HERCULES

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401
(601) 545-3450

February 18, 1983

RECEIVED 1983 FEB 22

Mississippi Department of Natural Resources
Bureau of Pollution Control
Division of Solid Waste Management
P. O. Box 10385
Jackson, MS 39209
Attn: Mr. John Herrmann

Dear Mr. Herrmann:

On January 27, 1983, we met with you to review our initial notification of hazardous waste activity and subsequent hazardous waste permit application. The meeting was very beneficial with your clarification of several aspects of hazardous waste activity.

In summary, we agreed that our initial notification and subsequent hazardous waste permit application as a storer and treater of hazardous waste (spent sulfuric acid) was misleading. All of the acid is beneficially used for pH control during primary wastewater treatment and supplemented with the purchase of additional fresh acid. In fact, the spent acid does not meet any of the criteria in part 261.2 (definition of a solid waste) and therefore we conclude if it is not a solid waste it is not a hazardous waste. The "storage" tanks are only used to control optimum discharge of the spent acid. As you requested, we also looked at heavy metals, using the EP toxicity procedure, in our impounding basin sludge (the continuous flowthrough basin is for wastewater equalization and pH control) and also in the wastewater from the process generating the spent acid. No levels were found anywhere near the levels listed as maximum concentration of contaminants characteristic of EP toxicity. Also, the only reason underground injection was marked on our original notification was because of sanitary septic tanks and after talking to David Lee on February 17, 1983, we concur that underground injection should also be removed. Therefore, we are submitting the enclosed amended notification of hazardous waste activity.

With your concurrence that the spent sulfuric acid is not a hazardous waste, we respectfully request that we be removed as a storer and treater of hazardous waste and be listed only as a generator of hazardous waste. Although we are not generating any hazardous waste on a regular basis we do feel that in the future we may generate non-specific hazardous waste from non-specific sources on occasions as the result of process malfunctions, contamination, etc., and therefore we wish to retain our EPA ID number. Please advise us on the procedure to accomplish being removed as a storer and treater of hazardous waste (eliminating the hazardous waste permit application) while retaining our EPA ID number.

If I can answer any questions or be of any help, please call me.

Yours truly,

Charles S. Jordan

Charles S. Jordan
Environmental Coordinator

CSJ:ps

Enclosure

1-X 1 80 03 13 20 3 1

Please print or type with ELITE type (12 characters/inch) in the unshaded areas only.

Form Approved OMB No. 158-S-0016
GSA No. 0246-EPA-OT

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY

NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

INSTALLATION'S EPA I.D. NO.

I. NAME OF INSTALLATION

II. INSTALLATION MAILING ADDRESS

III. LOCATION OF INSTALLATION

AMENDED NOTIFICATION

PLEASE PLACE LABEL IN THIS SPACE

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law *(Section 3010 of the Resource Conservation and Recovery Act).*

DETACH

FOR OFFICIAL USE ONLY

COMMENTS: C

INSTALLATION'S EPA I.D. NUMBER: F MSD008182081 (T/A: 1)

APPROVED:

DATE RECEIVED (yr., mo. & day): 801223

I. NAME OF INSTALLATION

HERCULES INCORPORATED

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX: 3 PO BOX 1937

CITY OR TOWN: 4 HATTIESBURG

ST.: MS

ZIP CODE: 39401

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER: 5 WEST 7TH STREET

CITY OR TOWN: 6 HATTIESBURG

ST.: MS

ZIP CODE: 39401

IV. INSTALLATION CONTACT

NAME AND TITLE *(last, first, & job title)*: 2 BUCKLEY H R PLANT MANAGER

PHONE NO. *(area code & no.)*: 601-545-3450

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER: 8 HERCULES INCORPORATED

B. TYPE OF OWNERSHIP *(enter the appropriate letter into box)*

F = FEDERAL
M = NON–FEDERAL

M

VI. TYPE OF HAZARDOUS WASTE ACTIVITY *(enter "X" in the appropriate box(es))*

- [X] A. GENERATION
- [ ] B. TRANSPORTATION *(complete item VII)*
- [ ] C. TREAT/STORE/DISPOSE
- [ ] D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION *(transporters only – enter "X" in the appropriate box(es))*

- [ ] A. AIR
- [ ] B. RAIL
- [ ] C. HIGHWAY
- [ ] D. WATER
- [ ] E. OTHER *(specify)*:

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below.

- [ ] A. FIRST NOTIFICATION
- [X] B. SUBSEQUENT NOTIFICATION *(complete item C)*

C. INSTALLATION'S EPA I.D. NO.: MSD008182081

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

I.D. – FOR OFFICIAL USE ONLY		
S W	T/A	C 1

IX. DESCRIPTION OF HAZARDOUS WASTES *(continued from front)*

A. HAZARDOUS WASTES FROM NON–SPECIFIC SOURCES. Enter the four–digit number from 40 CFR Part 261.31 for each listed hazardous waste from non–specific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
7	8	9	10	11	12

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four–digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four–digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

D. LISTED INFECTIOUS WASTES. Enter the four–digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54

E. CHARACTERISTICS OF NON–LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non–listed hazardous wastes your installation handles. *(See 40 CFR Parts 261.21 – 261.24.)*

☐ 1. IGNITABLE (D001) ☐ 2. CORROSIVE (D002) ☐ 3. REACTIVE (D003) ☐ 4. TOXIC (D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE	NAME & OFFICIAL TITLE *(type or print)*	DATE SIGNED
H R Buckley	H. R. Buckley Plant Manager	2/18/83

EPA Form 8700-12 (6-80) REVERSE

X S0 0 8 1 3 2 0 8 1