

RCRA INSPECTION REPORT - INTERIM STATUS STANDARDS  
TREATMENT, STORAGE, AND DISPOSAL FACILITIES  
Form A - General Facility Standards

I. General Information:

- (A) Facility Name: KERR-McGEE CHEMICAL CORPORATION
- (B) Street: Lake Mead Drive
- (C) City: Henderson (D) State: Nevada (E) Zip Code: 89015
- (F) Phone: (702) 565-8901 (G) County: Clark
- (H) Operator: See (A) above.
- (I) Street: \_\_\_\_\_
- (J) City: \_\_\_\_\_ (K) State: \_\_\_\_\_ (L) Zip Code \_\_\_\_\_
- (M) Phone: \_\_\_\_\_ (N) County: \_\_\_\_\_
- (O) Owner: KERR-McGEE CHEMICAL CORPORATION
- (P) Street: P.O. Box 25861
- (Q) City: Oklahoma City (R) State: Oklahoma (S) Zip Code: 73125
- (T) Phone: (405) 270-2529 (U) County: \_\_\_\_\_
- (V) Date of Inspection: 09/27/83 (W) Time of Inspection (From) 1:30 p.m. (To) 4:00 p.m.
- (X) Weather Conditions: Warm and clear.

<b>(Y) Person(s) Interviewed</b>	<b>Title</b>	<b>Telephone</b>
<u>Kayrene Brothers</u>	<u>Staff Environmental Engineer</u>	<u>(702) 565-8901</u>
_____	_____	_____
_____	_____	_____

<b>(Z) Inspection Participants</b>	<b>Agency/Title</b>	<b>Telephone</b>
<u>Alene Coulson</u>	<u>Environmental Management Specialist</u>	<u>(702) 885-4670</u>
_____	_____	_____
_____	_____	_____

<b>(AA) Preparer Information</b>	<b>Agency/Title</b>	<b>Telephone</b>
<u>Name</u>	_____	_____
_____	_____	_____

**II. SITE ACTIVITY:**

Complete sections I through VII for all treatment, storage, and/or disposal facilities. Complete the forms (in parenthesis) in section VIII corresponding to the site activities identified below:

- |   |  |
|---|--|
| <p><u>X</u> <b>A. Storage and/or Treatment</b></p> <ul style="list-style-type: none"> <li>1. Containers (I)</li> <li>2. Tanks (J)</li> <li>③ 3. Surface Impoundments (K)</li> <li>4. Waste Piles (L)</li> </ul> <p>_____ <b>B. Land Treatment (M)</b></p> <p><u>X</u> <b>C. Landfills (N)</b></p> | <p>_____ <b>D. Incineration and/or Thermal Treatment (O and P)</b></p> <p>_____ <b>E. Chemical, Physical, and Biological Treatment (Q)</b></p> |
|---|--|

**Note:** If facility is also a generator or transporter of hazardous waste complete sections IX and X of this form as appropriate.



II GENERAL FACILITY STANDARDS:  
(Part 265 Subpart B)

	Yes	No	NI*	Remark
(A) Has the Regional Administrator been notified regarding:				
1. Receipt of hazardous waste from a foreign source? (265.12)	_____	X	_____	_____
(B) General Waste Analysis: (265.13)				
1. Has the owner or operator obtained a detailed chemical and physical analysis of of the waste?	X	_____	_____	_____
2. Does the owner or operator have a detailed waste analysis plan on file at the facility?	X	_____	_____	_____
Does the plan contain:				
-Parameters of analysis of each waste handled?	X	_____	_____	_____
-Rationale for the selection of each parameter?	X	_____	_____	_____
-Test methods for each parameter?	X	_____	_____	_____
-Sampling methods for each waste?	X	_____	_____	_____
-Frequency which each analysis will be reviewed or repeated?	X	_____	_____	_____
3. Does the waste analysis plan specify procedures for inspection and analysis of each movement of hazardous waste from off-site?	_____	X	_____	_____
4. If the above procedures include sampling, is the sampling method described?	_____	_____	_____	N/A
(C) Security - Do security measures include: (if applicable) (265.14)				
1. 24-Hour surveillance?	X	_____	_____	_____
2. Artificial or natural barrier around facility?	X	_____	_____	_____
3. Controlled entry?	X	_____	_____	_____
4. Danger sign(s) at entrance?	X	_____	_____	_____
*Not Inspected				

III. GENERAL FACILITY STANDARDS - Continued

	Yes	No	NI*	Remarks
(D) Do Owner or Operator Inspections Include: (265.15)				
1. Records of malfunctions?	<u>X</u>	_____	_____	_____
2. Records of operator error?	<u>X</u>	_____	_____	_____
3. Records of discharges?	<u>X</u>	_____	_____	_____
4. Inspection schedule?	<u>X</u>	_____	_____	_____
5. Safety, emergency equipment?	<u>X</u>	_____	_____	_____
6. Security equipment?	<u>X</u>	_____	_____	_____
7. Operating and structural equipment?	<u>X</u>	_____	_____	_____
8. Inspection log?	<u>X</u>	_____	_____	_____
Does the inspection log include:				
-Date & time of inspection?	<u>X</u>	_____	_____	_____
-Name of inspector?	<u>X</u>	_____	_____	_____
-Observations recorded?	<u>X</u>	_____	_____	_____
-Date & nature of repairs?	<u>X</u>	_____	_____	_____
(E) Do personnel training records include: (Effective 5/19/81) (265.16)				
1. Job titles?	<u>X</u>	_____	_____	_____
2. Job descriptions?	<u>X</u>	_____	_____	_____
3. Description of training?	<u>X</u>	_____	_____	_____
4. Records of training?	<u>X</u>	_____	_____	_____
5. Have facility personnel received required training by 5/19/81?	<u>X</u>	_____	_____	_____
6. Do new personnel receive required training within six months?	<u>X</u>	_____	_____	_____
(F) If required are the following special requirements for ignitable, reactive, or incompatible wastes addressed? (265.17)				
1. Special handling?	<u>X</u>	_____	_____	_____
2. No smoking signs?	<u>X</u>	_____	_____	_____
3. Separation and protection from ignition sources?	<u>X</u>	_____	_____	_____

\*Not Inspected

**IV. PREPAREDNESS AND PREVENTION:**  
(Part 265 Subpart C)

**(A) Maintenance and Operation of Facility:**

Is there any evidence of fire, explosion, or release of hazardous waste or hazardous waste constituent?

Yes No NI\* Remarks

\_\_\_ X \_\_\_

**(B) If required, does the facility have the following equipment: (265.32)**

1. Internal communications or alarm systems?

X \_\_\_ \_\_\_

Page system on telephones.

2. Telephone or 2-way radios at the scene of operations?

X \_\_\_ \_\_\_

3. Portable fire extinguishers, fire control, spill control equipment and decontamination equipment?

X \_\_\_ \_\_\_

Indicate the volume of water and/or foam available for fire control:

\_\_\_\_\_

\_\_\_\_\_

**(C) Testing and Maintenance of Emergency Equipment: (265.33)**

1. Has the owner or operator established testing and maintenance procedures for emergency equipment?

X \_\_\_ \_\_\_

2. Is emergency equipment maintained in operable conditions?

X \_\_\_ \_\_\_

**(D) Has owner or operator provided immediate access to internal alarms? (if needed) (265.34)**

X \_\_\_ \_\_\_

\*Not Inspected

(E) Is there adequate aisle space for unobstructed movement? (265.35)   X   \_\_\_\_\_

V. CONTINGENCY PLAN AND EMERGENCY PROCEDURES:  
(Part 265 Subpart D)

(A) Does the Contingency Plan contain the following information:

	Yes	No	NI*	Remarks
1. The actions facility personnel must take to comply with §265.51 and 265.56 in response to fires, explosions, or any unplanned release of hazardous waste? (If the owner has a Spill Prevention, Control, and Countermeasures (SPCC) Plan, he needs only to amend that plan to incorporate hazardous waste management provisions that are sufficient to comply with the requirements of this Part (as applicable.)	<u>  X  </u>	_____	_____	_____
2. Arrangements agreed by local police departments; fire departments hospitals, contractors, and State and local emergency response teams to coordinate emergency services pursuant to §265.37?	<u>  X  </u>	_____	_____	_____
3. Names, addresses, and phone numbers (office and home) of all persons qualified to act as emergency coordinators? (265.52)	<u>  X  </u>	_____	_____	_____
4. A list of all emergency equipment at the facility which includes the location and physical description of each item on the list and a brief outline of its capabilities? (265.52)	<u>  X  </u>	_____	_____	_____
5. An evacuation plan for facility personnel where there is a possibility that evacuation could be necessary? (This plan must describe signal(s) to be used to begin evacuation, evacuation routes, and alternate evacuation routes?) (265.52)	<u>  X  </u>	_____	_____	_____

\*Not Inspected

	Yes	No	NI*	Remarks
(B) Are copies of the Contingency Plan available at site and local emergency organizations? (265.53)	<u>X</u>	___	___	_____
(C) Emergency Coordinator (265.55)				
1. Is the facility Emergency Coordinator identified?	<u>X</u>	___	___	_____
2. Is coordinator familiar with all aspects of site operation and emergency procedures?	<u>X</u>	___	___	_____
3. Does the Emergency Coordinator have the authority to carry out the Contingency Plan?	<u>X</u>	___	___	_____
(D) Emergency Procedures				
If an emergency situation has occurred at this facility, has the Emergency Coordinator followed the emergency procedures listed in 265.56?	___	<u>X</u>	___	<u>N/A</u>

VI. MANIFEST SYSTEM, RECORDKEEPING, AND REPORTING  
(Part 265 Subpart E)

	Yes	No	NI*	Remarks
(A) Use of Manifest System (265.71)				
1. Does the facility follow the procedures listed in §265.71 for processing each manifest?	<u>X</u>	___	___	<u>Transport chlorate filter mud (Frehner Trucking) to Beatty.</u>
2. Are records of past shipments retained for 3 years? (262.40)	<u>X</u>	___	___	_____
(B) Does the owner or operator meet requirements regarding manifest discrepancies? (265.72)	<u>X</u>	___	___	_____

\*Not Inspected



(C) Operating Record (265.73)

1. Does the owner or operator maintain an operating record as required in 265.73?

X    \_\_\_    \_\_\_

2. Does the operating record contain the following information:

\*\*b. The method(s) and date(s) of each waste's treatment, storage, or disposal as required in Appendix I?

X    \_\_\_    \_\_\_

c. The location and quantity of each hazardous waste within the facility?

X    \_\_\_    \_\_\_

\*\*\*d. A map or diagram of each cell or disposal area showing the location and quantity of each hazardous waste? (This information should be cross-referenced to specific manifest number, if waste was accompanied by a manifest.)

X    \_\_\_    \_\_\_

e. Records and results of all waste analyses, trial tests, monitoring data, and operator inspections?

X    \_\_\_    \_\_\_

f. Reports detailing all incidents that required implementation of the Contingency Plan?

\_\_\_    \_\_\_    \_\_\_

N/A

g. All closure and post closure costs as applicable? (Effective 5-19-81)

X    \_\_\_    \_\_\_

\*\* See page 37252 of the May 19, 1980, Federal Register.

\*\*\* Only applies to disposal facilities



	<u>YES</u>	<u>NO</u>	<u>NI</u>	<u>REMARKS</u>
3. Does the plan discuss the types of testing and criteria to be used to determine:				
a. whether soil is contaminated?	<u>X</u>	---	---	_____
b. whether decontamination residues are hazardous?	<u>X</u>	---	---	_____
c. other (specify) _____				
4. Are incompatible wastes identified and provisions described for keeping them separate during closure?	---	---	---	N/A

IV. FINAL CLOSURE

1. Does the plan identify the steps to close:				
a. at any point during the intended operating life? (265.112a)	<u>X</u>	---	---	<u>Currently.</u>
b. at the end of the intended operating life? (265.112a)	<u>X</u>	---	---	<u>Currently.</u>
2. Do the steps to close in the plan include:				
a. removal of wastes? (265.113a)	<u>X</u>	---	---	Liquids in P-1 will be removed (liquids recycled and evaporated).
b. treatment of wastes? (265.113a)	---	<u>X</u>	---	_____
c. waste disposal? (265.113a)	<u>X</u>	---	---	<u>If required.</u>
d. decontamination of equipment & structures? (265.112a 3) (265.14)	<u>X</u>	---	---	<u>If required.</u>
e. closure certification? (265.115)	<u>X</u>	---	---	_____
3. Does the plan identify the year when final closure is expected to occur? (265.112a.4).	<u>X</u>	---	---	_____
4. Is there a schedule for final closure activities? (265.112a.4).	<u>X</u>	---	---	<u>Awaiting approval from State.</u>
5. Does the schedule for final closure include:				
a. date closure is expected to begin? (265.112a.1).	<u>X</u>	---	---	_____
b. total time required to close: (265.112a.4).	<u>X</u>	---	---	_____
c. the items for intervening closure activities (milestone dates)? (265.112a.4) (i.e. time required for waste inventory treatment; disposal; decontamination).	<u>X</u>	---	---	_____





FACILITY NAME: KERR-MCGEE CHEMICAL CORPORATION

DATE OF INSPECTION: 09/27/83

YES   NO   NI   REMARKS

C. Financial Liability

1. Can the facility demonstrate the liability coverage for sudden accidental occurrences in the amount of at least \$1 million per occurrence with an aggregate of at least \$2 million? (265.147a)

X                           

2. Circle the mechanism(s) being used to demonstrate liability coverage:

Insurance

Financial Test

Financial Test & Insurance

3. Insurance:

a) Is the insurance policy amended to contain a hazardous waste facility liability endorsement.

X                           

Is the endorsement worded as required in Sec. 264.151

X                           

(or)

Is the insurance policy evidenced by a certificate of liability insurance.

X                           

Is the certificate worded as required in Sec. 264.151.

X                           

b) Is the insurer of the insurance policy licensed to transact the business of insurance?

(or)

Is the insurer eligible to provide insurance as an excess or surplus lines insurer?

X

FACILITY NAME: KERR-McGEE CHEMICAL CORPORATION

DATE OF INSPECTION: 09/27/83

YES   NO   NI   REMARKS

4. Financial Test:

a) Circle the criteria that the facility is using to demonstrate that it passes the financial test:

Alternative I

Alternative II

b) Does the facility meet the criteria for the chosen alternative?      X                              

If NO, explain the defecienzie(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

c) Has the facility submitted the following three items to the Regional Administrator

1) A letter signed by the Chief Financial officer and worded as specified in Sec. 264.151.      X                              

2) A copy of the C.P.A.'s report on examination of the financial statement for the latest completed fiscal year.      X                              

3) A special report from the C.P.A. to the owner or operator stating that a comparison of the data from the letter with the amounts in the financial statement has been completed and that no inconsistencies exist which would require an adjustment.      X                              

4) Has the facility applied for a one time extension?

5. The following applied only to owners and operators of surface impoundments, landfills and land treatment facilities:

a) Does the facility have available insurance coverage for claims resulting from non sudden accidental occurrences (~~\$3 million~~ per occurrence, ~~\$6 million~~ annual aggregate\*). (265.147b)  X  \_\_\_\_\_

\* Facilities with annual sales/revenue of:

\$10 million - effective January 15, 1983

\$5-10 million - effective January 15, 1984

<\$5 million - effective January 15, 1985



SURFACE IMPOUNDMENTS

Facility Name: KERR-McGEE CHEMICAL CORPORATION

Date of Inspection: 09/27/83

- |    |   |          |     |     |       |
|----|---|----------|-----|-----|-------|
| 1. | Do surface impoundments have at least 60 cm (2 feet) of freeboard? (265.222)  | <u>X</u> | --- | --- | ----- |
| 2. | Do earthen dikes have protective covers? (265.223)  | <u>X</u> | --- | --- | ----- |
| 3. | Are waste analyses done when the impoundment is used to store a substantially different waste than before? (265.225)  | ---      | --- | --- | N/A   |
| 4. | Is the freeboard level inspected at least daily? (265.226.a.2)  | <u>X</u> | --- | --- | ----- |
| 5. | Are the dikes inspected weekly for evidence of leaks or deterioration? (265.226.a.2)  | <u>X</u> | --- | --- | ----- |
| 6. | Are reactive & ignitable wastes rendered non-reactive or non-ignitable before storage in a surface impoundment? (If waste is rendered non-reactive or non-ignitable, see treatment requirements.) (265.229) | ---      | --- | --- | N/A   |
| 7. | Are incompatible wastes stored in different impoundments? (If not, the provisions of 40 CFR 265.17(b) apply.) (265.230)   | ---      | --- | --- | N/A   |

N  
LANDFILLS

Facility Name: KERR-McGEE CHEMICAL CORPORATION Date of Inspection: 09/27/83

	Yes	No	NI*	Remarks
<b>(A) General Operating Requirements</b>				
Does the facility provide the following:				
**1. Diversion of run-on away from active portions of the fill? (265.302.a)	___	___	___	<u>N/A. No active portion</u>
**2. Collection of run-off from active portions of the fill? (265.302.b)	___	___	___	<u>N/A</u>
**3. Is collected run off treated? (265.302.c)	___	___	___	<u>N/A</u>
4. Control of wind dispersal of hazardous waste? (265.302.d)	___	___	___	<u>Cover.</u>
(**Effective 11-19-81)				
<b>(B) Surveying and Recordkeeping</b>				
Does the Operating Record Include:				
1. A map showing the exact location and dimensions of each cell? (265.309.b)	<u>X</u>	___	___	___
2. The contents of each cell and the location of each hazardous waste type withing each cell? (265.309.b)	<u>X</u>	___	___	___
<b>(C) Special requirements for ignitable or reactive waste</b>				
Are ignitable or reactive waste treated so the resulting mixture is no longer ignitable or reactive? (265.312)				
	___	___	___	___

	Yes	No	NI*	Remarks
(If waste is rendered non-reactive or non-ignitable see treatment requirements)				
If not, the provisions of 40 CFR 265.17(b) apply.	_____	_____	_____	_____
<b>(D) Special Requirements for Incompatible Wastes.</b>				
Does the owner or operator dispose of incompatible wastes in separate cells? (215.313)	_____	_____	_____	_____
If not, the provisions of 40 CFR 265.17(b) apply.	_____	_____	_____	_____
<b>(E) Special requirements for liquid waste (effective 11-19-81)</b>				
1. Are bulk or non-containerized liquids placed in the landfill?	_____	X	_____	_____
*2. Does the landfill have a chemically and physically resistant liner system? (265.314)	_____	X	_____	_____
3. Does the landfill have a functional leachate collection system? (265.314)	_____	X	_____	_____
4. Are free liquids stabilized prior to or immediately after placement in the landfill? (265.314)	_____	_____	_____	N/A
<b>(F) Special requirements for Containers (effective 11-19-81)</b>				
Are empty containers crushed flat, shredded, or similarly reduced in volume before being buried beneath the surface of the landfill? (265.315)	_____	_____	_____	N/A

\*Not Inspected

VI. LANDFILL CLOSURE PLAN

	<u>YES</u>	<u>NO</u>	<u>NI</u>	<u>REMARKS</u>
1. Does the plan describe the containment of waste, including:				
a. placement of final cover? (265.310a).	<u>X</u>	—	—	_____
b. characteristics of cover including material, thickness, porosity and permeability? (265.310b.5).	<u>X</u>	—	—	_____
c. design of cover including final surface contours and length of run of slope? (265.310b.5.).	<u>X</u>	—	—	_____
d. type of vegetation on the cover? (265.310b.5.).	—	—	—	N/A
e. maintenance of the integrity of the cover? (265.310b.2.).	<u>X</u>	—	—	_____
f. control of pollution migration from the facility via groundwater surface water and air? (265.310b.2.).	<u>X</u>	—	—	_____
g. control of surface water infiltration, including prevention of pooling? (265.310b.2.).	<u>X</u>	—	—	_____
h. prevention of erosion? (265.310b.3.).	<u>X</u>	—	—	_____
2. Does the Plan include at least a narrative indicating that the following factors were considered in addressing the closure objectives?				
a. type and amount of waste (265.310c.3.).	<u>X</u>	—	—	_____
b. mobility and expected rate of migration (265.310c.2.).	<u>X</u>	—	—	_____
c. site location, topography and surrounding land use (265.310c.3.).	<u>X</u>	—	—	_____
d. climate, including amount, frequency and PH of precipitation. (265.310.c.4.).	<u>X</u>	—	—	_____
e. geological and soil profiles and surface and sub-surface hydrology. (265.310.c.6.).	—	—	—	_____
3. Does the plan describe the maintenance and monitoring of the leachate collection, removal and treatment system to prevent excess accumulation of leachate in the system? (265.310b.2.).	—	<u>X</u>	—	N/A. No system.

	<u>YES</u>	<u>NO</u>	<u>NI</u>	<u>REMARKS</u>
4. Does the plan describe the maintenance and monitoring of the gas collection and control system to control the vertical and horizontal escape of gases? (265.310 b.3.).	---	---	---	N/A
5. Does the plan describe the protection and maintenance of surveyed benchmarks? (265.310 b.4.).	---	---	---	N/A
6. Does the plan describe security measures to restrict access to the landfill as appropriate? (265.310b.5.).	X	---	---	

VII. LANDFILL POST CLOSURE PLAN

1. Is there a written post closure plan at the facility? (265.118a).	X	---	---	
2. Does the post closure plan provide for 30 years of post-closure care? (265.117d).	---	---	---	Petition after 5 years.
3. Does the post-closure plan cover all areas where hazardous waste will remain that were active as of 11-19-80?	X	---	---	
4. Does the post-closure plan clearly identify the following minimum activities required in post closure care; including:				
a. a description of the planned ground-water monitoring activities and frequencies at which they will be performed to comply with subpart F? (265.118a.1.).	X	---	---	
b. a description of the planned maintenance activities and frequencies at which they will be performed to ensure:				
1. the integrity of the cap and final cover? (265.118a.2.i).	X	---	---	
2. the function of the ground-water monitoring system as specified in Section 265.91? (265.118 a.2.ii).	---	---	---	N/A

	<u>YES</u>	<u>NO</u>	<u>NI</u>	<u>REMARKS</u>
3. the function of the leachate collection, removal and treatment system to prevent excess accumulation of leachate in the system? (265.310 d.2.).	---	---	---	N/A
4. the function of the gas collection and control system to control the vertical and horizontal escape of gases? (265.310 d.3.).	---	---	---	N/A
5. the protection of the surveyed benchmarks: (265.310 d.4.).	---	---	---	N/A
6. the security of the landfill and restrict access as appropriate for its post closure care? (265.310 d.5.).	X	---	---	
5. Does the plan identify the name, address and phone number of the person or office to contact about the facility? (265.118 a.3.).	X	---	---	
6. Does the post closure plan also address the items in Section 265.310 b and c? (see closure plan checklist).	X	---	---	
7. Has the post closure plan been amended? a. was the plan amended within 60 days after changes in operating plans or facility design, or events which occur during the active life of the facility? (265.118 b.).	---	---	X	N/A
8. Has the post closure plan been submitted 130 days prior to the anticipated closure date? (265.118 c.)?	X	---	---	
9. Does the post closure plan address the requirements for notice to the local land authority: (265.119)?	---	X	---	
10. Does the post closure plan address the requirements for notice in the deed? (265.120).	---	X	---	

	Yes	No	NI*	Remarks
3. Has the owner or operator addressed the waste analysis requirements of 265.402?	_____	_____	_____	_____
4. Are inspection procedures followed according to 265.403?	_____	_____	_____	_____
5. Are the special requirements fulfilled for ignitable or reactive wastes? (265.405)	_____	_____	_____	_____
6. Are incompatible wastes treated? (If yes, 265.17(b) applies.) (265.406)	_____	_____	_____	_____

Note: EPA has temporarily suspended the applicability of the requirements of the hazardous waste regulations in 40 CFR Parts 122, 264 and 265 to owners and operators of (1) wastewater treatment tanks that receive, store, and treat wastewaters that are hazardous waste or that generate, store or treat a wastewater treatment sludge which is a hazardous waste where such wastewaters are subject to regulation under Sections 402 or 307(b) of the Clean Water Act (33 U.S.C. 1251 et seq.) and (2) neutralization tanks, transport vehicles, vessels, or containers which neutralize wastes which are hazardous only because they exhibit the corrosivity characteristic under 40 CFR §261.2 or are listed as hazardous wastes in Subpart D of 40 CFR Part 261 only for this reason.

### IX

Complete this section if the owner or operator of a TSD facility also generates hazardous waste that is subsequently shipped off-site for treatment, storage, or disposal.

#### 1. MANIFEST REQUIREMENTS

	Yes	No	NI*	Remarks
(A) Does the operator have copies of the manifest available for review? (262.22)	<u>X</u>	_____	_____	_____
(B) Do the manifest forms reviewed contain the following information: (If possible, make copies of, or record information from, manifest(s) that do not contain the critical elements) (262.21)				
1. Manifest document number?	<u>X</u>	_____	_____	_____
2. Name, mailing address, telephone number, and EPA ID Number of Generator	<u>X</u>	_____	_____	_____

Yes No NI\* Remarks

(C) Are waste packages marked in accordance with DOT regulations concerning hazardous waste materials?  
(49 CFR 171.101) (262.32)

\_\_\_ \_\_\_ \_\_\_ N/A

Proper shipping name?  
(Hazardous Materials Table Column 2)

\_\_\_ \_\_\_ \_\_\_ N/A

Proper identification number?  
(Hazardous materials Table Column 3A)

X \_\_\_ \_\_\_ \_\_\_

Is each container of ORM-A,B,C,D or E waste labeled with its ORM designation?

\_\_\_ \_\_\_ \_\_\_ N/A

(D) Is each container of 110 gallons or less marked in accordance with 262.32(b)?

\_\_\_ \_\_\_ \_\_\_ N/A

(E) If required, are placards available to transporters of hazardous waste?  
(49 CFR 172 Subpart F) (262.33)

X \_\_\_ \_\_\_ \_\_\_

\* Not inspected



**VI. RECORDKEEPING and REPORTING**  
(Part 262, Subpart D)

	Yes	No	NI*	Remarks
(A) Are Manifests, Annual Reports, Exception Reports, and all test results and analyses retained for at least three years? (262.40)	<u>X</u>	_____	_____	_____
(B) Has the generator submitted Annual Reports and Exception Reports as required? (262.42)	<u>X</u>	_____	_____	_____

**VII. INTERNATIONAL SHIPMENTS**  
(Part 262, Subpart E)

Has the installation imported or exported Hazardous Waste?	_____	<u>X</u>	_____	_____
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(If answered Yes, complete the following as applicable.)

1. Exporting Hazardous waste, has a generator: (265.12)				
a. Notified the Administrator in writing?	_____	_____	_____	_____
b. Obtained the signature of the foreign consignee confirming delivery of the waste(s) in the foreign country?	_____	_____	_____	_____
c. Met the Manifest requirements?	_____	_____	_____	_____
2. Importing Hazardous Waste, has the generator:				
Met the manifest requirements?	_____	_____	_____	_____

\*Not Inspected

X  
**TRANSPORTER REQUIREMENTS**  
**40 CFR Part 263**

Complete this Section if the owner or operator transports hazardous waste.

**I. MANIFEST SYSTEM AND RECORDKEEPING**  
 (Subpart B)

	- Yes	No	NI*	Remarks
Are copies of the completed manifests or shipping paper(s) available for review and retained for three years? (263.22)	___	<u>X</u>	___	_____

**II. INTERNATIONAL SHIPMENTS**

A. Does the transporter record on the manifest the date the waste left the U.S.? (263.22)	___	___	___	_____
B. Are signed completed manifest(s) on file?	___	___	___	_____

**V. MISCELLANEOUS**

A. Does transporter transport hazardous waste into the U.S. from abroad? (263.10)	___	___	___	_____
B. Does the transporter mix hazardous waste of different DOT shipping descriptions by placing them into a single container? (263.10)	___	___	___	_____

**NOTE:** If (A) or (B) were answered "Yes" then the Transporter is also a Generator and must comply with the Generator regulations.

\*Not Inspected