1 8 0009

Site:
Break: 1.8
Other:

MAR 15 '00

EPA POTENTIAL HAZARDOUS WASTE SITE IDENTIFICATION AND PRELIMINARY ASSESSMENT

REGION: IV

SITE NUMBER (to be assigned by HQ):

NOTE: This form is completed for each potential hazardous waste site to help set priorities for site inspection. The information submitted on this form is based on available records and may be updated on subsequent forms as a result of additional inquiries and on-site inspections.

GENERAL INSTRUCTIONS: Complete Sections I and III through X as completely as possible before Section II (*Preliminary Assessment*). File this form in the Regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (*EN-335*); 401 M St., SW; Washington, DC 20460.

SCD000622787 RICHLAND
SOUTH CAROLINA RECYCLING & DISPOSAL CO
OFF BLUFF RD
COLUMBIA SC 29209
MORGAN, ELIZABETH,MGR/TE* 3019539583

ATION
ET (or other identifier)

E. ZIP CODE | F. COUNTY NAME

2. TELEPHONE NUMBER

H. TYPE OF OWNERSHIP

☐ 1. FEDERAL ☐ 2. STATE ☐ 3. COUNTY ☐ 4. MUNICIPAL ☑ 5. PRIVATE ☐ 6. UNKNOWN

I. SITE DESCRIPTION

"103-C NOTIFICATION" DATE: 810609
EARL WILLIAMS
PHONE: 803-758-5544

K. DATE IDENTIFIED (mo., day, & yr.)

2. TELEPHONE NUMBER

plete this section last)

A. APPARENT SERIOUSNESS OF PROBLEM

☑ 1. HIGH ☐ 2. MEDIUM ☐ 3. LOW ☐ 4. NONE ☐ 5. UNKNOWN

B. RECOMMENDATION

☐ 1. NO ACTION NEEDED (*no hazard*)

☒ 3. SITE INSPECTION ~~needed~~ completed.
a. TENTATIVELY SCHEDULED FOR:
b. WILL BE PERFORMED BY:

☐ 2. IMMEDIATE SITE INSPECTION NEEDED
a. TENTATIVELY SCHEDULED FOR:
b. WILL BE PERFORMED BY:

☐ 4. SITE INSPECTION NEEDED (*low priority*)

C. PREPARER INFORMATION

1. NAME: Ron W. Joyner
2. TELEPHONE NUMBER: FTS 257-2234
3. DATE (mo., day, & yr.): 9-15-82

III. SITE INFORMATION

A. SITE STATUS

☐ 1. ACTIVE (*Those industrial or municipal sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if infrequently.*)

☐ 2. INACTIVE (*Those sites which no longer receive wastes.*)

☐ 3. OTHER (*specify*): (*Those sites that include such incidents like "midnight dumping" where no regular or continuing use of the site for waste disposal has occurred.*)

B. IS GENERATOR ON SITE?

☑ 1. NO ☐ 2. YES (*specify generator's four-digit SIC Code*):

C. AREA OF SITE (*in acres*): 6-8 acres

D. IF APPARENT SERIOUSNESS OF SITE IS HIGH, SPECIFY COORDINATES

1. LATITUDE (*deg.—min.—sec.*)
2. LONGITUDE (*deg.—min.—sec.*)

E. ARE THERE BUILDINGS ON THE SITE?

☐ 1. NO ☑ 2. YES (*specify*): 2 warehouses

T2070-2 (10-79)

10925768

Continued From Front

IV. CHARACTERIZATION OF SITE ACTIVITY

Indicate the major site activity(ies) and details relating to each activity by marking 'X' in the appropriate boxes.

'X'	A. TRANSPORTER	'X'	B. STORER	'X'	C. TREATER	'X'	D. DISPOSER
	1. RAIL		1. PILE		1. FILTRATION		1. LANDFILL
	2. SHIP		2. SURFACE IMPOUNDMENT		2. INCINERATION		2. LANDFARM
	3. BARGE	X	3. DRUMS		3. VOLUME REDUCTION		3. OPEN DUMP
	4. TRUCK		4. TANK, ABOVE GROUND		4. RECYCLING/RECOVERY		4. SURFACE IMPOUNDMENT
	5. PIPELINE		5. TANK, BELOW GROUND		5. CHEM./PHYS. TREATMENT		5. MIDNIGHT DUMPING
	6. OTHER (specify):		6. OTHER (specify):		6. BIOLOGICAL TREATMENT		6. INCINERATION
					7. WASTE OIL REPROCESSING		7. UNDERGROUND INJECTION
					8. SOLVENT RECOVERY		8. OTHER (specify):
					9. OTHER (specify):		

E. SPECIFY DETAILS OF SITE ACTIVITIES AS NEEDED

V. WASTE RELATED INFORMATION

A. WASTE TYPE

[ ] 1 UNKNOWN [X] 2. LIQUID [X] 3. SOLID [X] 4. SLUDGE [ ] 5. GAS

B. WASTE CHARACTERISTICS

[ ] 1. UNKNOWN [X] 2. CORROSIVE [X] 3. IGNITABLE [ ] 4 RADIOACTIVE [X] 5 HIGHLY VOLATILE
[X] 6 TOXIC [X] 7 REACTIVE [X] 8 INERT [X] 9 FLAMMABLE

[ ] 10. OTHER (specify):

C. WASTE CATEGORIES

1. Are records of wastes available? Specify items such as manifests, inventories, etc. below.

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 100	AMOUNT 1500	AMOUNT 700	AMOUNT
UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE 55 gal. drums	UNIT OF MEASURE 55 gal. drums	UNIT OF MEASURE 55 gal. drums	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)	X 700 (3) CAUSTICS	(3) MILLING/ MINE TAILINGS	(3) RADIOACTIVE
(4) ALUMINUM SLUDGE			X 2 drums (4) PESTICIDES	(4) FERROUS SMLTG. WASTES	(4) MUNICIPAL
(5) OTHER (specify):			(5) DYES/INKS	(5) NON-FERROUS SMLTG. WASTES	(5) OTHER (specify):
			(6) CYANIDE	(6) OTHER (specify):	
			(7) PHENOLS		
			(8) HALOGENS		
			(9) PCB		
			(10) METALS		
			(11) OTHER (specify) LAB Packs - 800 drums		

 Continue On Page 3

Continued From Page 2

V. WASTE RELATED INFORMATION *(continued)*

3. LIST SUBSTANCES OF GREATEST CONCERN WHICH MAY BE ON THE SITE *(place in descending order of hazard)*.

4. ADDITIONAL COMMENTS OR NARRATIVE DESCRIPTION OF SITUATION KNOWN OR REPORTED TO EXIST AT THE SITE.

VI. HAZARD DESCRIPTION

	A. TYPE OF HAZARD	B. POTENTIAL HAZARD *(mark 'X')*	C. ALLEGED INCIDENT *(mark 'X')*	D. DATE OF INCIDENT *(mo., day, yr.)*	E. REMARKS
A	1. NO HAZARD				
B	2. HUMAN HEALTH		X		
C	3. NON-WORKER INJURY/EXPOSURE				
D	4. WORKER INJURY				
E	5. CONTAMINATION OF WATER SUPPLY				
F	6. CONTAMINATION OF FOOD CHAIN				
G	7. CONTAMINATION OF GROUND WATER		X		sample results
H	8. CONTAMINATION OF SURFACE WATER		X		sample results
I	9. DAMAGE TO FLORA/FAUNA				
J	10. FISH KILL				
K	11. CONTAMINATION OF AIR	X			air monitoring data
L	12. NOTICEABLE ODORS		X		odor is strong off site
M	13. CONTAMINATION OF SOIL		X		observed spillage
N	14. PROPERTY DAMAGE				
O	15. FIRE OR EXPLOSION				
P	16. SPILLS/LEAKING CONTAINERS/ RUNOFF/STANDING LIQUIDS				
Q	17. SEWER, STORM DRAIN PROBLEMS				
R	18. EROSION PROBLEMS				
S	19. INADEQUATE SECURITY				
T	20. INCOMPATIBLE WASTES	X			
U	21. MIDNIGHT DUMPING				
V	22. OTHER *(specify)*:				

VII. PERMIT INFORMATION

A. INDICATE ALL APPLICABLE PERMITS HELD BY THE SITE.

- [ ] 1. NPDES PERMIT
- [ ] 2. SPCC PLAN
- [ ] 3. STATE PERMIT (specify): _____
- [ ] 4. AIR PERMITS
- [ ] 5. LOCAL PERMIT
- [ ] 6. RCRA TRANSPORTER
- [ ] 7. RCRA STORER
- [x] 8. RCRA TREATER
- [ ] 9. RCRA DISPOSER
- [ ] 10. OTHER (specify): _____

B. IN COMPLIANCE?

- [ ] 1. YES
- [ ] 2. NO
- [ ] 3. UNKNOWN
- 4. WITH RESPECT TO (list regulation name & number): _____

VIII. PAST REGULATORY ACTIONS

- [ ] A. NONE
- [ ] B. YES (summarize below)

IX. INSPECTION ACTIVITY (past or on-going)

- [ ] A. NONE
- [ ] B. YES (complete items 1,2,3, & 4 below)

1. TYPE OF ACTIVITY	2. DATE OF PAST ACTION (mo., day, & yr.)	3. PERFORMED BY: (EPA/State)	4. DESCRIPTION

X. REMEDIAL ACTIVITY (past or on-going)

- [ ] A. NONE
- [x] B. YES (complete items 1, 2, 3, & 4 below)

1. TYPE OF ACTIVITY	2. DATE OF PAST ACTION (mo., day, & yr.)	3. PERFORMED BY: (EPA/State)	4. DESCRIPTION
generator cleanup	3/23/82 - 9/4/82	TRI	75% of waste removed by generator

NOTE: Based on the information in Sections III through X, fill out the Preliminary Assessment (Section II) information on the first page of this form.

Final cleanup at this site will be undertaken at the end of 1982 using Superfund monies.