WASHINGTON STATE DEPARTMENT OF ECOLOGY

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DEPARTMENT OF ECOLOGY

Attn: DW Notifications
M/S PV-11
Olympia, WA 98504-8711
(206) 459-6387

RECEIVED OCT 06 1997

"RMSP Unit" "OWCM"

47.54877
122.05871

FORM 2

DEPARTMENTAL USE ONLY

WAH000002808

AUG 29 1997

RCV'D
LOG
REVIEW
G/WAC

# NOTIFICATION OF DANGEROUS WASTE ACTIVITIES

1. [XX] A. FIRST NOTIFICATION (No previous application has been made for this site)
[ ] B. REVISED NOTIFICATION DATE (Enter existing site I.D. No. in Part 1F. List sections you revised: )
[ ] C. WITHDRAW SITE I.D. NO. DATE (Complete Sections 1F, 2-8 & 13. Enter existing I.D. No. in Part 1F)
[ ] D. REACTIVATE SITE I.D. NO. (Complete all sections of the form. Enter previously assigned I.D. No. in Part 1F.)
[ ] E. CANCEL SITE I.D. NO. DATE (Site closed—no longer own or conduct business at this site. Complete Sections 1F, 2-8 & 13. Enter existing I.D. No. in 1F)
[ ] F. EXISTING I.D. NO. (Complete for items 1B, C, D & E only) WA

FS 675 3974

| 2.A. WASHINGTON STATE DEPARTMENT OF REVENUE REGISTRATION (TAX) NUMBER | 2.B. SIC CODE(S) PRIMARY | SECONDARY | OTHER |
|---|---|---|---|
| 178-047-526 | 5541 | | |

2.C. TYPE OF BUSINESS CONDUCTED AT THIS SITE GASOLINE SERVICE STATION

3. NAME OF INSTALLATION
JACKPOT FOODMART

4. LOCATION OF INSTALLATION
Street: 1001 N AVENUE D
County Name: SNOHOMISH
City or Town: SNOHOMISH State: WA ZIP Code: 98290—

5. INSTALLATION MAILING ADDRESS
Street or P.O. Box: 2737 WEST COMMODORE WAY
City or Town: SEATTLE State: WA ZIP Code: 98199—1233

6.A. INSTALLATION CONTACT
Name (last): BUTLER (first): DONALD
Job Title: ENV SPECIALIST Phone Number: 206—286—6445

6.B. INSTALLATION CONTACT MAILING ADDRESS (see instructions) BOX 1 [ ] BOX 2 [ ]
Street or P.O. Box: 2737 WEST COMMODORE WAY
City or Town: SEATTLE State: WA ZIP Code: 98199—1233

7.A. NAME OF INSTALLATION'S LEGAL OWNER
TIME OIL CO
Street, P.O. Box, or Route Number: 2737 WEST COMMODORE WAY
City or Town: SEATTLE State: WA ZIP Code: 98199—1233

7.B. PROPERTY OWNERSHIP (Provide address in section 12 if different than 7A.)
TIME OILCO

| 7.C. OWNER TYPE | 7.D. PROPERTY TYPE |
|---|---|
| P | P |

Time Oil Co

ECL 28-13

ECL (Rev. 4/91) -1518- 3

ATTACH SITE LOCATION MAP

8.A. NAME OF INSTALLATION JACKPOT FOOD MART
(Same as item No. 3)

8.B. EPA I.D. NO. _____

9. TYPES OF REGULATED DANGEROUS WASTE ACTIVITIES YOUR BUSINESS IS CONDUCTING (Read & follow instructions for this section carefully—Enter an "X" in any sections of 9.A., 9.B., or 9.C. below that may apply).

9.A. HAZARDOUS WASTE ACTIVITIES (See instructions for definitions of these activities).

[XX] 1. GENERATOR ☐ 1a. Conduct on-site recycling

☐ 2. TRANSPORTER 2a. ☐ Transport Wastes Commercially (for hire).
2b. Modes of Transport: (1) ☐ Highway (2) ☐ Air (3) ☐ Rail (4) ☐ Water (5) ☐ Other (Specify in comments)

☐ 3. MANAGEMENT FACILITY (TSD) 3a. ☐ Facility accepts wastes from OFF-SITE Generators.
3b. Process conducted or available at this facility;
(1) ☐ Treatment (2) ☐ Storage (3) ☐ Disposal
(4) ☐ Other (specify in comments).
3c. Current Part A ____/____/____
Part B Process ☐ Yes ☐ No

☐ 4. IMMEDIATE RECYCLER

☐ 5. PERMIT-BY-RULE FACILITY

☐ 6. MARKET OR BURN DANGEROUS WASTE FUELS— 6a. ☐ Generator Marketing to Burner 6b. ☐ Other Marketer
6c. ☐ Burner. (COMPLETE 9c.—TYPE OF COMBUSTION DEVICE)

9.B. USED-OIL FUEL ACTIVITIES.

☐ 1. OFF-SPECIFICATION USED-OIL FUELS-1a. ☐ Generator Marketing to Burner 1b. ☐ Other Marketer 1c. ☐ Burner (Complete 9c.)

☐ 2. SPECIFICATION USED-OIL FUEL MARKETER (or ON-SITE BURNER) WHO FIRST CLAIMS THE OIL MEETS THE SPECIFICATION.

9.C. DANGEROUS WASTE OR OFF-SPECIFICATION USED-OIL FUEL BURNING: TYPE OF COMBUSTION DEVICE.

(see instructions for definitions of combustion devices) 1. ☐ Utility Boiler 2. ☐ Industrial Boiler 3. ☐ Industrial Furnace.

10. WASTE IDENTIFICATION (Copy this page if you have more than 5 waste streams—other information (sections 9 and 11-13) not needed on continuation sheets)

| A. LINE NUMBER | B. DESCRIPTION OF WASTE(S) | C. DANGEROUS WASTE NUMBER | D. ESTIMATED OR ACTUAL ANNUAL WASTE QUANTITY | E. WEIGHT CODE |
|---|---|---|---|---|
| | SPENT ACTIVATED CARBON FROM GASOLINE UST REMEDIATION PROJECT | D018 | 500 | P |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

11. Complete a, b, or c; AND d below.

11.A. ☐ (Batch Frequency _____) QUANTITY WEIGHT CODE

11.B. ☐ PER MONTH QUANTITY WEIGHT CODE

11.C. [XX] ONE-TIME-ONLY QUANTITY 500 WEIGHT P CODE

11.D. AMOUNT TO BE ACCUMULATED ON-SITE PRIOR TO SHIPMENT QUANTITY 500 WEIGHT P CODE

12. COMMENTS