JUL 22 1991

JUL 3 1991

HAZARDOUS WASTE DATA MANAGEMENT SYSTEM
MAINTENANCE FORM FOR NOTIFICATION

EPA-ID # :DE:DD:1:1:0:2:9:7:8:2: DATE: JUL 3 1991

FACILITY NAME Brandywine Construction Company Inc.

New Facility Name

Contact Person/Position

Quillen James President ( ) -
(Last, First, M) Title Tel No.

MAILING Street
ADDRESS City State Zip

LOCATION Street
ADDRESS City State Zip

County Name County Code

Owner Name Operator Name

302 571-9773

Brandywine Construction Co. Inc.
101 Pigeon Point Rd
New Castle, DE 19720

Activity code
___Gen ___Tr ___Tsd
___ 5. Market or Burn
___ A. Gen Mark to Burn
___ B. Other Marketer
___ C. Burner

Used Oil Fuel Activities
___ 6. Off-Spec Use Oil Fuel
___ A. Gen Mark to Burn
___ B. Other Marketer
___ C. Burner
___ 7. Spec Used Oil Fuel Mark

Waste Fuel Burn : Type of Coabustice Device
___ Utility Boiler ___Ind. Boiler ___Ind. Furnace

Mode of Transportation (Transporters Only)
___ Air ___Rail ___Highway ___Water ___Other

Maintanance Ser
W1 Card

F2 Card

Non-Reg Ind____(e303)

Existing Waste Code		New Waste Code	

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)

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

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

C. Installation's EPA ID Number: DED011029782

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

BRANDYWINE CONSTRUCTION CO, INC

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

Street: 101 PIGEON POINT ROAD

Street (continued):

City or Town: NEW CASTLE | State: DE | ZIP Code: 19720-

County Code: | County Name: NEW CASTLE

JUN 11 1991 HAZARDOUS WASTE MANAGEMENT BRANCH

IV. Installation Mailing Address *(See Instructions)*

Street or P.O. Box: 101 PIGEON POINT ROAD

City or Town: NEW CASTLE | State: DE | ZIP Code: 19720-

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

Name *(last)*: QUILLEN | *(first)*: JAMES

Job Title: PRESIDENT | Phone Number *(area code and number)*: 302-571-9773

VI. Installation Contact Address *(See Instructions)*

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

B. Street or P.O. Box: SAME

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

VII. Ownership *(See Instructions)*

A. Name of Installation's Legal Owner: BRANDYWINE CONSTRUCTION CO, INC

Street, P.O. Box, or Route Number: 101 PIGEON POINT ROAD

City or Town: NEW CASTLE | State: DE | ZIP Code: 19720-

Phone Number *(area code and number)*: 302-571-9773

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 (01-90) Previous edition is obsolete.

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.)
   - [ ] c. Less than 100 kg/mo (220 lbs.)
2. Transporter (Indicate Mode in boxes 1-5 below)
   - [ ] a. For own waste only
   - [X] 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. Burner - indicate device(s) - Type of Combustion Device
     - [ ] 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 (for 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. EP Toxic *(D000)*	(List specific EPA hazardous waste number(s) for the EP Toxic contaminant(s))
[ ]	[ ]	[ ]	[ ]	

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
7	**8**	**9**	**10**	**11**	**12**

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

1	2	3	4	5	6

X. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment.

Signature	Name and Official Title *(type or print)*	Date Signed
	R. James Quillen, Jr., President	6-5-91

XI. Comments

We currently do not transport a hazardous waste, nor do we plan at this time to transport hazardous waste. However, we do wish to keep active our EPA ID number in case we are asked to haul hazardous waste in the future.

RECEIVED
GENERAL STATE SECTION
JUL 1 1991
EPA, R3

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

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

Form Approved OMB No. 158-S79016
GSA No. 0246-EPA-OT

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY

NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

INSTALLATION'S EPA I.D. NO.	
I. NAME OF INSTALLATION	Brandywine Construction Co., Inc.
II. INSTALLATION MAILING ADDRESS	101 Pigeon Point Road PLEASE PLACE LABEL IN THIS SPACE New Castle, Delaware 19720
III. LOCATION OF INSTALLATION	Same

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law *(Section 3010 of the Resource Conservation and Recovery Act).*

DETACH

FOR OFFICIAL USE ONLY

COMMENTS: C

RECEIVED
RCRA SECTION
EPA REGION III
AUG 18 80 000159

INSTALLATION'S EPA I.D. NUMBER	APPROVED	DATE RECEIVED (yr., mo., & day)
F DED011029782 21		800818

I. NAME OF INSTALLATION

BRANDYWINE CONSTRUCTION COMPANY INC

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX: 3 101 PIGEON POINT RD.

CITY OR TOWN	ST.	ZIP CODE
4 NEW CASTLE	DE	19720

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER: 5 ~~SAME~~ 101 PIGEON POINT Rd

CITY OR TOWN	ST.	ZIP CODE
6 NEW CASTLE	DE	19720

IV. INSTALLATION CONTACT

NAME AND TITLE *(last, first, & job title)*	PHONE NO. *(area code & no.)*
2 EIBAND RODERICK W PRESIDENT	302-571-9773

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER: 8 ~~ATTACHED SHEET~~ APPLEBY RICHARD M

DETACH

B. TYPE OF OWNERSHIP *(enter the appropriate letter into box)*

F = FEDERAL
M = NON-FEDERAL

M

VI. TYPE OF HAZARDOUS WASTE ACTIVITY *(enter "X" in the appropriate box(es))*

- [ ] A. GENERATION
- [x] B. TRANSPORTATION *(complete item VII)*
- [ ] C. TREAT/STORE/DISPOSE
- [ ] D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION *(transporters only – enter "X" in the appropriate box(es))*

- [ ] A. AIR
- [ ] B. RAIL
- [x] C. HIGHWAY
- [ ] D. WATER
- [ ] E. OTHER *(specify)*:

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below.

- [x] A. FIRST NOTIFICATION
- [ ] B. SUBSEQUENT NOTIFICATION *(complete item C)*

C. INSTALLATION'S EPA I.D. NO.

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

I.D. – FOR OFFICIAL USE ONLY															
S													T/A		C
W	D	E	P	0	1	1	0	2	9	7	8	2	2		1
1	2											13	14		15

IX. DESCRIPTION OF HAZARDOUS WASTES *(continued from front)*

A. HAZARDOUS WASTES FROM NON–SPECIFIC SOURCES. Enter the four–digit number from 40 CFR Part 261.31 for each listed hazardous waste from non–specific sources your installation handles. Use additional sheets if necessary.

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

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four–digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four–digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

D. LISTED INFECTIOUS WASTES. Enter the four–digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54

E. CHARACTERISTICS OF NON–LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non–listed hazardous wastes your installation handles. *(See 40 CFR Parts 261.21 – 261.24.)*

☐ 1. IGNITABLE (D001) ☒ 2. CORROSIVE (D002) ☐ 3. REACTIVE (D003) ☐ 4. TOXIC (D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE	NAME & OFFICIAL TITLE *(type or print)*	DATE SIGNED
Roderick W. Eiband	Roderick W. Eiband, President	Aug. 14, 1980

Hazardous Waste Compliance Monitoring and Enforcement Log

1. EPA ID: DED 010 11 012 917 8121
2. HANDLER NAME: Brandywine Construction Co.
3. ADDRESS: 101 Pigeon Point Rd. New Castle DE 19720

4. HANDLER TYPE: Transporter
   - [ ] MAJOR
   - [x] NON-MAJOR

5. DATE OF INITIAL EVALUATION WHICH IS THE BASIS FOR THIS REPORT: 10/18/83 (M D Y)

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

7. DATE OF EVALUATION COVERED BY THIS REPORT (enter only if different from 5): 10/18/83 (M D Y) 5

8. AREA AND CLASS OF VIOLATION (enter number of violations by area and class):

Class of Violation	Area of Violation: GMI	CI/PC	Fin. Res.	PL. B	Comp. Sched.	Other
I						0
II						
III						

9. ENFORCEMENT ACTIONS FOR CLASS I VIOLATIONS:

Area of Violation	Type of Action Taken (circle one)	Date Action Taken (mdy)	Compliance Dates (mdy) Scheduled	Compliance Dates (mdy) Actual	Penalty Assessed	Penalty 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	/	/			
	Informal WL/NOV AO CivAc CrimAc	/ /	/ /	/		
	Informal WL/NOV AO CivAc CrimAc	/ /	/ /	/ /		
	Informal WL/NOV AO CivAc CrimAc	/ /	/ /	/ /		

5

10. COMMENTS:

EPA

ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY
(VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act *(RCRA)*. Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER → DED011029782

BRANDYWINE CONSTRUCTION COMPANY INC
101 PIGEON POINT RD
NEW CASTLE DE 19720

INSTALLATION ADDRESS →

101 PIGEON POINT RD
NEW CASTLE DE 19720

EPA Form 8700-12B (4-80)

11/14/80

BRANDYWINE CONSTRUCTION CO., INC.

General Contractors

101 PIGEON POINT ROAD
NEW CASTLE, DELAWARE 19720
TELEPHONE: (302) 571-9773

COFFERDAMS - DOCKS - PILES - WHARVES
CONCRETE FOUNDATIONS - TRENCHING
PAVING - EXCAVATION - SITE WORK

RODER
P

WATER & GAS LIN
TELEPHONE CABLE AND
STORM DRAINAGE - SE

August 14, 1980

EPA FORM 8700 - 12

PART V. - OWNERSHIP

Corporation owned by -

Richard M. Appleby, Jr.
Robert S. Appleby
Roderick W. Eiband

Roderick W. Eiband

Roderick W. Eiband, President

NOT ON M LIST

Hazardous Waste Compliance Monitoring and Enforcement Log

Transporter

1. EPA ID: DED 011 1 012 917 8121
2. HANDLER NAME: Brandywine Construction Co.
3. ADDRESS: 101 Pigeon Point Rd. New Castle DE 19720

4. HANDLER TYPE:
   - ☐ MAJOR
   - ☑ NON-MAJOR

5. DATE OF INITIAL EVALUATION WHICH IS THE BASIS FOR THIS REPORT: 10/18/83 (M D Y)

6. TYPE OF EVALUATION COVERED BY THIS REPORT:
   - ☒ EVALUATION INSPECTION
   - ☐ SAMPLING INSPECTION
   - ☐ RECORD REVIEW
   - ☐ SPECIAL INSPECTION
   - ☐ FOLLOW-UP

7. DATE OF EVALUATION COVERED BY THIS REPORT (enter only if different from 5): 10/18/83 (M D Y)

8. AREA AND CLASS OF VIOLATION (enter number of violations by area and class):

Class of Violation	Area of Violation: GM1	CI/PC	Fin. Res.	Pt. B	Comp. Sched.	Other
I						
II						
III						

9. ENFORCEMENT ACTIONS FOR CLASS I VIOLATIONS:

Area of Violation	Type of Action Taken (circle one)	Date Action Taken (mdy)	Compliance Dates (mdy) Scheduled	Compliance Dates (mdy) Actual	Penalty Assessed	Penalty 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	/	/ /			
	Informal WL/NOV AO CivAc CrimAc	/ /	/ /	/		
	Informal WL/NOV AO CivAc CrimAc	/ /	/ /	/ /		
	Informal WL/NOV AO CivAc CrimAc	/ /	/ /	/ /		

10. COMMENTS:

11/7/83

EPA

ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY
(VERIFICATION)

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EPA I.D. NUMBER ➤ DED011029782

BRANDYWINE CONSTRUCTION COMPANY INC
101 PIGEON POINT RD
NEW CASTLE DE 19720

INSTALLATION ADDRESS ➤

DE

EPA Form 8700-12B (4-80)

10/07/80

Brandwine construction co.

EPA

ENVIRONMENTA
HAZARDOUS WASTE DA
FACILITY INVENTO

CARD CODE	FACILITY IDENTIFICATION NUMBER	TRANS CODE	CARD NO.	NOTIFICATION APPROVAL	DATE NOTIFIED	PERMIT APPLICATION APPROVAL	DATE PART A PERMIT REC'D	FACILITY NAME
F	DEDO110297823	3	1	A				
1	2–13	14	15	16	17–22	23	24–29	30

CARD CODE	DUP		CARD NO.	FACILITY CONTACT NAME/POSITION
F	DUP		2	
1	2–13	14	15	16–45

CARD CODE	DUP		CARD NO.	MAILING ADDRESS
F	DUP		3	
1	2–13	14	15	16–45

CARD CODE	DUP		CARD NO.	MAILING CITY	STATE
F	DUP		4		
1	2–13	14	15	16–40	41–43

CARD CODE	DUP		CARD NO.	FACILITY ADDRESS
F	DUP		5	
1	2–13	14	15	16–45

CARD CODE	DUP		CARD NO.	FACILITY CITY	STATE
F	DUP		6		
1	2–13	14	15	16–40	41–43

☆U.S. Government Printing Office: 1980—625-782