089-10823 5/6/2016

Please print or type in the unshaded areas only

ADEM Form 8700-12 M3 5/2014

Please refer to the *ADEM Form 8700-12 Notification Form instructions* before completing this form. Information requested here is required by law (§ 3010 of the *Resource Conservation and Recovery Act*).

ADEM SNB

Notification of Regulated Waste Activity M13

Alabama Department of Environmental Management

(ref ADEM Use Only) Received APR 12 2016 Land Division

I. Notification Class *(Check appropriate box and enter ID number, if known.)*

☐ Initial Notification ☑ Annual Notification

Facility's EPA ID Number: ALD983166257

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

SANMINA CORPORATION

Operating Name of Facility *(Continued)*

III. Change of Facility Name?

☑ No Yes ☐ *(If Yes, enter previous name of Facility below.)*

IV. Location of Facility *(Physical address not P. O. Box or Route Number)*

Street: 13000 S. MEMORIAL PARKWAY

City or Town: HUNTSVILLE State: AL Zip Code: 35803 – 6000

V. Geographic Location *(See Instructions)*

Method: C O S

Latitude: 34. 35' 32.245" N

Longitude: 086. 33' 57.509 W

County Name: MADISON

VI. Facility Contact *(Person to be contacted regarding waste activities at site)*

Name *(First)*: GREGORY *(Last)*: BRYANT

Job Title: EHS ENGINEER

Phone Number *(Area Code and Number)*: 256 – 882 – 4764 Ext.

Contact Email Address *(Optional)*: greg.bryant@sanmina.com

VII. Facility Mailing Address *(See Instructions)*

Street or P. O. Box: 13000 S. MEMORIAL PARKWAY

City or Town: HUNTSVILLE State: AL Zip Code: 35803 – 6000

VIII. Description of Facility Processes *(See instructions for NAICS Code listings)*

A. Facility Process In the space provided below, describe each of the processes at your facility that produce Regulated Wastes.

1. PRINTED CIRCUIT/ELECTRONICS MANUFACTURING
2.
3.
4.
5.

B. NAICS Codes: Enter the North American Industry Classification System (NAICS) Code of the overall production, distribution, or service activity of your site. Also, provide any additional NAICS Codes that describe the specific industrial processes that are used.

Primary	2	3	4	5
334418	334419			

Continued on Next Page

IX. Ownership *(See Instructions)*

A. Legal Name of Facility

SANMINA CORPORATION

B. Name of Facility's Legal Owner

SANMINA CORPORATION

Street , P. O. Box or Route Number: 2700 NORTH FIRST STREET

City or Town	State	Zip Code
SAN JOSE	CA	95134 _

Phone Number *(Area Code and Number)*	C. Land Type	D. Owner Type	E. Operator Type	Change of Owner Indicator	Date Changed Month	Day	Year
408 _ 964 _ 3500	P	P	P	Yes ✓ No ✓			

F. Name of Facility's On-Site Operator

SANMINA CORPORATION

Street , P. O. Box or Route Number: 13000 S. MEMORIAL PARKWAY

City or Town	State	Zip Code
HUNTSVILLE	AL	35803 _ 6000

Phone Number *(Area Code and Number)*: 256 _ 882 _ 4800 Ext.

G. Name of Facility's Parent Company

SANMINA CORPORATION

Street , P. O. Box or Route Number: 2700 NORTH FIRST STREET

City or Town	State	Zip Code
SAN JOSE	CA	95134 _ 964

Phone Number *(Area Code and Number)*	Ext.	Change of Owner Indicator	Date Changed Month	Day	Year
408 _ 964 _ 3500		Yes ☐ No ✓			

H. Name of Facility's Property Owner

SANMINA CORPORATION

Street , P. O. Box or Route Number: 2700 NORTH FIRST STREET

City or Town	State	Zip Code
SAN JOSE	CA	95134 _

Phone Number *(Area Code and Number)*	Ext.	Change of Owner Indicator	Date Changed Month	Day	Year
408 _ 964 _ 3500		Yes ☐ No ✓			

Facility's EPA ID Number: ALD983166257

(Continued on Next Page)

X. Certification Status

Note: Pursuant to Rules 335-1-6 of the ADEM Administrative Code, all Notification Forms submitted to the Department must include the appropriate certification fee in order to be complete.

During at least 1 month of the next 12 months, this facility will operate and/or maintain: *(Check all that apply)*

A. Hazardous Waste Activities *(Attach Schedule A)*

1. [X] Large Quantity Generator ≥ 2,200 lbs/month (≥ 1,000 kg/month)
2. [ ] Small Quantity Generator between 221 and 2,199 lbs/month (between 101 and 999 kg/month)
3. [ ] Conditionally Exempt Generator ≤ 220 lbs/month (≤ 100 kg/month)

(Note: Household generation is exempt under 335-14-2-.01(4)(b)1.)

4. [ ] **Not** a generator (Schedule A not required for this option)
5. [ ] Transporter/Transfer Facility
6. [ ] Treatment Facility – Combustion
7. [ ] Treatment Facility – Other than Combustion
8. [ ] Storage Facility
9. [ ] Disposal Facility

B. Used Oil Activities *(Attach Schedule B)*

1. [ ] Generator (≥ 25 gallons/month)
2. [ ] Transporter/Transfer Facility
3. [ ] Processor/Re-refiner
4. [ ] Fuel Marketer
5. [ ] Burner

C. Universal Waste Activities *(Attach Schedule C)*

1. [ ] Universal Waste Transporter
2. [ ] Large Quantity Handler ≥ 11,020 lbs (> 5,000 kg)
3. [X] Small Quantity Handler <11,020 lbs (< 5,000 kg)

Any ADEM Form 8700-12 submitted without all appropriate waste schedules and certification fees will not be processed.

XI. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person, or persons, who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature	Name and Official Title *(Type or Print)*	Date Signed
	Carl Duckett, VP, Plant Manager	2/15/16

XII. Comments

	Date Processed (for Official Use Only)

Mail completed form, a check or money order for all appropriate certification fees, and all necessary schedules and attachments to:

Alabama Department of Environmental Management
Land Division
P. O. Box 301463
Montgomery, AL 36130-1463

Facility's EPA ID Number
ALD983166257

XIII. Additional Information Sheet

Waste Continued

Mercury Containing Equipment (D009) - 20 lbs
Waste Expired Liquid, Corrosive (D002) - 168 lbs

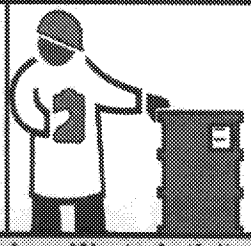
Facility's EPA ID Number
ALD983166257

Please print or type in the unshaded areas only

ADEM Form 8700-12 M3 5/2014

(for ADEM Use Only)

Please refer to the *ADEM Form 8700-12 Notification Form Instructions* before completing this form. Information requested here is required by law (§ 3010 of the *Resource Conservation and Recovery Act*).



ADEM Form 8700-12

Schedule A

Certification of Hazardous Waste Management

I. Type of Hazardous Waste Activity *(Mark 'X' in the appropriate boxes; See Instructions)*

- [X] **A. Hazardous Waste Generator**
  - [X] 1. 2,200 lbs *(1,000 kg)* per month or more *(LQG)*
  - [ ] 2. 221 to 2,199 lbs *(101 - 999 kg)* per month *(SQG)*
  - [ ] 3. 220 lbs *(100 kg)* per month or less *(CESQG)*
  - [ ] 4. United States Importer of Hazardous Waste
- [ ] **B. Hazardous Waste Transporter/Transfer Facility** ††
  - [ ] 1. Commercial Transporter *(received wastes from others)*
    - [ ] a. Air
    - [ ] b. Rail
    - [ ] c. Highway
    - [ ] d. Water
    - [ ] e. Other *(Specify)* _____
  - [ ] 2. Self Transporter *(Own Waste Only)*
  - [ ] 3. Transfer Facility
    - [ ] a. Loaded trucks
    - [ ] b. Off-loaded containers
    - [ ] c. Bulk Transfer between vehicles
- [ ] **C. Treatment, Storage, Disposal Facility** (at Facility) ††
  - [ ] 1. Facilities subject to Permit
    - [ ] a. Operating Units
    - [ ] b. SWMU CA
    - [ ] c. Post Closure Care
    - [ ] d. Other *(Specify)* _____
  - [ ] 2. Permit Exempt Treatment *(subject to ADEM verification)*
    - [ ] a. WWTU/ENU
    - [ ] b. Recycling Unit
    - [ ] c. TETF
    - [ ] d. Generator Evaporation
    - [ ] e. Generator Physical Processing
    - [ ] f. Other *(Specify)* _____
- [ ] **D. Hazardous Waste Fuel Activity** ††
  - [ ] 1. Blender Marketing to Burner
  - [ ] 2. Other Marketers
  - [ ] 3. Boiler and/or Industrial Furnace
    - [ ] a. Smelter Deferral
    - [ ] b. Small Quantity Exemption
- [ ] **E. Recycling Activities** *(Specify)* _____

†† **NOTE:** *A permit may be required for this activity. Contact (334) 271-7730 for more information.*

II. Hazardous Waste Generation

A. Waste Description *In the space provided, list the types of regulated waste typically generated or handled by your Facility. Attach additional sheets as necessary.*

Types of Waste Generated		Estimated Yearly Generation *in lbs.*
1. Waste Flammable Liquid, N.O.S (Toluene, Xyl	ene) D001, D035, F003, F005)	10,661
2. Waste Flammable Liquid, Corrosive	D001, D002	2348
3. Waste Corrosive Mixture	D002	885
4. Waste Corrosive, Expired (Citric Acid)	D002	1623

B. Characteristics of Nonlisted Hazardous Wastes. *[Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your Facility handles; See 335-14-2-.03(1) - (5). Additional spaces are available on the Supplemental page if you need to list more hazardous waste numbers.]*

1. Ignitable *(D001)*	2. Corrosive *(D002)*	3. Reactive *(D003)*	4. Toxicity Characteristic
X	X		X

(List specific EPA hazardous waste number(s) for the Toxicity characteristic contaminant(s))

D		D		D	008	D	009	D	011	D	035
D		D		D		D		D		D	
D		D		D		D		D		D	
D		D		D		D		D		D	

C. Listed Hazardous Wastes. *[See 335-14-2-.04(2) - (4)]; Attach the Supplemental page if you need to list more hazardous waste numbers.*

1	2	3	4	5	6
F003	F005				
7	8	9	10	11	12
13	14	15	16	17	18
19	20	21	22	23	24

(Continued on Next Page)

Facility's EPA ID Number: ALD983166257

II. Hazardous Waste Generation *(continued)*

25	26	27	28	29	30
31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48
49	50	51	52	53	54
55	56	57	58	59	60
61	62	63	64	65	66

III. Hazardous Waste Transporter/Transfer Facility

During a typical year, this facility transports/transfers _____ of Hazardous Waste.
(quantity in pounds)

IV. Treatment, Storage, Disposal Facility *(at Facility)*

During a typical year, this facility treats _____ of Hazardous Waste.
(quantity in pounds)

During a typical year, this facility stores _____ of Hazardous Waste.
(quantity in pounds)

During a typical year, this facility disposes _____ of Hazardous Waste.
(quantity in pounds)

V. Hazardous Waste Fuel Activity

During a typical year, this facility markets _____ of Hazardous Waste.
(quantity in pounds)

During a typical year, this facility combusts _____ of Hazardous Waste.
(quantity in pounds)

VI. Recycling Activity

During a typical year, this facility recycles 24269* of Hazardous Waste.
(quantity in pounds)

Note: In order for this schedule to be accepted by ADEM, it must be attached to a completed Notification of Regulated Waste Activity, ADEM Form 8700-12, and must include the appropriate certification fees, as required by 335-1-6.

Comments: * Recycling Breakdown : Lead Solder Dross - 4591 lbs, Lead Free Dross - 10298 lbs, Lead Free Paste - 2857 lbs, SMT Wipes - 6523 lbs

Facility's EPA ID Number
ALD983166257

Please print or type in the unshaded areas only

II. Hazardous Waste Generator *(Supplemental)*

D. Listed and Nonlisted Hazardous Wastes Codes. *[See 335-14-2-.04(2) - (4) and 335-14-2-.03(1) - (5)] If you need to list more hazardous waste numbers, attach copies of this page as necessary.*

1	2	3	4	5	6
7	8	9	10	11	12
13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30
31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48
49	50	51	52	53	54
55	56	57	58	59	60
61	62	63	64	65	66
67	68	69	70	71	72
73	74	75	76	77	78
79	80	81	82	83	84
85	86	87	88	89	90
91	92	93	94	95	96
97	98	99	100	101	102
103	104	105	106	107	108
109	110	111	112	113	114
115	116	117	118	119	120

Facility's EPA ID Number

ALD983166257

II. Hazardous Waste Generator *(Supplemental)*

D. Listed and Nonlisted Hazardous Wastes. *[See 335-14-2-.04(2) - (4) and 335-14-2-.03(1) - (5)] If you need to list more hazardous waste numbers, attach copies of this page as necessary.*

121	122	123	124	125	126
127	128	129	130	131	132
133	134	135	136	137	138
139	140	141	142	143	144
145	146	147	148	149	150
151	152	153	154	155	156
157	158	159	160	161	162
163	164	165	166	167	168
169	170	171	172	173	174
175	176	177	178	179	180
181	182	183	184	185	186
187	188	189	190	191	192
193	194	195	196	197	198
199	200	201	202	203	204
205	206	207	208	209	210
211	212	213	214	215	216
217	218	219	220	221	222
223	224	225	226	227	228
229	230	231	232	233	234
235	236	237	238	239	240

Please print or type in the unshaded areas only

(For ADEM Use Only)

Please refer to the *ADEM Form 8700-12 Notification Form Instructions* before completing this form. Information requested here is required by law (§ 3010 of the *Resource Conservation and Recovery Act*).

ADEM Form 8700-12

Schedule B
Certification of Used Oil Management

I. Type of Used Oil Management Activity *(See Instructions)*

☐ **A. Used Oil Generator/Collector**
- ☐ 1. On-site Generation Only
- ☐ 2. Do-it-yourself Collection Center (i.e., from off-site source)
- ☐ 3. Collection Center (i.e., from off-site source)
- ☐ 4. Aggregation Point (i.e., from off-site source)

☐ **B. Used Oil Fuel Marketer**
- ☐ 1. Directs Shipment of Used Oil to Off-Specification Burner
- ☐ 2. First Claims Used Oil Meets Specifications
- ☐ 3. Burns Only Used Oil Generated On-site as On-Specification Fuel

☐ **C. Off-Specification Used Oil Fuel Burner**
- ☐ 1. Burns Only Off-Specification Used Oil Generated On-Site
- 2. Indicate Type(s) of Devices
  - ☐ a. Utility Boiler
  - ☐ b. Industrial Boiler
  - ☐ c. Industrial Furnace

☐ **D. Used Oil Transporter ††**
- ☐ 1. Only For Used Oil Generated On-site
- ☐ 2. Operates a Transfer Facility

☐ **E. Used Oil Processor/Re-refiner**

†† **NOTE:** *A permit is required for this activity. Contact (334) 271-7758 for more information*

II. Used Oil Generation

During a typical year, this facility collects/generates _____ **of Used Oil.**
(quantity in pounds)

III. Used Oil Fuel Marketer

During a typical year, this facility markets _____ **of Used Oil.**
(quantity in pounds)

IV. Used Oil Burner

During a typical year, this facility burns _____ **of Used Oil.**
(quantity in pounds)

V. Used Oil Transporter

During a typical year, this facility transports _____ **of Used Oil.**
(quantity in pounds)

VI. Used Oil Processor/Re-refiner

During a typical year, this facility processes/re-refines _____ **of Used Oil.**
(quantity in pounds)

Note: In order for this schedule to be accepted by ADEM, it must be attached to a completed Notification of Regulated Waste Activity, ADEM Form 8700-12, and must include the appropriate certification fees, as required by 335-1-6.

Comments:

Facility's EPA ID Number
ALD983166257

Please print or type in the unshaded areas only

ADEM Form 8700-12M3 5/2014

Please refer to the *ADEM Form 8700-12 Notification Form Instructions* before completing this form. The information requested here is required by law (§ 3010 of the *Resource Conservation and Recovery Act*).

ADEM Form 8700-12

Schedule C

Certification of Universal Waste Management

(for ADEM Use Only)

I. Type of Universal Waste Activity *(See Instructions)*

☐ A. Universal Waste Transporter

☐ B. Large Quantity Handler — Estimated Yearly Amount (in lbs.)

1. Battery(ies) _____
2. Pesticide(s) _____
3. Thermostat(s) _____
4. Lamps _____
5. Other *(specify)* _____ _____

☒ C. Small Quantity Handler — Estimated Yearly Amount (in lbs.)

1. Battery(ies) 2272
2. Pesticide(s) _____
3. Thermostat(s) _____
4. Lamps 1000
5. Other *(specify)* _____ _____

II. Universal Waste Transporter

During a typical year, this facility transports _____ of Universal Waste.
(quantity in pounds)

III. Universal Waste Destination Facility

During a typical year, this facility receives _____ of Universal Waste.
(quantity in pounds)

Note: In order for this schedule to be accepted by ADEM, it must be attached to a completed Notification of Regulated Waste Activity, ADEM Form 8700-12, and must include the appropriate certification fees, as required by 335-1-6.

Comments:

Facility's EPA ID Number

ALD983166257

SANMINA

P. O. Box 1000
Huntsville, AL 35807

April 7, 2016

ADEM
Land Division
P.O. Box 301463
Montgomery, AL 36130-1463

Received
APR 12 2016
Land Division

RE: Sanmina-SCI RY 2015 8700-12

Please find the enclosed Sanmina-SCI Corporation 8700-12 Notification for Regulated Waste Activity for Reporting Year 2015. Per my conversation with Mr. Adrian Corbitt, he was made that the notification fee of $180.00 was mailed on April 4, 2016 without the notification form.

If you have any questions or cannot retrieve the separated check, please call me at (256) 882-4764 or email me at greg.bryant@sanmina.com.

Thank you

Gregory A. Bryant
EHS Engineer