Please refer to the *Instructions for Filing Notification* before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).

EPA Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received (For Official Use Only)
REC'D. [illegible] SEC.
DEC 01 1993

I. Installation's EPA ID Number *(Mark "X" in the appropriate box)*

[X] A. First Notification [ ] B. Subsequent Notification *(complete item C)*

C. Installation's EPA ID Number: IA000000700094

II. Name of Installation *(Include company and specific site name)*

BRAMMER MANUFACTURING COMPANY

III. Location of Installation *(Physical address not P.O. Box or Route Number)*

Street: 2728 W. CENTRAL PARK AVE.

Street (continued):

City or Town: DAVENPORT | State: IA | ZIP Code: 52804-

County Code: | County Name: SCOTT

IV. Installation Mailing Address *(See Instructions)*

Street or P.O. Box: P.O. BOX 3547

City or Town: DAVENPORT | State: IA | ZIP Code: 52808-

V. Installation Contact *(Person to be contacted regarding waste activities at site)*

Name *(last)*: DICKEY | *(first)*: TERRY

Job Title: VICE-PRESIDENT | Phone Number *(area code and number)*: 319-326-2585

VI. Installation Contact Address *(See Instructions)*

A. Contact Address: Location [ ] Mailing [X]

B. Street or P.O. Box:

City or Town: | State: | ZIP Code: -

VII. Ownership *(See Instructions)*

A. Name of Installation's Legal Owner: BRAMMER MANUFACTURING COMPANY

Street, P.O. Box, or Route Number: P.O. BOX 3547

City or Town: DAVENPORT | State: IA | ZIP Code: 52808-

Phone Number *(area code and number)*: 319-326-2585

B. Land Type: P

C. Owner Type: P

D. Change of Owner Indicator: Yes [ ] No [X]

(Date Changed) Month Day Year:

Continue on reverse

ID – For Official Use Only

VIII. Type of Regulated Waste Activity *(Mark 'X' in the appropriate boxes. Refer to instructions.)*

A. Hazardous Waste Activity

1. Generator (See instructions)
   - [ ] a. Greater than 1000kg/mo (2,200 lbs.)
   - [ ] b. 100 to 1000 kg/mo (220 – 2,200 lbs.)
   - [X] c. Less than 100 kg/mo (220 lbs.)
2. Transporter (Indicate Mode in boxes 1-5 below)
   - [ ] a. For own waste only
   - [ ] b. For commercial purposes

   Mode of Transportation
   - [ ] 1. Air
   - [ ] 2. Rail
   - [ ] 3. Highway
   - [ ] 4. Water
   - [ ] 5. Other – specify
3. [ ] Treater, Storer, Disposer (at installation) Note: A permit is required for this activity; see instructions.
4. Hazardous Waste Fuel
   - [ ] a. Generator Marketing to Burner
   - [ ] b. Other Marketers
   - [ ] c. Boiler and/or Industrial Furnace
     - [ ] 1. Smelter Deferral
     - [ ] 2. Small Quantity Exemption

     Indicate Type of Combustion Device(s)
     - [ ] 1. Utility Boiler
     - [ ] 2. Industrial Boiler
     - [ ] 3. Industrial Furnace
5. [ ] Underground Injection Control

B. Used Oil Fuel Activities

1. Off-Specification Used Oil Fuel
   - [ ] a. Generator Marketing to Burner
   - [ ] b. Other Marketer
   - [ ] c. Burner – indicate device(s) – Type of Combustion Device
     - [ ] 1. Utility Boiler
     - [ ] 2. Industrial Boiler
     - [ ] 3. Industrial Furnace
2. [ ] Specification Used Oil Fuel Marketer (or On-site Burner) Who First Claims the Oil Meets the Specification

IX. Description of Regulated Wastes *(Use additional sheets if necessary)*

A. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. *(See 40 CFR Parts 261.20 – 261.24)*

1. Ignitable *(D001)*	2. Corrosive *(D002)*	3. Reactive *(D003)*	4. Toxicity Characteristic *(D000)*	(List specific EPA hazardous waste number(s) for the Toxicity characteristic contaminant(s))
X				

B. Listed Hazardous Wastes. (See 40 CFR 261.31 – 33. See instructions if you need to list more than 12 waste codes.)

1	2	3	4	5	6
F003	F005				
7	**8**	**9**	**10**	**11**	**12**

C. Other Wastes. (State or other wastes requiring a handler to have an I.D. number. See instructions.)

1	2	3	4	5	6

X. Certification

R00013051
RCRA Records Center

ument and all attachments were prepared under my direction or supervision in assure that qualified personnel properly gather and evaluate the information son or persons who manage the system, or those persons directly responsible for on submitted is, to the best of my knowledge and belief, true, accurate, and cant penalties for submitting false information, including the possibility of fine and

Signature	Name and Official Title *(type or print)*	Date Signed
W. Jerry Dickey	EXECUTIVE VICE-PRESIDENT	11-22-93

XI. Comments

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)

BRAMMER® MANUFACTURING COMPANY
P.O. Box 3547 • Davenport, Iowa 52808 • (319) 326-2585 • Fax (800) 334-7230
Living Kitchens®

November 22, 1993

U.S. Environmental Protection Agency
RCRA Branch, Iowa Section
726 Minnesota Avenue
Kansas City, Kansas 66101

Dear EPA Official,

Enclosed please find a Notification of Regulated Waste Activity for our facility at 2728 West Central Park. The material generated is a small quantity of solvent used to clean up a single spray gun.

If there are any questions, please contact me at (319)326-2585. Thank you for your assistance.

Sincerely,

W. Terry Dickey

W. Terry Dickey
Executive Vice-President of Manufacturing

RCRIS data entered
by Jim Johnson
on 12/8/93

AARP/SEE
RCRA/IOWA

RCRIS DATA ENTRY COPY

ID# Assigned
in FINDS
10/6/93 CJ

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EPA Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received (For Official Use Only)
REC'D. [illegible] SEC.
DEC 01 1993

I. Installation's EPA ID Number (Mark X in the appropriate box)

[X] A. First Notification
[ ] B. Subsequent Notification (complete item C)

C. Installation's EPA ID Number: IA0000070094

II. Name of Installation (Include company and specific site name)

BRAMMER MANUFACTURING COMPANY

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street: 2728 W. CENTRAL PARK AVE.

Street (continued):

City or Town: DAVENPORT
State: IA
ZIP Code: 52804-

County Code: 163
County Name: SCOTT

IV. Installation Mailing Address (See instructions)

Street or P.O. Box: P.O. BOX 3547

City or Town: DAVENPORT
State: IA
ZIP Code: 52808-

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (last): CICKEY
(first): TERRY

Job Title: VICE-PRESIDENT
Phone Number (area code and number): 319-326-2585

VI. Installation Contact Address (See instructions)

A. Contact Address: Location [ ] Mailing [X]

B. Street or P.O. Box:

City or Town:
State:
ZIP Code: -

VII. Ownership (See instructions)

A. Name of Installation's Legal Owner: BRAMMER MANUFACTURING COMPANY

Street, P.O. Box, or Route Number: P.O. BOX 3547

City or Town: DAVENPORT
State: IA
ZIP Code: 52808-

Phone Number (area code and number): 319-326-2585

B. Land Type: P

C. Owner Type: P

D. Change of Owner Indicator: Yes [ ] No [X]

(Date Changed) Month Day Year:

EPA Form 8700-12 (Rev. 9-92) Previous edition is obsolete.

Continue on reverse

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

GSA No. 0246-EPA-07

ID – For Official Use Only

VIII. Type of Regulated Waste Activity *(Mark "X" in the appropriate boxes. Refer to Instructions.)*

A. Hazardous Waste Activity

1. Generator (See Instructions)
   - [ ] a. Greater than 1000kg/mo (2,200 lbs.)
   - [ ] b. 100 to 1000 kg/mo (220 – 2,200 lbs.)
   - [X] c. Less than 100 kg/mo (220 lbs.)
2. Transporter (Indicate Mode in boxes 1–5 below)
   - [ ] a. For own waste only
   - [ ] b. For commercial purposes

   Mode of Transportation
   - [ ] 1. Air
   - [ ] 2. Rail
   - [ ] 3. Highway
   - [ ] 4. Water
   - [ ] 5. Other – specify
3. [ ] Trader, Storer, Disposer (at Installation) Note: A permit is required for this activity; see instructions.
4. Hazardous Waste Fuel
   - [ ] a. Generator Marketing to Burner
   - [ ] b. Other Marketers
   - [ ] c. Boiler and/or Industrial Furnace
     - [ ] 1. Smelter Deferral
     - [ ] 2. Small Quantity Exemption

     Indicate Type of Combustion Device(s)
     - [ ] 1. Utility Boiler
     - [ ] 2. Industrial Boiler
     - [ ] 3. Industrial Furnace
5. [ ] Underground Injection Control

B. Used Oil Fuel Activities

1. Off-Specification Used Oil Fuel
   - [ ] a. Generator Marketing to Burner
   - [ ] b. Other Marketer
   - [ ] c. Burner – Indicate device(s) – Type of Combustion Device
     - [ ] 1. Utility Boiler
     - [ ] 2. Industrial Boiler
     - [ ] 3. Industrial Furnace
2. [ ] Specification Used Oil Fuel Marketer (or On-site Burner) Who First Claims the Oil Meets the Specification

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1. Ignitable (D001)	2. Corrosive (D002)	3. Reactive (D003)	4. Toxicity Characteristic (D000)	(List specific EPA hazardous waste number(s) for site Toxicity characteristic contaminant(s))*			
X							

B. Listed Hazardous Wastes. (See 40 CFR 261.31 – 33. See instructions if you need to list more than 12 waste codes.)

1	2	3	4	5	6
F003	F005				
7	**8**	**9**	**10**	**11**	**12**

C. Other Wastes. (State or other wastes requiring a handler to have an I.D. number. See instructions.)

1	2	3	4	5	6

X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature	Name and Official Title *(type or print)*	Date Signed
W. Terry Dickey	EXECUTIVE VICE-PRESIDENT	11-22-93

XI. Comments

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)