ON SITE

OH-167-05

EPA

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT

REGION	SITE NUMBER (to be assigned by Hq)
V	

GENERAL INSTRUCTIONS: Complete Sections I and III through XV of this form as completely as possible. Then use the information on this form to develop a Tentative Disposition *(Section II)*. File this form in its entirety in the regional Hazardous Waste Log File. Be sure to include all appropriate Supplemental Reports in the file. Submit a copy of the forms to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force *(EN-335)*; 401 M St., SW; Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME	B. STREET (or other identifier)		
Sherwin Williams Co.	601 Canal Rd.		
C. CITY	**D. STATE**	**E. ZIP CODE**	**F. COUNTY NAME**
Cleveland	OH	44113	Cuyahoga

G. SITE OPERATOR INFORMATION

1. NAME	2. TELEPHONE NUMBER		
Sherwin Williams Co.			
3. STREET	**4. CITY**	**5. STATE**	**6. ZIP CODE**
601 Canal Rd.	Cleveland	OH	44113

H. REALTY OWNER INFORMATION *(if different from operator of site)*

1. NAME	2. TELEPHONE NUMBER	
Sherwin Williams Co.		
3. CITY	**4. STATE**	**5. ZIP CODE**
Cleveland	OH	44113

I. SITE DESCRIPTION

Waste Solvent storage area on west side of plant

J. TYPE OF OWNERSHIP

☐ 1. FEDERAL ☐ 2. STATE ☐ 3. COUNTY ☐ 4. MUNICIPAL ☒ 5. PRIVATE

US EPA RECORDS CENTER REGION 5

558997

II. TENTATIVE DISPOSITION *(complete this section last)*

A. ESTIMATE DATE OF TENTATIVE DISPOSITION *(mo., day, & yr.)*: 10-1-80

B. APPARENT SERIOUSNESS OF PROBLEM

☐ 1. HIGH ☐ 2. MEDIUM ☒ 3. LOW ☐ 4. NONE

C. PREPARER INFORMATION

1. NAME	2. TELEPHONE NUMBER	3. DATE *(mo., day, & yr.)*
Mark Hutson	(312) 663-9415	10-1-80

III. INSPECTION INFORMATION

A. PRINCIPAL INSPECTOR INFORMATION

1. NAME	2. TITLE	
Mark Hutson	Hydrogeologist	
3. ORGANIZATION		**4. TELEPHONE NO. *(area code & no.)***
Ecology & Environment, Inc.		(312) 663-9415

B. INSPECTION PARTICIPANTS

1. NAME	2. ORGANIZATION	3. TELEPHONE NO.
Max Michael	Ecology & Environment, Inc.	(312) 663-9415

C. SITE REPRESENTATIVES INTERVIEWED *(corporate officials, workers, residents)*

1. NAME	2. TITLE & TELEPHONE NO.	3. ADDRESS
Ed Cassidy	Materials Manager	601 Canal Rd. Cleveland, OH. 44113

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IV. SAMPLING INFORMATION (continued)

C. PHOTOS

1. TYPE OF PHOTOS None

☐ a. GROUND ☐ b. AERIAL

2. PHOTOS IN CUSTODY OF:

D. SITE MAPPED?

☒ YES. SPECIFY LOCATION OF MAPS: Sketch map attached

E. COORDINATES

1. LATITUDE (deg.-min.-sec.)

2. LONGITUDE (deg.-min.-sec.)

V. SITE INFORMATION

A. SITE STATUS

☒ 1. ACTIVE (Those inductrial 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)

1

D. ARE THERE BUILDINGS ON THE SITE?

☐ 1. NO ☒ 2. YES (specify): plant buildings

VI. 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. SUPPLEMENTAL REPORTS: If the site falls within any of the categories listed below, Supplemental Reports must be completed. Indicate which Supplemental Reports you have filled out and attached to this for..

☐ 1. STORAGE ☐ 2. INCINERATION ☐ 3. LANDFILL ☐ 4. SURFACE IMPOUNDMENT ☐ 5. DEEP WELL

☐ 6. CHEM/BIO/PHYS TREATMENT ☐ 7. LANDFARM ☐ 8. OPEN DUMP ☐ 9. TRANSPORTER ☐ 10. RECYCLOR/RECLAIMER

VII. WASTE RELATED INFORMATION

A. WASTE TYPE

☒ 1. LIQUID ☐ 2. SOLID ☐ 3. SLUDGE ☐ 4. GAS

B. WASTE CHARACTERISTICS

☐ 1. CORROSIVE ☐ 2. IGNITABLE ☐ 3. RADIOACTIVE ☒ 4. HIGHLY VOLATILE

☒ 5. TOXIC ☐ 6. REACTIVE ☐ 7. INERT ☐ 8. FLAMMABLE

☐ 9. OTHER (specify):

C. WASTE CATEGORIES

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

Sherwin Williams records

Continue On Reverse

Continued From Page 4

VIII. HAZARD DESCRIPTION *(continued)*

☐ B. NON-WORKER INJURY/EXPOSURE

none

☐ C. WORKER INJURY/EXPOSURE

none

☐ D. CONTAMINATION OF WATER SUPPLY

none

☐ E. CONTAMINATION OF FOOD CHAIN

none

☐ F. CONTAMINATION OF GROUND WATER

none

☐ G. CONTAMINATION OF SURFACE WATER

none

 Continue On Reverse

Continued From Page 6

VIII. HAZARD DESCRIPTION *(continued)*

☐ N. FIRE OR EXPLOSION

none

☐ O. SPILLS/LEAKING CONTAINERS/RUNOFF/STANDING LIQUID

none

☐ P. SEWER, STORM DRAIN PROBLEMS

none

☐ Q. EROSION PROBLEMS

none

☐ R. INADEQUATE SECURITY

none

☐ S. INCOMPATIBLE WASTES

none

 Continue On Reverse

Continued From Page 8

X. WATER AND HYDROLOGICAL DATA *(continued)*

H. LIST ALL DRINKING WATER WELLS WITHIN A 1/4 MILE RADIUS OF SITE

1. WELL	2. DEPTH *(specify unit)*	3. LOCATION *(proximity to population/buildings)*	4. NON-COMMUNITY *(mark 'X')*	5. COMMUNITY *(mark 'X')*
		none		

I. RECEIVING WATER

1. NAME

☒ 2. SEWERS ☐ 3. STREAMS/RIVERS

☐ 4. LAKES/RESERVOIRS ☐ 5. OTHER *(specify)*:

6. SPECIFY USE AND CLASSIFICATION OF RECEIVING WATERS

Cleveland city sewer system

XI. SOIL AND VEGITATION DATA

LOCATION OF SITE IS IN:

☐ A. KNOWN FAULT ZONE ☐ B. KARST ZONE ☐ C. 100 YEAR FLOOD PLAIN ☐ D. WETLAND

☐ E. A REGULATED FLOODWAY ☐ F. CRITICAL HABITAT ☐ G. RECHARGE ZONE OR SOLE SOURCE AQUIFER

XII. TYPE OF GEOLOGICAL MATERIAL OBSERVED

Mark 'X' to indicate the type(s) of geological material observed and specify where necessary, the component parts.

'X'	A. OVERBURDEN	'X'	B. BEDROCK *(specify below)*	'X'	C. OTHER *(specify below)*
	1. SAND				
X	2. CLAY				
	3. GRAVEL				

XIII. SOIL PERMEABILITY

☒ A. UNKNOWN ☐ B. VERY HIGH *(100,000 to 1000 cm/sec.)* ☐ C. HIGH *(1000 to 10 cm/sec.)*

☐ D. MODERATE *(10 to .1 cm/sec.)* ☐ E. LOW *(.1 to .001 cm/sec.)* ☐ F. VERY LOW *(.001 to .00001 cm/sec.)*

G. RECHARGE AREA

☐ 1. YES ☒ 2. NO 3. COMMENTS:

H. DISCHARGE AREA

☒ 1. YES ☐ 2. NO 3. COMMENTS:

I. SLOPE

1. ESTIMATE % OF SLOPE

≈ 20%

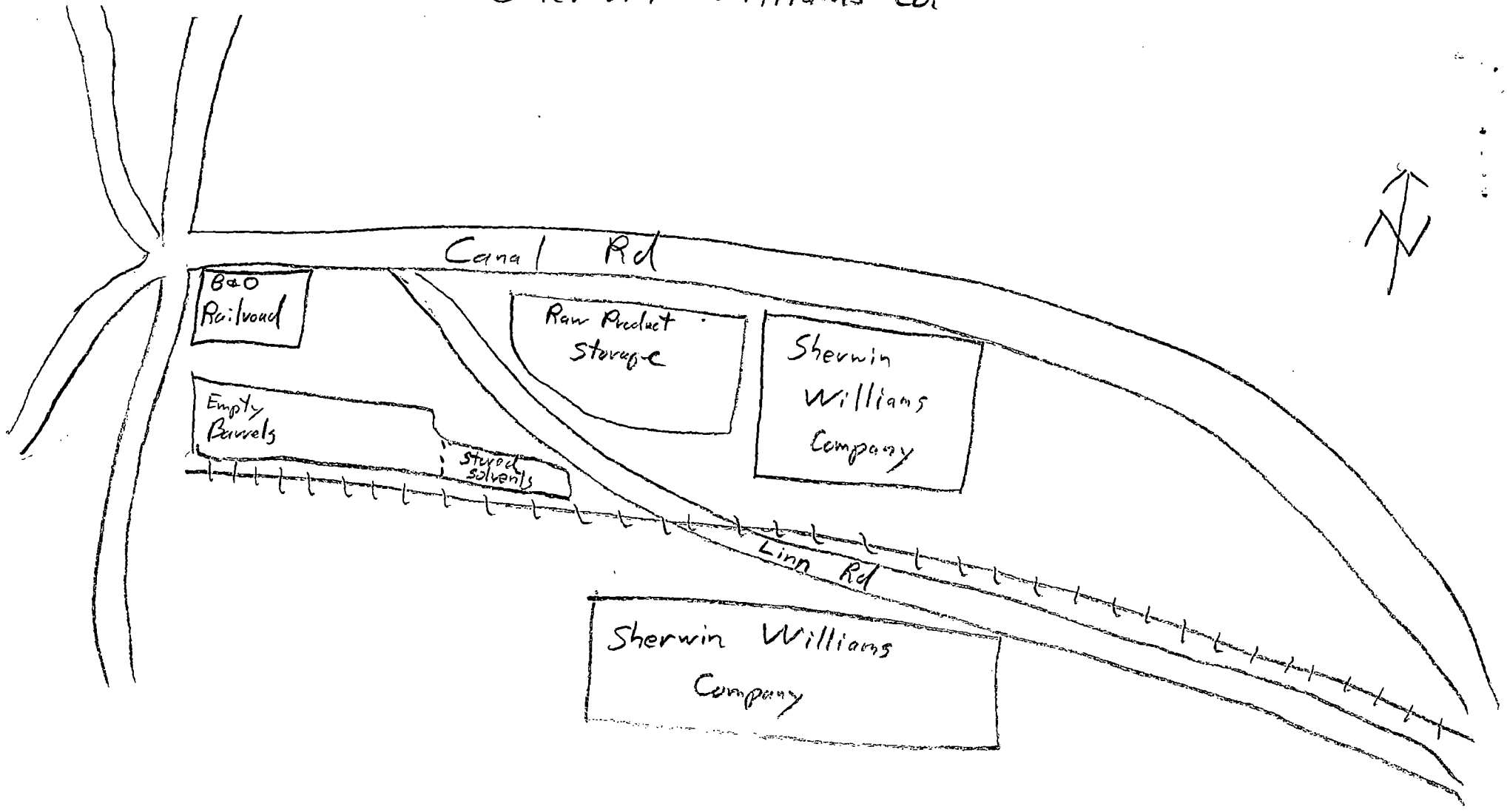
2. SPECIFY DIRECTION OF SLOPE, CONDITION OF SLOPE, ETC.

Plant is located off slope, barrels are stored on flat area.

J. OTHER GEOLOGICAL DATA

Continue On Reverse

Sherwin Williams Co

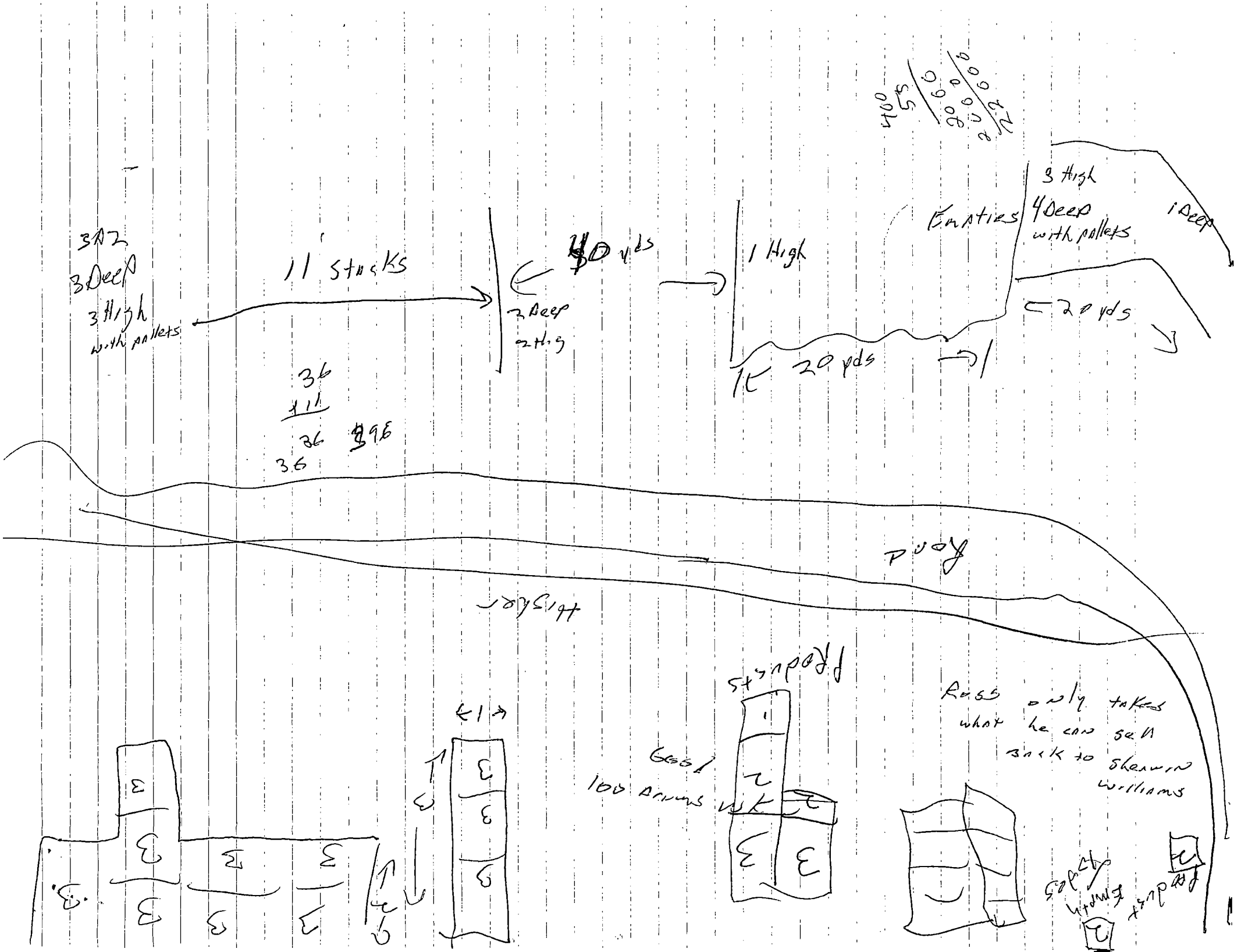


Ed Cassidy
Materials Manager

Sherwin Williams
3100

Euclid - Reusable
Ross - non Reusable

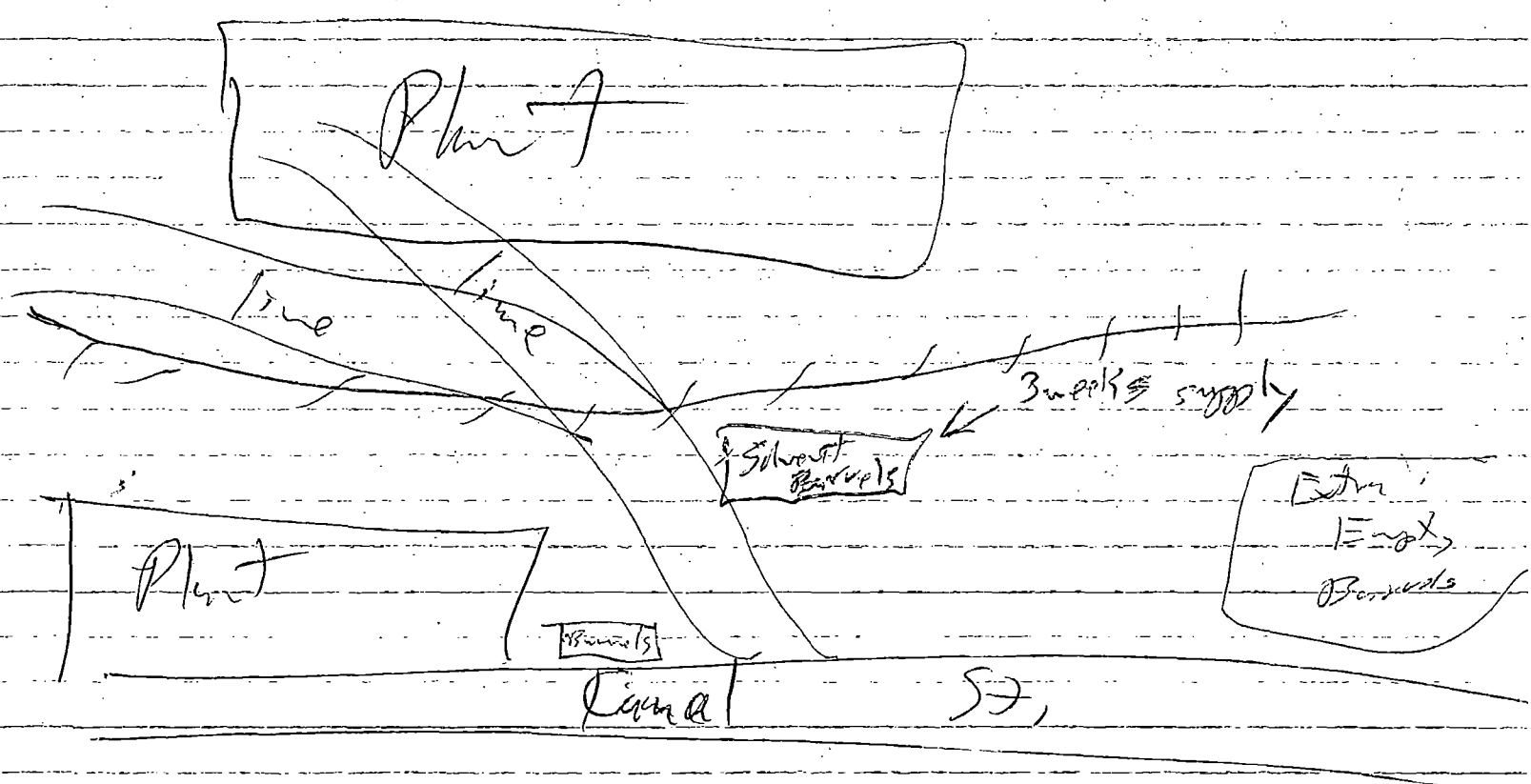
3 A2 Reusable
Slop - Ross


3A2
3Deep
3High
with pallets
11 stacks
30 yds
3Deep
2High
1High
Empties
3 High
4Deep
with pallets
1Deep
20 yds
20 yds
36
+11
36
$96
36
Floor
this size
Rags only takes
what he can sell
back to Sherwin
Williams
Good
100 Drums
Products

Sherwin - Williams — Rich Stratten - Personnel Manager

Ed Cassidy — Materials Manager

W.S.

Reclaimable Solvents — reaching ≈ 1 tank truck load/week

Slop — picked up by Ross disposal under Permit