Hazardous Waste Section

File Room Document Transmittal Sheet

Your Name:	Bradley Bailey-21
EPA ID:	NCD980842132
Facility Name:	ECOFLO
Document Group:	Inspection/Investigation (I)
Document Type:	Focused Compliance Inspection (FCI)
Description:	Commercial TSDF
Date of Doc:	1/13/2016
Author of Doc:	Bradley Bailey

File Room Use Only

NCD980842132

	Month	Day	Year
Date Recieved by File Room:			
Date Scanned:			

Scanner's Initials:

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

DOCKET #: *N/A*

INSPECTION AND EVALUATION

EPA ID #:	**NCD 980842132**	FACILITY NAME:	**ECOFLO**
ADDRESS:	**2750 Patterson Street**	CITY:	**Greensboro, NC**
NEW ☒	UPDATE ☐	DATE(S) OF INSPECTION: **01/13/2016**	STAFF ID #: **21**

EVALUATION TYPE: 6,7,9	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 OFF SHIFT ☐ DURATION (Hrs) 3.0		

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	O	
SV	O	O		O				O	O	

SNC = Significant Noncomplier
SV = Secondary Violation

Acceptable Codes

R S Z O H	X S Z O H R	X S Z O HI*	X S Z O H	X S Z O H	X S Z O H	X S Z O H	X S Z O H	X S Z O H	X S Z O 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 SCHED.	ACTUAL	PENALTY ASSES.	COLL.	RESP AG

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* **EPA ID# NCD 980842132**

ECOFLO
2750 Patterson Street
Greensboro, NC

Permit Status: ☒ **RCRA** ☒ **Air** ☐ **Water**

2) *Facility Contact* ***Arrived:*** 6:45 AM

Ray Dudley ***Departed:*** 9:45 AM

3) *Date of Inspection / Inspector* *Shift:* ☒ 1st ☐ 2nd ☐ 3rd ☐ ***Wkend***

01-13 -16
Bradley Bailey

4) *Facility Description Changes*

None

5) *Areas of Concentration*

Part "B" Permit Physical Inspection
Facility Operations
Container Management/Staging
General

6) *Site Deficiencies* Docket #: ***N/A***

None

7) *Recommendations*

50 foot buffer marker needs to be clearly marked on outside of building and designate prohibited items (ignitable/reactive/incompatible) from being placed past that marker iaw D-1(a)(7).

Ensure contingency plan updated to provide description of alarms (general, overfill, etc) G-9 Definitions.

8) *Corrections Since Last Inspection*

50 foot buffer tape installed in compatibles and NHTC area on walls and floor

9) *Referrals to DAQ/DWQ/OSHA*

None

Ray Dudley 1/13/16
Facility Representative ***Date***

BW Bailey 13 JAN 2016
Bradley Bailey – NCDENR ***Date***