

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 TSD  
Date of Doc: 2/9/2016  
Author of Doc: Bradley Bailey

**File Room Use Only**

Date Recieved by File Room:  
Date Scanned:

Month	Day	Year

NCD980842132

Scanner's Initials:

# 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</b>	
ADDRESS: <b>2750 Patterson Street</b>		CITY: <b>Greensboro, NC</b>	
NEW <input checked="" type="checkbox"/>	UPDATE <input type="checkbox"/>	DATE(S) OF INSPECTION: <b>02/09/2016</b>	STAFF ID #: <b>21</b>

<b>EVALUATION TYPE:</b> 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 <input type="checkbox"/> DURATION (Hrs) <b>4.0</b>		

**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
<b>SNC</b>	O	O		O				O	O	
<b>SV</b>	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		RESP AG
				SCHED.	ACTUAL	ASSES.	COLL.	

**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**

ECOFLO  
2750 Patterson Street  
Greensboro, NC

EPA ID# NCD 980842132

Permit Status:  RCRA  
 Air  
 Water

2) **Facility Contact**

Ray Dudley

Arrived: 07:00 AM

Departed: 11:00 AM

3) **Date of Inspection / Inspector**

02-09-16  
Bradley Bailey

Shift:  1st  
 2nd  
 3rd  
 Wkend

4) **Facility Description Changes**

None

5) **Areas of Concentration**

Part "B" Permit Physical Inspection  
Facility Operations

Container Management/Staging  
General

6) **Site Deficiencies**

None

Docket #: N/A

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).

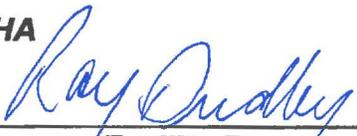
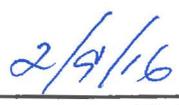
Ensure contingency plan updated to provide description of alarms (general, overfill, etc) G-9 Definitions.

8) **Corrections Since Last Inspection**

None

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

None

	
_____ Facility Representative	_____ Date
	
_____ Bradley Bailey - NCDENR	_____ Date