



**FACILITY COMPLIANCE AUDIT REPORT**  
**Division of Waste Management**  
**Solid Waste Section**

**UNIT TYPE:**

Lined MSWLF	LCID	YW	Transfer	Compost	SLAS	<b>COUNTY: Durham</b> <b>PERMIT NO.: 32-09I</b> <b>FILE TYPE: COMPLIANCE</b>
Closed MSWLF	HHW	White goods	Incin	X T&P	FIRM	
CDLF	Tire T&P / Collection	Tire Monofill	Industrial Landfill	DEMO	SDTF	

Date of Audit: 3/24/09Date of Last Audit: 9/3/08**FACILITY NAME AND ADDRESS:**

GlaxcoSmithKline, Inc.  
 3025 Cornwallis Road  
 RTP, Durham County, NC

**GPS COORDINATES: N: 35.92026****E: -78.86762****FACILITY CONTACT NAME AND PHONE NUMBER:**

Neal Parker 919-483-1696

**FACILITY CONTACT ADDRESS:**

5 Moore Drive, Nth-P1156  
 GlaxcoSmithKline, RTP, NC 27709

**AUDIT PARTICIPANTS:**

Neal Parker, Manager Environmental, Health, Safety Operations  
 Chris Marriott, NC DENR

**STATUS OF PERMIT:**

Original Issue (PTO): February 8, 1996  
 Modification/Renewal (change in ownership/change in service area): May14, 2002  
 Amendment (Permit Renewal): March 22, 2007  
 Permit Review Date: March 22, 2012

**PURPOSE OF AUDIT:**

Comprehensive Audit

**NOTICE OF VIOLATION(S):**

None

You are hereby advised that, pursuant to N.C.G.S. 130A-22, an administrative penalty of up to \$15,000 per day may be assessed for each violation of the Solid Waste Statute or Regulations. For the violation(s) noted here, you may be subject to enforcement actions including penalties, injunction from operation of a solid waste management facility or a solid waste collection service and any such further relief as may be necessary to achieve compliance with the North Carolina Solid Waste Management Act and Rules.

**STATUS OF PAST NOTED VIOLATIONS:**

None

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**AREAS OF CONCERN AND COMMENTS:**

- 1) The facility is a medical waste incinerator that traditionally operates 4 days a week (Tuesday-Friday), 8-10 hours per day. The incinerator is usually cleaned each Monday.
- 2) The facility accepts waste from GlaxoSmithKline's nationwide facilities. The only non-GSK waste is law enforcement seizure of controlled substances.
- 3) Less than 10% of the waste accepted and incinerated at the facility is infectious waste.
- 4) The facility has a NCDENR Air Quality permit (4612T29), issued on December 3, 2008.
- 5) The current Solid Waste permit was reviewed.
- 6) Operational and Contingency Plans were reviewed.
- 7) A discussion of recent and future ash samples was discussed. The facility had a TCLP lead concentration reported by an outside contracted laboratory (CompuChem) at hazardous concentration levels on 3/11/09. This composite sample was labeled as CS-083-1. After the initial sample indicated lead at hazardous levels, GSK sent the remainder of the composite sample CS-083-1 to a second laboratory (Microbac) for analysis. The Microbac sample's TCLP results indicated that the sample was not hazardous for all parameters analyzed. Because the two laboratory reports were different and there was no quality control information to discredit either of the two results, GSK sent the split sample CS-083-2 to CompuChem to confirm the TCLP levels in the roll-off. Sample CS-083-2 is a split sample taken from the same composite batch as CS-083-1. The CompuChem results of CS-083-2 indicated lead and other metals below TCLP hazardous limits. The remainder of the composite CS-083-2 was saved for possible future use. Both the Solid Waste Section and the Hazardous Waste Section of the NC Division of Waste Management agree that the preponderance of information indicates that the composite ash is not a hazardous waste.
- 8) A new ash sampling protocol was discussed to allow easier management of ash containers. A submittal to the section revising the ash sampling procedure is expected in the next six months.
- 9) The following individuals have undergone incinerator operations training: Neal Parker, Norman Anderson, Michael Olsen, Larry Wells, Greg Brooks, and David Fletcher. The class and examination were completed September 17, 2008.
- 10) The facility has floor drains to control leachate, spilled liquids, and ash dewatering. The floor drains are connected to the Durham sanitary sewer.
- 11) Lime is used as part of the air quality controls at the facility. Spent lime is kept in a covered water tight container. Each container is kept on-site until laboratory results indicate that the spent lime is non-hazardous. Non-hazardous lime containers are shipped to Upper Piedmont Regional Landfill for disposal.
- 12) All incoming waste is kept inside the building prior to incineration.
- 13) Any biological waste is kept in a refrigerator until loaded into the incinerator. The refrigerator did not contain any biological waste at the time of inspection. The temperature inside the refrigerator was 33.3 degrees Fahrenheit during the inspection.
- 14) At the time of inspection the lower incinerator chamber was 1503 degrees F. The minimum operating temperature for this chamber is 1500 degrees.
- 15) The upper incinerator chambers were 2104 and 1910 degrees Fahrenheit. The minimum operating temperatures for the upper chambers is 1800 degrees Fahrenheit.
- 16) To date in the first quarter of 2009, the facility was averaging 1576 lbs./hour for a total of 525,117 lbs. incinerated.
- 17) During this same period, the percent of medical infectious waste was 3.07%, which is well below the 10% limit.
- 18) The daily log from March 10, 2009 was examined. The log indicates that the facility operated for 10 hours that day and burned 15,936 lbs. of waste for an average of 1954 lbs/hr.
- 19) The material being processed into the incinerator on March 24, 2009 consisted of: consumer healthcare products (Nicorette gum and other over the counter products) and expired prescription drugs.

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Please contact me if you have any questions or concerns regarding this audit report.



Phone: 336-771-5090

Chris Marriott  
Environmental Senior Specialist  
*Regional Representative*

Delivered on : <u>April 3, 2009</u> by		Hand delivery	<input checked="" type="checkbox"/>	E-Mail		Certified No. [ ]
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cc: Mark Poindexter, Field Operations Branch Supervisor  
Jason Watkins, Central District Supervisor  
Donald Herndon, Compliance Officer