EPA

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT

REGION: V

SITE NUMBER (to be assigned by Hq):

GENERAL INSTRUCTIONS: Complete Sections I and III through XV of this form as completely as possible. Then use the information on this form to develop a Tentative Disposition (Section II). File this form in its entirety in the regional Hazardous Waste Log File. Be sure to include all appropriate Supplemental Reports in the file. Submit a copy of the forms to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (EN-335); 401 M St., SW; Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME: East 49th Street

B. STREET (or other identifier): Corner of East 49th and Grant 4522 E 49th

C. CITY: Cuyahoga Heights

D. STATE: Ohio

E. ZIP CODE:

F. COUNTY NAME: Cuyahoga

G. SITE OPERATOR INFORMATION

1. NAME: Service Corporation of America

2. TELEPHONE NUMBER: 216-524-0340

3. STREET: East 49th

4. CITY: Cuyahoga Heights

5. STATE: Ohio

6. ZIP CODE:

H. REALTY OWNER INFORMATION (if different from operator of site)

1. NAME: CEI

2. TELEPHONE NUMBER:

3. CITY: Cleveland

4. STATE: Ohio

5. ZIP CODE:

I. SITE DESCRIPTION: Substation

J. TYPE OF OWNERSHIP

- [ ] 1. FEDERAL
- [ ] 2. STATE
- [ ] 3. COUNTY
- [ ] 4. MUNICIPAL
- [x] 5. PRIVATE

II. TENTATIVE DISPOSITION (complete this section last)

A. ESTIMATE DATE OF TENTATIVE DISPOSITION (mo., day, & yr.):

B. APPARENT SERIOUSNESS OF PROBLEM

- [ ] 1. HIGH
- [ ] 2. MEDIUM
- [ ] 3. LOW
- [x] 4. NONE

C. PREPARER INFORMATION

1. NAME: Max D. Michael

2. TELEPHONE NUMBER: 312-663-9415

3. DATE (mo., day, & yr.): 10/1/80

III. INSPECTION INFORMATION

A. PRINCIPAL INSPECTOR INFORMATION

1. NAME: Max D. Michael

2. TITLE: Technician

3. ORGANIZATION: Ecology & Environment Inc.

4. TELEPHONE NO. (area code & no.): 312-663-9415

B. INSPECTION PARTICIPANTS

1. NAME	2. ORGANIZATION	3. TELEPHONE NO.
Mark Hutson	Ecology and Environment Inc.	312-663-9415

C. SITE REPRESENTATIVES INTERVIEWED (corporate officials, workers, residents)

1. NAME	2. TITLE & TELEPHONE NO.	3. ADDRESS
none		

US EPA RECORDS CENTER REGION 5

426261

Continued From Front

III. INSPECTION INFORMATION *(continued)*

D. GENERATOR INFORMATION *(sources of waste)*

1. NAME	2. TELEPHONE NO.	3. ADDRESS	4. WASTE TYPE GENERATED
General Electric			

E. TRANSPORTER/HAULER INFORMATION

1. NAME	2. TELEPHONE NO.	3. ADDRESS	4. WASTE TYPE TRANSPORTED
Cleveland Maintenance			

F. IF WASTE IS PROCESSED ON SITE AND ALSO SHIPPED TO OTHER SITES, IDENTIFY OFF-SITE FACILITIES USED FOR DISPOSAL.

1. NAME	2. TELEPHONE NO.	3. ADDRESS
not applicable		

G. DATE OF INSPECTION (mo., day, & yr.)	H. TIME OF INSPECTION	I. ACCESS GAINED BY: *(credentials must be shown in all cases)*
10/1/80	11 AM	☐ 1. PERMISSION ☐ 2. WARRANT

J. WEATHER *(describe)*

Clear 70°F

IV. SAMPLING INFORMATION

A. Mark 'X' for the types of samples taken and indicate where they have been sent e.g., regional lab, other EPA lab, contractor, etc. and estimate when the results will be available.

1. SAMPLE TYPE none	2. SAMPLE TAKEN *(mark 'X')*	3. SAMPLE SENT TO:	4. DATE RESULTS AVAILABLE
a. GROUNDWATER			
b. SURFACE WATER			
c. WASTE			
d. AIR			
e. RUNOFF			
f. SPILL			
g. SOIL			
h. VEGETATION			
i. OTHER *(specify)*			

B. FIELD MEASUREMENTS TAKEN *(e.g., radioactivity, explosivity, PH, etc.)*

1. TYPE	2. LOCATION OF MEASUREMENTS	3. RESULTS
None		

IV. SAMPLING INFORMATION (continued)

C. PHOTOS: None

D. SITE MAPS: Sketch attached

V. SITE INFORMATION

A. [illegible]

1. ACTIVE (Those sites that are currently receiving waste or have received waste in the past [illegible]): [ ]
2. INACTIVE (Those sites which no longer receive waste): [ ]
3. OTHER (specify): [X] Is An Active Electrical Substation (Those sites that include such incidents like "midnight dumping" [illegible] regular or continuing use of the site for waste disposal [illegible]). Is no longer a waste site

B. [illegible]

1. NO [X]
2. YES [ ] [illegible]

C. AREA OF SITE (Acres): 2 Acres

D. [illegible]

1. [illegible] [ ]
2. [illegible] [X] One Brick Building to Support Substation Activity

VI. CHARACTERIZATION OF SITE ACTIVITY

Indicate the major site activity and date(s) of activity by marking 'X' in the appropriate boxes.

X	A. TRANSPORTER	X	B. STORER Not Applicable	C. TREATER	X	D. DISPOSER
	1. MAIL		1. [illegible]	1. [illegible]		1. LANDFILL
	2. SHIP		2. [illegible]	2. INCINERATION		2. LANDFARM
	3. [illegible]		3. [illegible]	3. VOLUME REDUCTION		3. OPEN DUMP
	4. TRUCK		4. [illegible]	4. RECYCLING/RECOVERY		4. SURFACE IMPOUNDMENT
	5. PIPELINE		5. [illegible]	5. CHEM/PHYS/TREATMENT		5. MIDNIGHT DUMPING
	6. OTHER (specify):		6. [illegible]	6. BIOLOGICAL TREATMENT		6. INCINERATION
				7. WASTE OIL REPROCESSING		7. UNDERGROUND INJECTION
				8. SOLVENT RECOVERY		8. OTHER (specify):
				9. [illegible] (specify)		

E. [illegible] Not Applicable [illegible] Supplemental Reports must be completed. Indicate [illegible]

[ ] 1. STORAGE [ ] 2. INCINERATION [ ] 3. LANDFARM [ ] 4. SURFACE IMPOUNDMENT [ ] 5. DEEP WELL

[ ] 6. [illegible] [ ] 7. LANDFILL [ ] 8. OPEN DUMP [ ] 9. TRANSPORTER [ ] 10. RECYCLOR/RECLAIMER

VII. WASTE RELATED INFORMATION

A. WASTE TYPE

[ ] 1. LIQUID [ ] 2. SOLID [ ] 3. SLUDGE [ ] 4. GAS

No waste visible
Site is a past fill area that has been reclaimed and built upon

B. WASTE CHARACTERISTICS Unknown Except as general municipal and commercial rubbish and G.E. waste

[ ] 1. CORROSIVE [ ] 2. [illegible] [ ] 3. RADIOACTIVE [ ] 4. HIGHLY VOLATILE
[ ] 5. TOXIC [ ] 6. REACTIVE [ ] 7. INERT [ ] 8. FLAMMABLE

[ ] 9. OTHER (specify):

C. WASTE CATEGORIES

1. Are records of wastes or other specify [illegible] manifests, inventories, etc. below.

General Electric, generator of the wastes that were disposed of at this site before its conversion to a substation, has not disclosed the types of waste.

Continued From Front

VII. WASTE RELATED INFORMATION (continued)

2. Estimate the amount (*specify unit of measure*) of waste by category; mark 'X' to indicate which wastes are present.

a. SLUDGE	b. OIL	c. SOLVENTS	d. CHEMICALS	e. SOLIDS	f. OTHER
AMOUNT	AMOUNT	AMOUNT	AMOUNT	AMOUNT	AMOUNT
UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE
X (1) PAINT, PIGMENTS	X (1) OILY WASTES	X (1) HALOGENATED SOLVENTS	X (1) ACIDS	X (1) FLYASH	X (1) LABORATORY, PHARMACEUT.
(2) METALS SLUDGES	(2) OTHER (specify):	(2) NON-HALOGNTD. SOLVENTS	(2) PICKLING LIQUORS	(2) ASBESTOS	(2) HOSPITAL
(3) POTW		(3) OTHER (specify):	(3) CAUSTICS	(3) MILLING/MINE TAILINGS	(3) RADIOACTIVE
(4) ALUMINUM SLUDGE			(4) PESTICIDES	(4) FERROUS SMELTING WASTES	(4) MUNICIPAL
(5) OTHER (specify):			(5) DYES/INKS	(5) NON-FERROUS SMLTG. WASTES	(5) OTHER (specify):
			(6) CYANIDE	X (6) OTHER (specify): RUBBISH and unknown G.E. wastes	
			(7) PHENOLS		
			(8) HALOGENS		
			(9) PCB		
			(10) METALS		
			(11) OTHER (specify)		

D. LIST SUBSTANCES OF GREATEST CONCERN WHICH ARE ON THE SITE (*place in descending order of hazard*)

1. SUBSTANCE	2. FORM (mark 'X')			3. TOXICITY (mark 'X')				4. CAS NUMBER	5. AMOUNT	6. UNIT
	a. SOLID	b. LIQ.	c. VAPOR	a. HIGH	b. MED.	c. LOW	d. NONE			
General Electric wastes of unknown type	unknown									

VIII. HAZARD DESCRIPTION

FIELD EVALUATION HAZARD DESCRIPTION: Place an 'X' in the box to indicate that the listed hazard exists. Describe the hazard in the space provided. → No waste related hazards evident

SUMMARY

☐ A. HUMAN HEALTH HAZARD → Site consists of substation built upon old "open dump" fill" site which has been reclaimed.

Most of the substation sits on a plateau where a rock salt storage pile once existed

Continue On Page 5

Continued From Page 4

VIII. HAZARD DESCRIPTION *(continued)*

☐ B. NON-WORKER INJURY/EXPOSURE

none

☐ C. WORKER INJURY/EXPOSURE

none

☐ D. CONTAMINATION OF WATER SUPPLY

none

☐ E. CONTAMINATION OF FOOD CHAIN

none

☐ F. CONTAMINATION OF GROUND WATER

none

☐ G. CONTAMINATION OF SURFACE WATER

none

 Continue On Reverse

Continued From Front

VIII. HAZARD DESCRIPTION *(continued)*

☐ H. DAMAGE TO FLORA/FAUNA

none

☐ I. FISH KILL

none

☐ J. CONTAMINATION OF AIR

none

☐ K. NOTICEABLE ODORS

none

☐ L. CONTAMINATION OF SOIL

none

☐ M. PROPERTY DAMAGE

none

Continue On Page 7

Continued From Page 6

VIII. HAZARD DESCRIPTION (continued)

☐ N. FIRE OR EXPLOSION

none

☐ O. SPILLS/LEAKING CONTAINERS/RUNOFF/STANDING LIQUID

none

☐ P. SEWER, STORM DRAIN PROBLEMS

none

☐ Q. EROSION PROBLEMS

none

☐ R. INADEQUATE SECURITY

none

☐ S. INCOMPATIBLE WASTES

none

Continue On Reverse

VIII. HAZARD DESCRIPTION *(continued)*

☐ T. MIDNIGHT DUMPING

none

☐ U. OTHER *(specify)*:

IX. POPULATION DIRECTLY AFFECTED BY SITE

A. LOCATION OF POPULATION	B. APPROX. NO. OF PEOPLE AFFECTED	C. APPROX. NO. OF PEOPLE AFFECTED WITHIN UNIT AREA	D. APPROX. NO. OF BUILDINGS AFFECTED	E. DISTANCE TO SITE *(specify units)*
1. IN RESIDENTIAL AREAS	none			
2. IN COMMERCIAL OR INDUSTRIAL AREAS	none			
3. IN PUBLICLY TRAVELLED AREAS	none			
4. PUBLIC USE AREAS *(parks, schools, etc.)*	none			

X. WATER AND HYDROLOGICAL DATA

A. DEPTH TO GROUNDWATER *(specify unit)*	B. DIRECTION OF FLOW	C. GROUNDWATER USE IN VICINITY
D. POTENTIAL YIELD OF AQUIFER	E. DISTANCE TO DRINKING WATER SUPPLY *(specify unit of measure)*	F. DIRECTION TO DRINKING WATER SUPPLY

G. TYPE OF DRINKING WATER SUPPLY

☐ 1. NON-COMMUNITY < 15 CONNECTIONS* ☒ 2. COMMUNITY *(specify town)*: > 15 CONNECTIONS Cuyahoga Heights - Cleveland

☐ 3. SURFACE WATER ☐ 4. WELL

Continue On Page 9

Continued From Page 8

X. WATER AND HYDROLOGICAL DATA *(continued)*

H. LIST ALL DRINKING WATER WELLS WITHIN A 1/4 MILE RADIUS OF SITE

1. WELL	2. DEPTH *(specify unit)*	3. LOCATION *(proximity to population/buildings)*	4. NON-COMMUNITY *(mark 'X')*	5. COMMUNITY *(mark 'X')*
		None		

I. RECEIVING WATER

1. NAME

☒ 2. SEWERS ☐ 3. STREAMS/RIVERS

☐ 4. LAKES/RESERVOIRS ☐ 5. OTHER *(specify)*:

6. SPECIFY USE AND CLASSIFICATION OF RECEIVING WATERS

City sewer system

XI. SOIL AND VEGITATION DATA

LOCATION OF SITE IS IN:

☐ A. KNOWN FAULT ZONE ☐ B. KARST ZONE ☐ C. 100 YEAR FLOOD PLAIN ☐ D. WETLAND

☐ E. A REGULATED FLOODWAY ☐ F. CRITICAL HABITAT ☐ G. RECHARGE ZONE OR SOLE SOURCE AQUIFER

XII. TYPE OF GEOLOGICAL MATERIAL OBSERVED

Mark 'X' to indicate the type(s) of geological material observed and specify where necessary, the component parts.

'X'	A. OVERBURDEN	'X'	B. BEDROCK *(specify below)*	'X'	C. OTHER *(specify below)*
	1. SAND				
X	2. CLAY				
	3. GRAVEL				

XIII. SOIL PERMEABILITY

☒ A. UNKNOWN ☐ B. VERY HIGH *(100,000 to 1000 cm/sec.)* ☐ C. HIGH *(1000 to 10 cm/sec.)*

☐ D. MODERATE *(10 to .1 cm/sec.)* ☐ E. LOW *(.1 to .001 cm/sec.)* ☐ F. VERY LOW *(.001 to .00001 cm/sec.)*

G. RECHARGE AREA

☒ 1. YES ☐ 2. NO 3. COMMENTS:

H. DISCHARGE AREA

☐ 1. YES ☒ 2. NO 3. COMMENTS:

I. SLOPE

1. ESTIMATE % OF SLOPE

<5%

2. SPECIFY DIRECTION OF SLOPE, CONDITION OF SLOPE, ETC.

J. OTHER GEOLOGICAL DATA

 Continue On Reverse

Continued From Front

XIV. PERMIT INFORMATION

List all applicable permits held by the site and provide the related information.

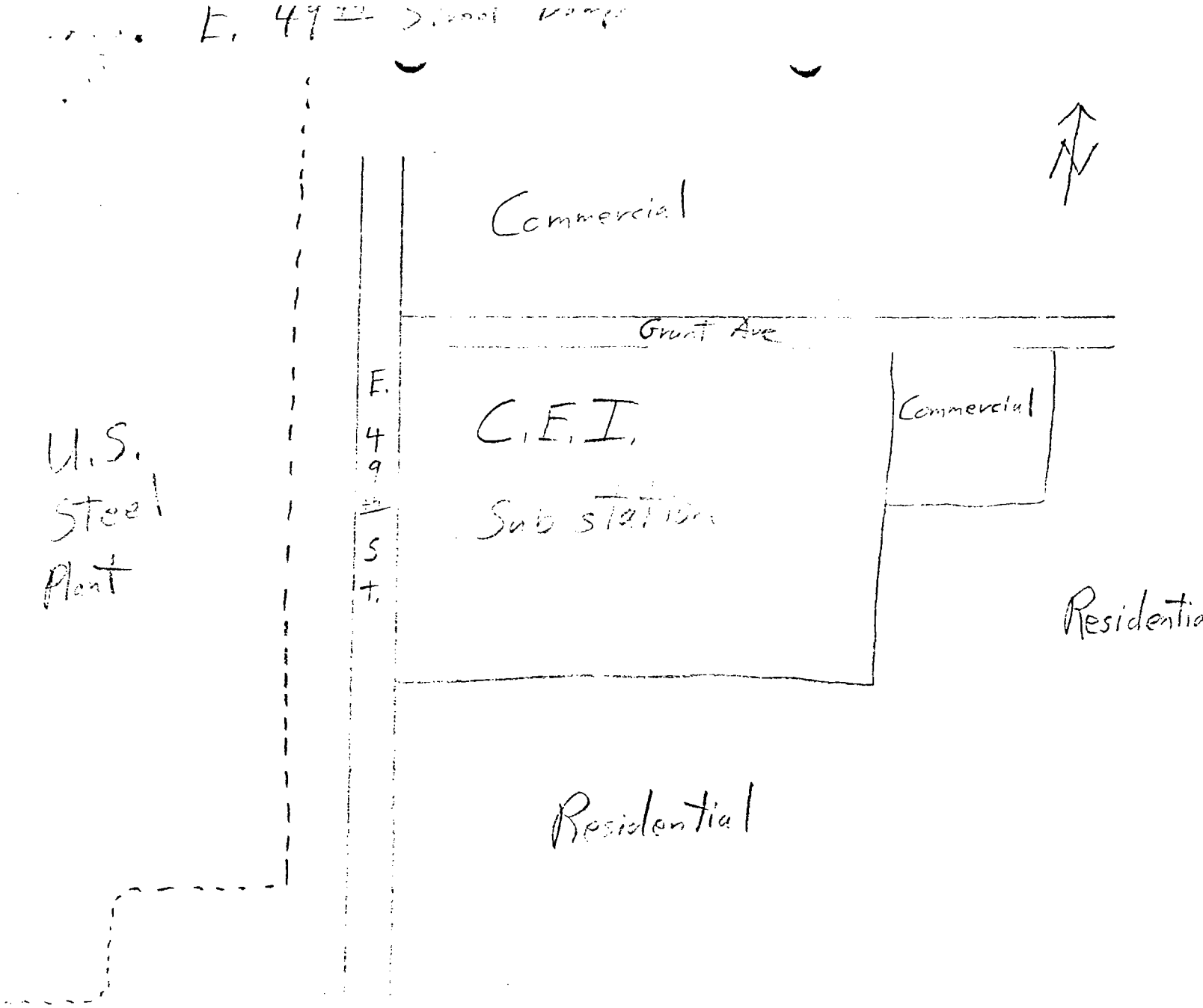
No Permits A. PERMIT TYPE (e.g., RCRA, State, NPDES, etc.)	B. ISSUING AGENCY	C. PERMIT NUMBER	D. DATE ISSUED (mo., day, & yr.)	E. EXPIRATION DATE (mo., day, & yr.)	F. IN COMPLIANCE (mark 'X')		
					1. YES	2. NO	3. UNKNOWN

XV. PAST REGULATORY OR ENFORCEMENT ACTIONS

☐ NONE ☐ YES (summarize in this space)

Not Applicable

NOTE: Based on the information in Sections III through XV, fill out the Tentative Disposition *(Section II)* information on the first page of this form.


E. 49th St.
Commercial
Grant Ave
E. 49th St.
C.E.I.
Substation
Commercial
U.S. Steel Plant
Residential
Residential