HAZARDOUS WASTE INSPECTION REPORT
Generators - Part A

Cy
8-9-84

HS

Date of inspection 06-27-84 Time start 1:30 PM Time finish 2:45 PM

Name of inspector ARTHUR L. DALLA PIAZZA, GREG HARDER

Company, installation name HAMILTON TECHNOLOGY INC.

Location 161 NORTH QUEEN STREET

County LANCASTER Municipality CITY OF LANCASTER

Identification number PAD 000000680

Name of responsible official KENNETH R. BERNHARDT

Title PRESIDENT

Mailing address P.O. BOX 4787 LANCASTER, PA 17604

Area code and phone no. 717-299-2581

Name of person interviewed ROBIN E. THOMAS

Title MGR. CHEMISTRY LAB

Mailing address (if different from above) —

Area code and phone no. —

1. Current waste handling method:

   a. ☒ On-site ☒ treatment, ☒ storage, ☐ disposal

   b. ☒ On-site ☐ use, ☐ reuse, ☐ recycle, ☒ reclaim

   c. ☒ Off-site ☒ treatment, ☐ storage, ☒ disposal

   d. ☒ Off-site ☐ use, ☐ reuse, ☐ recycle, ☒ reclaim

2. Amount of hazardous waste produced:

   a. _____ kg./mo.

   b. _____ kg./yr.

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3. Types of hazardous waste produced by Hazardous Waste Number:
D001, F001, F003, F005 FLAMMABLE, SOLVENTS + DISTILATES
F007/9, D003, D006/7 TREATED ON-SITE → F006 SLUDGE

4. Are hazardous wastes transported off-site by the generator? ☐ Yes ☒ No
BERKLEY PRODUCTS PAD 003003894
WASTE CONVERSION PAD 085690592

HAZARDOUS WASTE IN[illegible]CTION REPORT
Generators - Part B

1-NON-COMPLIANCE, 2-COMPLIANCE, 3-NOT APPLICABLE, 4-NOT DETERMINED

COMPLIANCE STATUS 2	3	4	REQUIREMENT PAD 000800680 06-27-84	CHAPTER CITATION 75.262
X			Identification number	(c)(1)
X			Hazardous waste shipments offered only to licensed transporters	(c)(4)
X			Authorization received from TSD facility for wastes shipped off-site	(d)
X			PA manifest used for intrastate shipments	(e)(1)(i
	X		Disposer state manifest or EPA format manifest used for out-of-state shipments	(e)(1)(ii
X			Manifests filled out properly and completely	(e)(1)
X			Manifests routed properly and within time limits (24 hours)	(e)(2)
X			Proper U.S. DOT shipping containers or packages	(f)(1)(i
X			Shipping containers marked and labeled according to U.S. DOT	(f)(1)(ii
X			Containers of 110 gal. or less marked with required PA label	(f)(1)(ii
X			Placards offered to transporter	(f)(2)
X			Wastes accumulated on-site for less than 90 days	(g)(1)
X			Wastes stored in proper containers and properly marked and labeled	(g)(1)(i
			Containers managed in accordance with 75.265 (g) (1 THRU 9)	(g)(1)(i
X			Containers clearly marked with accumulation date and visible for inspection	(g)(1)(i
X			Records retained at designated location for 20 years	(h)
X			Quarterly reports submitted to the Department	(i)
X			Exception reporting procedures followed	(j)
	X		Hazardous waste disposal plan, if required	(l)
X			Spill reporting procedures followed	(m)(1)
X			Preparedness, Prevention and Contingency Plan approved and implemented	(m)(5)
	X		Special requirements followed for international shipments	(o)

AUG 2 1984
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HAZARDOUS WASTE INSPECTION REPORT
TSD Facilities - Part A

Date of inspection 06-27-84 Time start 1:30 AM Time finish 2:15 PM

Name of inspector ARTHUR L. DALLA PIAZZA, GREG HARDER

Company, installation name HAMILTON TECHNOLOGY INC.

Location 101 NORTH QUEEN STREET

County LANCASTER Municipality CITY OF LANCASTER

Identification number PAD 000800680

Name of responsible official KENNETH R. BERNHARDT

Title PRESIDENT

Mailing address P.O. BOX 41787 LANCASTER PA 17604

Area code and phone no. 717-299-2581

Name of person interviewed ROBIN E. THOMAS

Title MGR CHEMISTRY LAB

Mailing address (if different from above) —

Area code and phone no. —

1. Site characterization:
   a. [X] Treatment (PERMIT-BY-RULE) - [ ] surface impoundments, [X] chemical, [X] physical, [ ] biological
   b. [X] Storage - [X] containers, [ ] tanks, [ ] surface impoundments, [ ] waste piles
   c. [ ] Disposal - [ ] land treatment, [ ] landfill, [ ] incineration, [ ] thermal treatment
   d. [ ] Use, [ ] reuse, [ ] recycle, [ ] reclaim
2. Does the facility generate hazardous wastes? [X] Yes [ ] No
3. Types of hazardous waste produced by Hazardous Waste Number:
   SEE GENERATOR REPORT

AUG 2 1984

4. Are hazardous wastes transported off-site by the facility? [ ] Yes [X] No
   SEWER DISCHARGE AFTER PRETREATMENT - CITY OF LANCASTER

HAZARDOUS WASTE INSPECTION REPORT
Part C - Comments

ıte of inspection 06-27-84 Identification number PAD000800680

ımpany, Installation name HAMILTON TECHNOLOGY

ıunty LANCASTER Municipality CITY OF LANCASTER

CHAPTER 75.265 (REQ)(6) OF THE REGULATIONS REQUIRE A 50 FOOT SET BACK FROM PROPERTY BOUNDRIES OF THE FACILITY. THIS FACILITY HAS ACQUIRED ADJACENT PROPERTY SINCE PREPARATION OF ORIGINAL PERMIT, PART B APPLICATION. THIS SHOULD BE ~~FURTHER~~ PROVIDED IN RESPONSE TO THE DEPARTMENT'S LETTER OF MAY 4, 1984.

AUG 2 1984

ıis inspection report is official notification that a representative of the Department of ıvironmental Resources, Bureau of Solid Waste Management, inspected the above installation. e findings of this inspection are shown in this report. Any violations which were uncovered ıring the inspection are indicated. Violations may also be discovered upon examination of ıe results of laboratory analyses and review of Department records. Notification will be ɔrthcoming, confirming any violations indicated herein and listing any additional violations.

ɜrson Interviewed (signature) Robin Thomas Date 6-27-84

ıspector (signature) Arthur L. Dolla Rizzo Date 06-27-84

Monitoring And Enforcement Log

1. EPA ID: PAD010010818
2. FACILITY NAME: HAMILTON TECHNOLOGY INC.
3. ADDRESS: 101 NORTH QUEEN STREET LANCASTER PA 17604

4. FACILITY TYPE:
- [x] MAJOR
- [ ] NON-MAJOR

5. TYPE OF REPORT: [x] NEW [ ] UPDATE

6. DATES OF INITIAL EVALUATION WHICH IS THE BASIS FOR THIS REPORT: START 12/14/83 (M D Y)

7. TYPE OF EVALUATION COVERED BY THIS REPORT:
- [x] EVALUATION INSPECTION
- [ ] SAMPLING INSPECTION
- [ ] RECORD REVIEW
- [ ] SPECIAL INSPECTION

Responsible Agency: S

8. DATE OF EVALUATION COVERED BY THIS REPORT (enter only if different from 5): START __/__/__ (M D Y)

9. TYPE AND CLASS OF VIOLATION (enter number of violations by type and class):

Class of Violation	Area of Violation					
	GWM	CI/PC	Fin. Res.	Pt. B	Comp. Sched.	Other
I						0
II						
III						

10. ENFORCEMENT ACTIONS for Class I Violations:

Area of Violation	Type of Action Taken (circle one)	Date Action Taken (mdy)	Projected Compliance Date (mdy)	Actual Compliance Date (mdy)	Penalty ($000) Assessed	Penalty ($000) Collected
	Informal WL/NOV AO CivAc CrimAc	__/__/__	__/__/__	__/__/__		
	Informal WL/NOV AO CivAc CrimAc	__/__/__	__/__/__	__/__/__		
	Informal WL/NOV AO CivAc CrimAc	__/__/__	__/__/__	__/__/__		
	Informal WL/NOV AO CivAc CrimAc	__/__/__	__/__/__	__/__/__		

11. COMMENTS: ROUTINE COMPLIANCE INSPECTION - Compliance

JAN 2 0 1984
DIV. OF HAZARDOUS WASTE