

Hazardous Waste Section
File Room Document Transmittal Sheet

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Your Name: MEL DEAVER
EPA ID: NCR000140673
Facility Name: NCDSCA DC260001 (MAYFLOWER LDRY CLNRS)
Document Group: General (G)
Document Type: Notification 8700 (8700)
Description:
Date of Doc: 5/4/2016
Author of Doc: SCOTT STUPAK

File Room Use Only

Date Recieved by File Room:

Date Scanned:

Month	Day	Year
5	18	16

NCR000140673

Scanner's Initials:

STH



Waste Management
ENVIRONMENTAL QUALITY

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Secretary

MICHAEL SCOTT
Director

May 11, 2016

MIKE CUNNINGHAM
NCDSCA DC260001 (MAYFLOWER LDRY CLNRS)
1646 MAIL SERVICE CTR
RALEIGH, NC 27699-1646

RE: EPA ID # NCR000140673 - NCDSCA DC260001 (MAYFLOWER LDRY CLNRS)

Dear Facility Contact:

The North Carolina Hazardous Waste Section has received Subsequent Notification from your facility. Our office has accepted and processed the changes. Attached is a RCRA Site Detail Report for your review to ensure that the information is accurate.

If you have any questions or need assistance, please feel free to contact Melodi Deaver at (919)-707-8204.

Sincerely,

Julie Woosley, Chief
Hazardous Waste Section

cc: Central Files (General)

IBEAM - RCRA Site Detail

Report run on: May 11, 2016

NCR000140673 NCDSCA DC260001 (MAYFLOWER LDY CLNRS)

County: CUMBERLAND Source Type: S Seq. Number: 19 Receive Date: 05 May 2016

Location 512 W RUSSELL ST, STE 100 Address: FAYETTEVILLE, NC 283015550	Mailing 1646 MAIL SERVICE CTR Address: RALEIGH, NC 276991646
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Contact Person MIKE CUNNINGHAM For Source Information (919) 707-8361	1646 MAIL SERVICE CTR RALEIGH, NC 276991646 US
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Owner (current) CITY OF FAYETTEVILLE	CITY HALL 433 HAY ST FAYETTEVILLE, NC 283015537	Type: P
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From: 11/10/2010	To:	Phone:
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Operator (current) PETITIONER(S) FOR DSCA SITE ID DC260001	1646 MAIL SERVICE CTR RALEIGH, NC 276991646	Type: O
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From: 09/16/2002	To:	Phone:
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Land Type: P	Non Notifier : E	Commercial Availability:	Tsd Date:
Accessibility:	No. Employees :	State District:	

Regulated Waste Activities

Hazardous Waste Generator Status - Federal: Not a Generator; State: Not a 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	No		
Smelting, melting, Refining Furnace Exemption: No			

Certification Information

First Name : SCOTT	Title	PROJ MGR
Last Name : STUPAK	Date Signed	05/04/2016

NAICS Codes

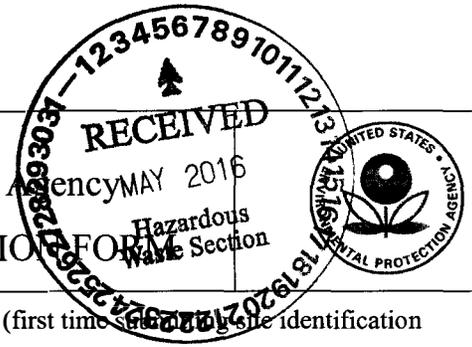
812320

Comments

UPDATED 8700-12 DATED 5/4/2016 LEGAL OWNER. NAG AS OF 3/7/2016 ****MD 5/11/2016



United States Environmental Protection Agency
 RCRA SUBTITLE C SITE IDENTIFICATION FORM



<p>1. Reason for Submittal</p> <p>MARK ALL BOX(ES) THAT APPLY</p>	<p><input type="checkbox"/> To provide Initial Notification of Regulated Waste Activity (first time site identification information / to obtain an EPA ID number for this location)</p> <p><input checked="" type="checkbox"/> To provide Subsequent Notification of Regulated Waste Activity (to update site identification information for this location) <i>NAG</i></p> <p><input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application</p> <p><input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____)</p> <p><input type="checkbox"/> As a component of the Hazardous Waste Report (If marked, see sub-bullet below)</p> <p><input type="checkbox"/> Site was a TSD facility and/or generator of $\geq 1,000$ kg of hazardous waste, > 1 kg of acute hazardous waste, or >100kg of acute hazardous waste spill cleanup <u>in one or more months</u> of the report year (or State equivalent LQG regulations)</p>	
<p>2. Site EPA ID</p>	<p>NCR000140673</p>	
<p>3. Site Name</p>	<p>NCDSCA DC260001(Mayflower Laundry And Dry Cleaning)</p>	
<p>4. Site Location Information</p>	<p>512 W Russell St, Suite100 Fayetteville, North Carolina 28301-5550, Cumberland County</p>	
<p>5. Site Land Type</p>	<p><input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Tribal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p>	
<p>6. NAICS Code(s)</p>	<p>812320</p>	
<p>7. Site Mailing Address</p>	<p>1646 Mail Service Center Raleigh, NC, USA 27699-1646</p>	
<p>8. Site Contact Person</p>	<p>Mike Cunningham, Project Manager 1646 Mail Service Center Raleigh, North Carolina, USA 27699-1646 Mike.Cunningham@ncdenr.gov (919)707-8361</p>	
<p>9. Legal Owner and Operator of the Site</p>	<p>A. Name of Site's Legal Owner City of Fayetteville</p>	<p>Date Became Owner 11/10/2010</p>
<p>Owner Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Tribal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p>		
<p>CITY OF FAYETTEVILLE CITY HALL, 433 HAY STREET FAYETTEVILLE NC 28301-5537</p>		
<p>B. Name of Site's Operator Petitioner(s) for DSCA Site ID DC260001</p>		<p>Date Became Operator 09/16/2002</p>
<p>Operator Type: <input type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Tribal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input checked="" type="checkbox"/> Other</p>		

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 Wastes

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.

F002

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.

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

Update Site Information:
Facility No longer A Generator (NAG) as of 3/7/2016

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 operator, owner, or an authorized representative	Name and Official Title	Date Signed (mm/dd/yyyy)
	Scott Stupak, on behalf of Petitioners for DSCA Site ID DC260001	5/4/2016