11-21-85

3c

PRD 980574709

RCRA INSPECTION FORM

92 MAY 29 PM 12:23

BRANCH

Report Prepared for:

Generator ☐

Transporter ☐

HWM (TSD) FACILITY ☒

Copy of Report Sent to the Facility ____

FACILITY INFORMATION

NAME: CECOS PONCE WASTE MANAGEMENT FACILITY

LOCAL ADDRESS: MUNICIPALITY of PONCE

PUERTO RICO Zip Code

POSTAL ADDRESS: ____

Zip Code

E.P.A. ID #: PRD980594709

DATE OF INSPECTION: NOVEMBER 21, 1985

Participating Personnel

E.Q.B. or E.P.A. Personnel: ROGER ENNIS - USEPA

Facility Personnel: RICHARD GOOD, PLANT MANAGER

Report Prepared by: (Name) ROGER ENNIS

Agency: USEPA - REGION II

Telephone Number: 212-264-6143

Approved for the Director by: ____

Facility Name: CELOS PONCE

Address: PUERTO RICO

Time In: _____

Time Out: _____ EPA ID: _____

Date of Inspection: 11-21-85

Photos Taken ☐ Yes ☒ No

If yes, how many? _____

Sample Taken ☐ Yes ☒ No No. of Samples _____

Manifests Reviewed ☐ Yes ☒ No

Number of manifests in compliance _____

Number of manifests not in compliance _____

List manifest document numbers of those manifests not in compliance.

SUMMARY OF FINDINGS

FACILITY DESCRIPTION AND OPERATIONS

A RCRA INSPECTION WAS CONDUCTED ON NOVEMBER 21, 1985 to address 265 INTERIM STATUS REQUIREMENTS and LOSS of INTERIM STATUS ("LOIS"). MR. RICHARD GOOD, PLANT MANAGER REPRESENTED CECOS.

At the time of the Inspection no HAZARDOUS WASTE activities were being conducted. MR. GOOD explained that no hazardous wastes ~~activities~~ have been disposed of at the FACILITY since CECOS took over operation of the site from the municipality of PONCE.

Describe the activities that result in the generation of hazardous waste.

No activity

Identify the hazardous waste located on site, and estimate the approximate quantity of each. (Identify Waste Codes)

NONE