44

1804

FACILITY NAME: IAD049975394
LOCATION: MCCOLLISTER AND CO
RCRA ID #: 2200A SOUTH AVE
COUNCIL BLUFFS-IA-51503

6/13/94

IMPACT OF FLOOD AND RAIN QUESTIONNAIRE
RCRA PROGRAM

1. Is this facility located within approximately 1/2 mile of a river, creek or stream? YES or NO? If YES, what is the name if known? Mosquito

2. Are there any visual signs that the facility was affected by flood waters? YES or NO? If YES, describe: _____

3. Was the facility damaged by the flood water or rain? YES or NO? If YES, generally describe the damage. _____

IF THE ANSWER TO QUESTION #3 IS NO, STOP HERE.

4. Was there any damage to inventories, products or waste at the facility that would have caused the facility to generate hazardous waste? YES or NO?

5. Were there any release of hazardous material as a result of the flooding? YES or NO? If yes, describe: _____

6. If the answer to question #5 is YES, has remedial activity occurred to address the releases? YES or NO? If YES, describe: _____

7. Were there any circumstances (e.g. design criteria) or actions that the facility took that were useful in preventing potential releases or generation of hazardous materials? YES or NO? For the purpose of this question, we are looking for the "lessons learned" that may be useful in future guidance, etc. If YES, describe: _____

See Also IAD 991286014

R00053700
RCRA Records Center

FACILITY NAME: _____
LOCATION: _____
RCRA ID #: _____

IF THE ANSWER TO QUESTION #4 IS NO, STOP HERE.

8. Is the facility currently storing hazardous waste generated as a result of the flood? YES or NO? Is the storage area located inside or outside or both? INSIDE (I), OUTSIDE (O) or BOTH (B)? Describe the type and amount of hazardous waste in storage.

TYPE	**AMOUNT**	**I, O or B**
Examples:		
Contaminated MEK	2 - 55 gal. Drums	O (Outside)
Cleaning Products	6 spray bottles	I (Inside)

9. Did the facility generate hazardous waste as a result of the flood that was subsequently sent off-site? YES or NO? Describe the type and amount of hazardous waste generated.

TYPE	**AMOUNT**
Examples:	
Contaminated MEK	2 - 55 gal. Drums
Cleaning Products	6 spray bottles

OTHER COMMENTS:

_____
_____
_____
_____
_____
_____

Last Revised: 1/25/91 Time to complete screening: 60 min

RCRA SCREENING CHECKLIST

Inspector: M. Radke Primary Media:
Date: 6/13/94
Facility: IAD049975394
MCCOLLISTER AND CO
Facility Address: 2200A SOUTH AVE
COUNCIL BLUFFS-IA-51503

Phone (712) 322-4038
Contact/Title: Stephen McCollister, President
SIC #: Process: Blends oil for sale

Office Questions:

1) Facility description Independent Contractor & Lube Oil. 1 Large Bldg connected to a warehouse - AOST located on South side of Bldg - RR track directly West. Reconditioner of Used Drums & Lube Oil Drums containing new oil.

2) Does facility have an EPA ID number? Yes X No __ #

3) What Chemical and/or Industrial Waste (CIW) streams are generated? (list: Name, Amount generated/month, Final disposition) (1) Tramp Oil from "Empty Drums" 3-4,000 gallons/month - Tramp oil is filtered and sold as "Chain Oil" OVER

(2) Diesel fuel used to clean Lube Drums is sold to Sesroe Petroleum - 1000 gal/month.

4) Does the facility classify any of their CIW's as hazardous waste (HW)? Yes __ (please note which ones are classified as HW) No X (However, parts washer solvent is a HW waste stream.)

5) Does the facility conduct any of the following on-site activities: Treatment/Recycling/Burning/Open Dumping/Landfills/Surface Impoundments? Describe: Oil is recycled (filtered) and sold as chain oil. Used drums are reconditioned.

Field Observations:

6) Are CIW/HW stored on-site? Yes X No __
Describe (material, approximate quantity, storage method): Paint Buffed off of drums (CIW) is stored in a closed 55-gal drum ≅ 20 gal. on-site during inspection.

7) Describe condition of storage containers/tanks (open, damaged, unlabeled, leaking, etc.): Oil has leaked from process tanks around facility. I did not see any leaking drums. over → see Qst #3.

8) Are incompatible wastes stored together (acids, bases, solvents, cyanides)? Yes __ No X Describe:

9) Are there any signs of past spills/releases (dead or stressed vegetation, ground discoloration, stains)? Yes __ No __
Describe For the type of business that it is, the facility is fairly clean. There are used oil spills around facility that are managed with kitty litter. over →

10) Do any of the on-site Chemical and/or CIW/HW management practices concern you? Yes X No __ Describe: The spent solvent from the parts washer is mixed in with the used diesel fuel.

11) Recommendations and/or Additional Observations: The facility was recently (within 2 months) inspected by EPA

See Also ID 991286014. Both companies operate as 1

#3 continued.

③ Oil separated from the wash ~~water~~ water from the drum washing station is filtered and sold back as chain oil.

④ Paint that is buffed off of drums is sent to the landfill as solid waste - ≅ 1 55-gal. drum per wk.

⑤ Parts washer -
Stoddard solvent is mixed in with the diesel fuel when needs to be changed ≅ 6-9 wks.; ≅ 10gal.

⑥ Paint Filters - changed daily - put in a 55-gal drum of H_2O and then put in the dumpster and go to the landfill. w/ 5 gallons of paint waste.

⑦ Paint thinner from cleaning the paint lines goes into the paint - There is no waste paint materials generated & disposed of besides a piece of cardboard under conveyor belt & A 5-gallon bucket catches some paint → landfill Mat. unk.

Question #⑨ There is paint overspray on floor around conveyor belt where drums are reconditioned painted. I did not see an MSDS for the paint.

MCCOLLISTER AND COMPANY
Council Bluffs, Iowa

Photo No.: 1 **Direction:** West **Photographer:** Martha Radke
Date/Time: 06/13/94; 13:00 **Description:** The photograph shows the front of the facility.

Photo No.: 2 **Direction:** West **Photographer:** Martha Radke
Date/Time: 06/13/94; 13:02 **Description:** The photograph shows the large lube oil storage tanks outside the south end of the facility.

MCCOLLISTER AND COMPANY
Council Bluffs, Iowa

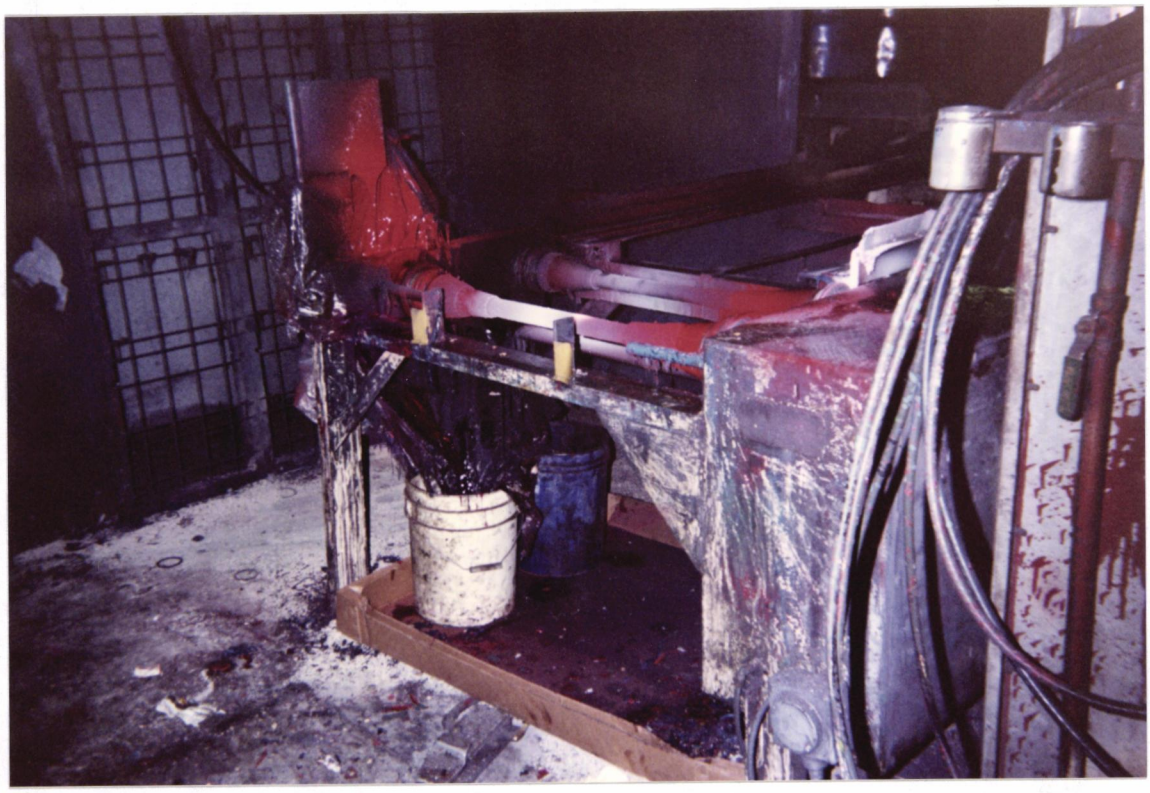

Photo No.: 3 **Direction:** West **Photographer:** Martha Radke
Date/Time: 06/13/94; 13:10 **Description:** The photograph shows the conveyor belt where drums are painted. The cardboard beneath the conveyor is disposed of with the general trash every night.

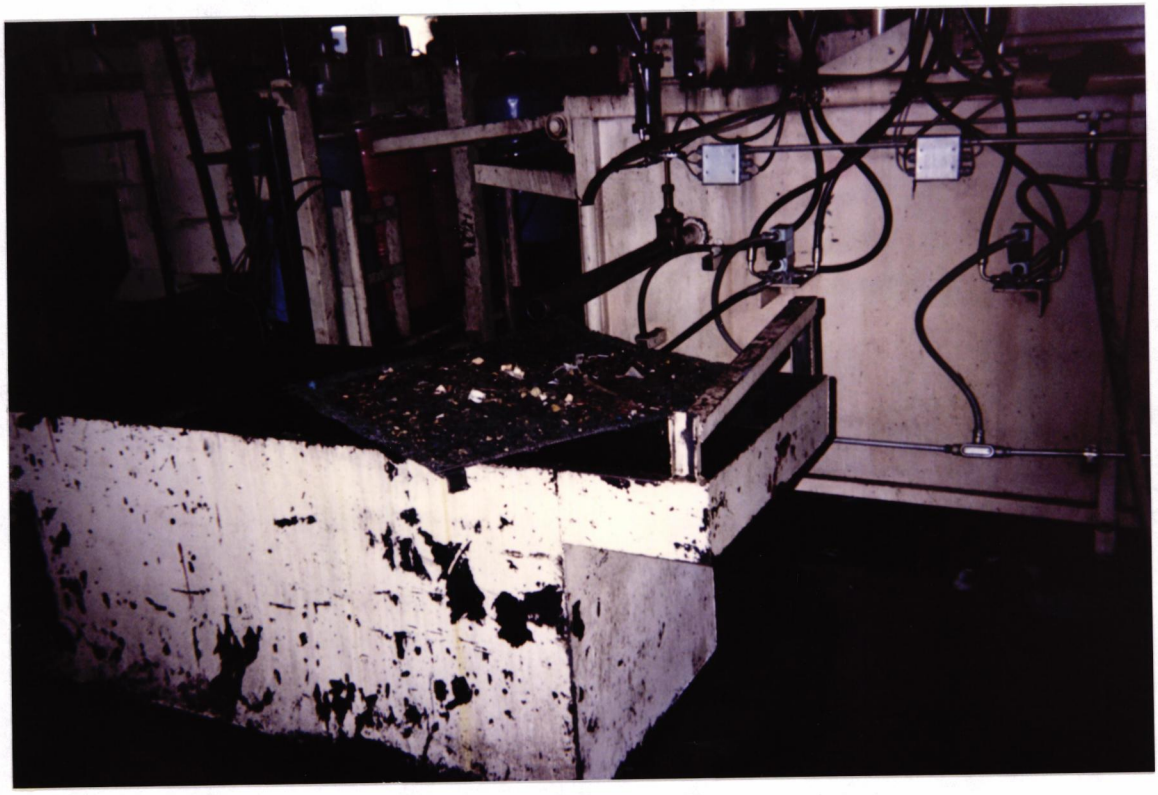

Photo No.: 4 **Direction:** South **Photographer:** Martha Radke
Date/Time: 06/13/94; 13:15 **Description:** The photograph shows the trash that is caught on the wire mesh filter when "empty" drums are drained. This trash is disposed of with the general trash.

MCCOLLISTER AND COMPANY
Council Bluffs, Iowa

Photo No.: 5 **Direction:** West **Photographer:** Martha Radke
Date/Time: 06/13/94; 13:45 **Description:** The photograph shows the paint storage room. The paint lines are connected to the paint lines that are connected to the paint guns.

RCRIS HANDLER INFORMATION

This form completed on 6/13/94 (date) by M. Radke (name of person completing form) PRC EMI (name of person's employer), ~~TES~~ Repa Contractor.

Instructions for completing form: Completion of all items in BOLDFACE is REQUIRED; completion of other items is optional, subject to the availability of the information.

EPA RCRA ID NUMBER: IA IAD049975394

1. NAME OF INSTALLATION MCCOLLISTER AND CO
2200A SOUTH AVE
COUNCIL BLUFFS-IA-51503

2. LOCATION OF INSTALLATION (PHYSICAL ADDRESS, NOT PO BOX OR RURAL ROUTE NUMBER; ADDRESS MUST BE SPECIFIC; IF NECESSARY, INCLUDE DIRECTIONS ON HOW TO FIND THE INSTALLATION)
- EXAMPLES OF UNACCEPTABLE INSTALLATION ADDRESSES ARE: "Box 47," "RR #3," "Curtis Ave," "Hwy 49 West"
- EXAMPLES OF ACCEPTABLE ADDRESSES ARE: "123 Main St," "1 mile west of Hwy 6 on County Road EE," "J 12," "NW corner of Jackson and Jefferson Streets"

STREET ADDRESS: Same
CITY/ZIP CODE: _____, **IA** _____

3. INSTALLATION MAILING ADDRESS (IF SAME AS LOCATION ADDRESS, WRITE "SAME"):
STREET ADDRESS: Same
CITY/ZIP CODE: _____, **IA** _____

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4. INSTALLATION CONTACT PERSON:
Name: Stephen McCollister
Title: President
Telephone Number: Area Code (712) 322-4038
Street Address: Same.
City/Zip Code: _____, IA _____

5. OWNERSHIP INFORMATION:
Name of Installation's Legal Owner: McCollister Co.
Street Address: Same
City/Zip Code: _____, IA _____
Telephone Number: Area Code (712) 322-4038

6. RCRA REGULATED ACTIVITY APPARENTLY BEING CONDUCTED AT SITE (CHECK ALL THAT APPLY)
X Hazardous waste generation __ Hazardous waste transportation
X Conditionally exempt small quantity generator Stoddard solvent from the parts washer.
___ Transports waste for self only
___ Small quantity generator
___ Transports waste for hire
___ Large quantity generator
X Other: (specify) _____

RCRIS data entered
BY _____
ON _____

See Also ID# IAD 991 286 014 for McCollister Container Service.
- Both companies operate as one at 2200 South Ave.

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
CONFIDENTIALITY NOTICE

Facility Name McCollister & Co.	
Facility Address 3200 A South Ave., Cem	
Inspector (print) Title Martha Radke	
U.S.EPA, Region VII, RCRA/IOWA, 726 Minnesota, Kansas City, KS 66101	Date 6/13/94

It is possible that the United States Environmental Protection Agency (EPA) will receive public requests for release of the information obtained during inspection of the facility above. Such requests will be handled by EPA in accordance with provisions of the Freedom of Information Act (FOIA), 5 U.S.C. 552; EPA regulations issued thereunder, 40 CFR Part 2; and the applicable statute under which the information is obtained. EPA is required to make inspection data available in response to FOIA requests, unless the Agency determines that the data contains information entitled to confidential treatment.

Any or all of the information collected by EPA during the inspection may be claimed confidential, if it relates to trade secrets or commercial or financial matters that you consider to be confidential. If you make claims of confidentiality, EPA will disclose the information only to the extent, and by the means of the procedures set forth in the regulations (cited above) governing EPA's treatment of confidential information.

To claim information confidential, you must certify that each claimed item meets <u>all</u> of the following criteria (40 CFR 2.208):

1. Your company has taken measures to protect the confidentiality of the information, and it intends to continue to take such measures.

2. The information is not, and has not been, reasonably obtained without your company's consent by other persons (other than governmental bodies) by use of legitimate means (other than discovery based on showing special need in a judicial or quasi-judicial proceeding).

3. The information is not publicly available elsewhere.

4. Disclosure of the information would cause substantial harm to your company's competitive position.

<u>In addition</u>, within fifteen (15) calendar days of the claim, you must provide written comments in support of the claim, based on factors listed in 40 CFR 2.204(e)(4). This statement should be mailed by registered, return-receipt requested mail to the Inspector at the address listed above. Failure to submit comments by this deadline will be deemed a waiver of the claim pursuant to 40 CFR 2.205(d)(1).

At the completion of the inspection, you will be given a receipt for all materials collected. At that time you may make claims that some or all of the information is confidential and meets the criteria listed above.

U.S.EPA INSPECTION CONFIDENTIALITY NOTICE (cont.)

Facility Name
McCollister & Co.
Facility Address
2200 A South Ave, Council Bluffs, IA.

If you are **not** authorized by your company and there is no one on the premises of the facility who is authorized to make confidentiality claims, this notice will be sent by certified mail, along with the receipt for documents, samples, and other materials, to the authorized representative designated below.

Authorized Representative _____

Title _____

Address _____

_____

If the authorized representative listed above requests confidential treatment, they must return a statement specifying any information which should receive confidential treatment and written comments in support of the claim based on factors listed in 40 CFR 2.204(e)(4).

This statement from the authorized representative should be mailed by registered, return-receipt requested mail within fifteen (15) calendar days of receipt of the Confidentiality Notice to the Inspector at the address listed on page 1.

Failure to submit confidentiality claims and comments within the fifteen (15) day period will be deemed a waiver of the claim pursuant to 40 CFR 2.205(d)(1).

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To be completed by the facility official receiving this Notice:

I have received and read this Notice.

Facility Representative Provided Notice (print)	Title
Stephen J. McCollister	Exe. Vice Pres
Signature/Date	
Stephen McCollister	

(rev:1/20/93)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REQUEST FOR CONFIDENTIAL TREATMENT

Facility Name
McCollister & Co
Facility Address
2200 A South Ave Council Bluffs, IA

Information for which confidential treatment is requested:

None

Acknowledgement of Claimant

The undersigned requests that confidential treatment of the information described be provided in accordance with provisions of the Freedom of Information Act (FOIA), 5 U.S.C. 552; EPA regulations issued thereunder, 40 CFR Part 2; and the applicable statute under which the information is obtained. The undersigned further acknowledges that they are authorized to make such claims for their firm.

The undersigned also certifies that each claimed item described above meets all of the following criteria (40 CFR 2.208):

1. Your company has taken measures to protect the confidentiality of the information, and it intends to continue to take such measures.
2. The information is not, and has not been, reasonably obtained without your company's consent by other persons (other than governmental bodies) by use of legitimate means (other than discovery based on showing of special need in a judicial or quasi-judicial proceeding).
3. The information is not publicly available elsewhere.
4. Disclosure of the information would cause substantial harm to your company's competitive position.

In addition, within 15 days of your claim, you must provide written comments in support of the claim, based on factors listed in 40 CFR 2.204(e)(4). Failure to submit comments by this deadline will be deemed a waiver of the claim pursuant to 40 CFR 2.205(d)(1).

Authorized Representative (print)	Signature/Date
Stephen J. McCollister	SJ McCollister 6/13/94
No confidential treatment claimed during the inspection: ___ (Facility Representative's initials)	
Inspector (print)	Signature/Date
Martha Radke	Martha Radke 6/13/94
U.S.EPA, Region VII, RCRA/IOWA, 726 Minnesota, Kansas City, KS 66101	

(rev:1/20/93)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
RECEIPT FOR DOCUMENTS AND SAMPLES

Facility Name
McCollister & Co.

Facility Address
2200 South Ave., Council Bluffs, IA

Documents Collected? YES___ (list below) NO X

Samples Collected? YES___ (list below) NO X Split Samples: YES___ NO___

Documents/Samples were: 1)Received no charge___ 2)Borrowed___ 3)Purchased___

Amount Paid: $_____ Method: Cash___ Voucher___ To Be Billed___

The documents and samples described below were collected in connection with the administration and enforcement of the applicable statute under which the information is obtained.

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Receipt for the document(s) and/or sample(s) described below is hereby acknowledged:

NONE

no tw sent off site in 1993.

Facility Representative (print)	Signature/Date
Stephen J. McCollister	
Inspector (print)	**Signature/Date**
Martha Radke	Martha Radke 6/13/94

U.S.EPA, Region VII, RCRA/IOWA, 726 Minnesota, Kansas City, KS 66101

(rev:1/20/93)

Phone: (913) 551-7935
Fax: (913) 551-7521

ROBERT C. ANSLYN
Assisting the Environmental Protection Agency
under a Cooperative Agreement with the
American Association of Retired Persons

Senior Environmental Employment (SEE) Program
EPA • Region VII • WSTM • RCRA • IOWA
726 Minnesota Ave • Kansas City, KS 66101

Conducted an inspection at McCollister Co. several weeks before PRC's flood inspection. (According to Virginia Stephen McCollister.)