

Hazardous Waste Section  
File Room Document Transmittal Sheet

Your Name: Andrew Martin  
EPA ID: NCD061263315  
Facility Name: Nexeo Solutions  
Document Group: Inspection/Investigation (I)  
Document Type: Focused Compliance Inspection (FCI)  
Description: TSDF Inspection at Nexeo  
Date of Doc: 1/11/2016  
Author of Doc: Andrew Martin

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**File Room Use Only**

Date Recieved by File Room:

Date Scanned:

| Month | Day | Year |
|-------|-----|------|
|       |     |      |
|       |     |      |

NCD061263315

Scanner's Initials:

**COMMERCIAL FACILITY REPORT**  
**Resident Inspector Program**  
Waste Management Division  
Department of Environmental Quality

**DOCKET #:** NA

**INSPECTION AND EVALUATION**

|   |                                 |   |                        |
|---|---------------------------------|---|------------------------|
| EPA ID #: <b>NCD061263315</b>           |                                 | FACILITY NAME: <b>NEXEO Solutions</b>   |                        |
| ADDRESS: <b>3930 Glenwood Drive</b>     |                                 | CITY: <b>Charlotte, NC</b>              |                        |
| NEW <input checked="" type="checkbox"/> | UPDATE <input type="checkbox"/> | DATE(S) OF INSPECTION: <b>1/11/2016</b> | STAFF ID #: <b>115</b> |

|  |  |   |
|--|--|---|
| <b>EVALUATION TYPE:</b><br><u>3, 6, 7, 8, 9.</u> | 1 = Compliance Evaluation (CEI for HWS)<br>2 = Sampling / Monitoring.<br>3 = Record Review (Logs, Annual Report)<br>4 = Air / Water Permit Requirements<br>5 = Reinspection (Compliance Schedule).<br>6 = Cont. Plan / Prev & Prep (Safety/OSHA) | 7 = Part B Permit<br>8 = Manifests / LDRs<br>9 = General<br>10 = Waste Analysis Plan<br>11 = Complaint Investigation<br>12 = BIF<br>80 = Informal Meeting |
| JOINT / SUB <input type="checkbox"/>             |  |   |
| OFF SHIFT <input type="checkbox"/>               |  |   |
| DURATION (Hrs) <u>2.5</u>                        |  |   |

**REINSPECTION ONLY:** Date of Initial Evaluation:

Original Docket #:

**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  |    | O     |     |
| SV    |        | O         |     | 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

02 = Ticket NOV

03 = Draft NOV

04 = Admin. Complaint

05 = Final Admin. Order

10 = Informal

11 = Filed Civil Action

12 = Filed Criminal Action

13 = Civil Referral to AG

90 = Hearing

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

North Carolina Department of Environmental  
Quality  
Division of Waste Management

**RESIDENT INSPECTOR REPORT**

1) **Facility Information**

NEXEO Solutions  
3930 Glenwood Drive  
Charlotte, NC

**EPA ID#** NCD061263315

Permit Status:  RCRA  
 Air  
 Water

2) **Facility Contact**

Tim Nightwine

**Arrived:** 11:30 am  
**Departed:** 2:00 pm

3) **Date of Inspection / Inspector**

1/11/16  
Andrew Martin

Shift:  1st  
 2nd  
 3rd

4) **Facility Description Changes**

None

5) **Areas of Concentration**

Part "B" Permit      General  
Physical Inspection      Waste Management  
10-day Area      Perimeter Fencing

Waste Compatibility      Labeling  
Container Management  
Satellite Waste Areas

6) **Site Deficiencies**

None

**Docket #:** N/A

7) **Recommendations/Comments**

None

*JE Chafetz*

*1/11/16*

\_\_\_\_\_  
Facility Representative

\_\_\_\_\_  
Date

*Andrew Martin*

*1-11-16*

\_\_\_\_\_  
**Andrew Martin, QEP- Resident Inspector**

\_\_\_\_\_  
Date