

Area of non-compliance

Section B - Hazardous Waste Determination - [40 CFR 261.5(g)(1) incorp. 262.11]

1. Does the facility generate hazardous waste(s) listed in Subpart D (40 CFR 261.30-261.33)? Yes No N/A

*If yes, list wastes and quantities on attachment including Hazardous Waste Codes, waste name, and description.

2. Does the facility generate solid waste(s) that exhibit hazardous characteristics (ignitability, corrosivity, reactivity, Toxicity - 40 CFR 261.20 - 261.24)? Yes No N/A

a. *If yes, list wastes and quantities on attachment. (Include Hazardous Waste Codes and provide waste name and description.)

___ b. Does generator determine characteristics by _____ TESTING or _____ KNOWLEDGE OF PROCESS?

___ i. If determined by testing, did generator use test methods in 40 CFR Part 261, Subpart C (or equivalent)? Yes No N/A

ii. If equivalent test methods used, attach copy of equivalent methods used.

___ 3. Are there any other solid wastes deemed non-hazardous by generators (i.e. process waste streams, collected matter from air pollution control equipment, water treatment sludge, etc.)? Yes No N/A

___ a. *If yes, did generator determine non-hazardous characteristics by _____ TESTING or _____ KNOWLEDGE OF PROCESS?

___ i. If determined by testing, did generator use test methods in 40 CFR Part 261, Subpart C (or equivalent)? Yes No N/A

ii. If equivalent test methods are used, attach copy of equivalent method used.

b. List wastes and quantities deemed nonhazardous or processes from which non-hazardous wastes were produced [Use narrative explanation sheet(s)].

___ 4. Has the generator completed an appropriate hazardous waste determination for each solid waste produced (40 CFR 262.11)? Yes No N/A

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*If yes, check the method(s) used for the determination:

- a. Listed as a hazardous waste in 40 CFR Part 261, Subpart D
- b. Process or material knowledge
- c. Tested for characteristic as identified in 40 CFR Part 261, Subpart C
(If equivalent method used, attach a copy).

Identify the person and lab that made the determination:

Name	Title	Lab
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5. Total quantity of **non-acute** hazardous wastes generated per month: _____

6. Total quantity of **acute** hazardous wastes generated per month: _____

___ 7. Does this facility generate used oils? Yes No N/A

*If yes, include narrative description of storage and disposition.

Note: CESQGs may mix their used oils and hazardous waste and manage this mixture as used oil if it is destined to be burned for energy recovery [40 CFR 261.5 (j) & 279.10 (b)(3)]

Section C - Hazardous Waste Treatment or Disposal - [40 CFR 261.5 (g)(3)]

___ 1. Are any wastes recycled on site? Yes No N/A

*If yes, use narrative to describe the type and quantity of the waste and the method used for recycling.

___ 2. Are any wastes shipped off-site for recycling? Yes No N/A

*If yes, use narrative to describe the type and quantity of the waste and its destination. Also give a description of storage prior to shipment.

___ 3. Does the generator process or dispose of the hazardous waste at an on-site facility, or ensure delivery to an off-site storage, processing, or disposal facility, which is (Circle those that apply):

- a. Permitted facility Yes No N/A
- b. Interim status Yes No N/A
- c. A facility which beneficially uses or recycles hazardous waste. Yes No N/A

Identify primary off-site facilities.
