDS BLVD Address: CHARLOTTE, NC 28273
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Contact Person GLENN LYMOUS For Source Information (704) 583-7722	14300 CAROWINDS BLVD CHARLOTTE, NC 28273 US
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Owner (current) TJX COMPANY	14300 CAROWINDS BLVD CHARLOTTE, NC 28273	Type: P
From: 01/01/1993	To:	Phone: (704) 588-9222

Operator (current) TJX COMPANY DC#894	14300 CAROWINDS BLVD CHARLOTTE, NC 28273	Type: P
From: 01/01/1993	To:	Phone: (704) 588-9222

Land Type: P	Non Notifier : E	Commercial Availability:	Tsd Date:
Accessibility:	No. Employees :	State District:	

Regulated Waste Activities

Hazardous Waste Generator Status - Federal: Small Quantity Generator; State: Small Quantity Generator

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 off-specification used oil to off-specification used oil burner:	No
Transporter Activity: No	Used Oil Processor and/or Re-refiner Activity	Marketer who first claims the used oil meets the specifications:	No
TSD Activity: No	Processor: No		
Recycler Activity: No	Refiner: No		
Exempt Boiler and/or Industrial Furnace	Underground Injection Control:	Destination Facility for Universal Waste:	No
Small Quantity Onsite Burner Exemption: No			
Smelting, melting, Refining Furnace Exemption: No			

Certification Information

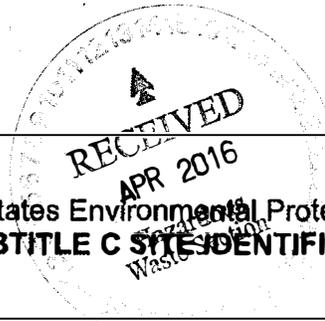
First Name : ASHLEY	Title	ENVIRO COMP
Last Name : CAMPBELL	Date Signed	03/25/2016

NAICS Codes

448150

Comments

CREATED NEW 8700-12 DATED 3/25/2016 AS A SQG MD 4/14/2016



SEND COMPLETED FORM TO:
The Appropriate State or Regional Office.

**United States Environmental Protection Agency
RCRA SUBTITLE C SITE IDENTIFICATION FORM**

1. Reason for Submittal

MARK ALL BOX(ES) THAT APPLY

Reason for Submittal:

- To provide an Initial Notification (first time submitting site identification information / to obtain an EPA ID number for this location)
- To provide a Subsequent Notification (to update site identification information for this location)
- As a component of a First RCRA Hazardous Waste Part A Permit Application
- As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____)
- As a component of the Hazardous Waste Report (If marked, see sub-bullet below)
 - Site was a TSD facility and/or generator of >1,000 kg of hazardous waste, >1 kg of acute hazardous waste, or >100 kg of acute hazardous waste spill cleanup in one or more months of the report year (or State equivalent LQG regulations)

2. Site EPA ID Number EPA ID Number NCR00P167122

3. Site Name Name: TJ MAXX DC#894

4. Site Location Information

Street Address: 14300 CAROWINDS BLVD

City, Town, or Village: CHARLOTTE County: MECKLENBURG

State: NC Country: USA Zip Code: 28273

5. Site Land Type Private County District Federal Tribal Municipal State Other

6. NAICS Code(s) for the Site (at least 5-digit codes)

A. 448150 C. _____

B. _____ D. _____

7. Site Mailing Address

Street or P.O. Box: 14300 CAROWINDS BLVD

City, Town, or Village: CHARLOTTE

State: NC Country: USA Zip Code: 28273

8. Site Contact Person

First Name: GLENN MI: _____ Last: LYMOUS

Title: MANAGER

Street or P.O. Box: 14300 CAROWINDS BLVD

City, Town or Village: CHARLOTTE

State: NC Country: USA Zip Code: 28273

Email: GLENN.LYMOUS@TJX.COM

Phone: 704-583-7722 Ext.: _____ Fax: _____

9. Legal Owner and Operator of the Site

A. Name of Site's Legal Owner: TJX COMPANY Date Became Owner: 1-1-1993

Owner Type: Private County District Federal Tribal Municipal State Other

Street or P.O. Box: 14300 CAROWINDS BLVD

City, Town, or Village: CHARLOTTE Phone: 704-588-9222

State: NC Country: USA Zip Code: 28273

B. Name of Site's Operator: TJ Maxx DC # 894 Date Became Operator: 1-1-1993

Operator Type: Private County District Federal Tribal Municipal State Other

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 2-10.

- 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

EPA ID Number

NCR000167122

OMB#: 2050-0024; Expires 01/31/2017

12. Notification of Hazardous Secondary Material (HSM) Activity

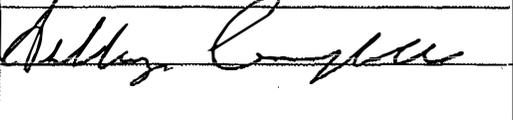
Y N Are you notifying under 40 CFR 260.42 that you will begin managing, are managing, or will stop managing hazardous secondary material under 40 CFR 261.2(a)(2)(ii), 40 CFR 261.4(a)(23), (24), or (25)?

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

13. Comments

PLEASE EMAIL EPA IDENTIFICATION NUMBER TO ASHLEY.CAMPBELL@STERICYCLE.COM

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)
	ASHLEY CAMPBELL/ENVIRO COMP	3/25/16

NCR 000 167 122

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	D005	D006	D007	D008	D006
D016	D035					

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.

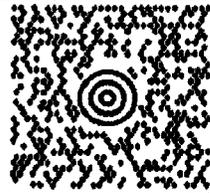
ATTN: ASHLEY CAMPBELL
(713) 985-5385
STERICYCLE
5151 SAN FELIPE STREET
HOUSTON TX 77058

0.1 LBS LTR

1 OF 1

SHIP TO:

ATTN: MOORESVILLE REGIONAL OFFICE
NC DEQ
610 EAST CENTER AVENUE
MOORESVILLE NC 28115

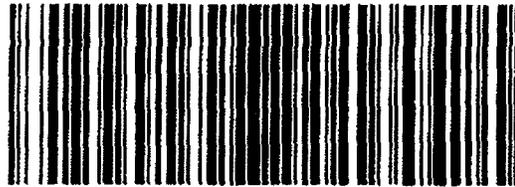


NC 280 1-02



UPS NEXT DAY AIR SAVER 1P

TRACKING #: 1Z Y8Y 053 13 4257 8081



BILLING: P/P

WS 18.0.34 LD620D 72.0A.01/2016



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