

Hazardous Waste Section  
File Room Document Transmittal Sheet

Your Name: Anthony Foster-055  
EPA ID: NCD986166338  
Facility Name: Veolia E. S. Technical Solutions  
Document Group: Inspection/Investigation (I)  
Document Type: Focused Compliance Inspection (FCI)  
Description: TSDF  
Date of Doc: 2/1/2016  
Author of Doc: Anthony Foster

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**File Room Use Only**

NCD986166338

Date Recieved by File Room:

Month	Day	Year

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 #: <b>NCD986166338</b>		FACILITY NAME: <b>Veolia E.S. Technical Solutions</b>			
ADDRESS: <b>2176 Will Suitt Rd.</b>			CITY: <b>Creedmoor, NC</b>		
NEW <input checked="" type="checkbox"/>	UPDATE <input type="checkbox"/>	DATE(S) OF INSPECTION: <b>2/1/16</b>		STAFF ID #: <b>55</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 <input type="checkbox"/> OFF SHIFT <input type="checkbox"/> DURATION (Hrs) <u>4.0</u>		

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	
SV		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**

Veolia E.S. Technical Solutions  
2176 Will Suitt Rd.  
Creedmoor, NC 27522

**EPA ID#** NCD986166338

**Permit Status:**  RCRA  
 Air  
 Water

2) **Facility Contact**

Jay Beck

**Arrived:** 11:30 am  
**Departed:** 3:30 pm

3) **Date of Inspection / Inspector**

2/1/16  
Anthony Foster

**Shift:**  1st  
 2nd  
 3rd  
 **Wkend**

4) **Facility Description Changes**

None

5) **Areas of Concentration**

Part "B" Permit Physical Inspection	Labeling General	Container Management Records/Log
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6) **Site Deficiencies**

None

**Docket #:** N/A

7) **Recommendations/Comments**

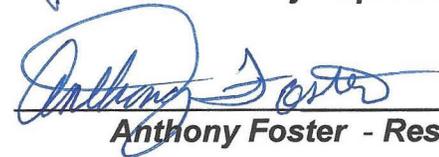
None

8) **Corrections Since Last Inspection**

None

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

None

 _____ Facility Representative	2-1-16 _____ Date
 _____ Anthony Foster - Resident Inspector	2-1-16 _____ Date