ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

05/02/94

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 ->	NY0000233387
FACILITY NAME ->	EUROPADISK LTD
MAILING ADDRESS ->	75 VARICK ST - ROOM 403 NEW YORK, NY 10013
INSTALLATION ADDRESS ->	75 VARICK ST - ROOM 403 NEW YORK, NY 10013

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION II
26 FEDERAL PLAZA
NEW YORK, NEW YORK 10278

ATTN: AIR & WASTE MANAGEMENT DIVISION, ROOM 1006
HAZARDOUS & SOLID WASTE PROGRAMS BRANCH
RCRA NOTIFICATIONS

TO: SHELTON, JAMES
PRES
EUROPADISK LTD
75 VARICK ST - ROOM 403
NEW YORK, NY 10013

FED Y

P. 02

Form Approved. OMB No. 2050-0034
GSA No. 0246-EPA-OT

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

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

(NB)

Date Received (For Official Use Only)
94-04-21

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

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

C. Installation's EPA ID Number: NY000023387

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

EUROPADISK LTD.

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

Street: 75 VARICK STREET Room 403

Street (continued):

City or Town: NEW YORK | State: NY | ZIP Code: 10013-

County Code: | County Name: NEW YORK

IV. Installation Mailing Address (*See Instructions*)

Street or P.O. Box: SAME

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

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

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

Job Title: PRESIDENT | Phone Number (*area code and number*): 212-226-4401

VI. Installation Contact Address (*See Instructions*)

A. Contact Address Location: [X] Mailing [ ] | B. Street or P.O. Box:

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

VII. Ownership (*See Instructions*)

A. Name of Installation's Legal Owner: EUROPADISK PLATING LTD.

Street, P.O. Box, or Route Number: 75 VARICK STREET Room 403

City or Town: NEW YORK | State: NY | ZIP Code: 10013-

Phone Number (*area code and number*): 212-226-4401

B. Land Type: P

C. Owner Type: P

D. Change of Owner Indicator: Yes [ ] No [ ] (Date Changed) Month Day Year

DYB-08-894-9250

Spoke with Ken 4/28/94

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)
   - [X] 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
   - [ ] 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 Marketers (or 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))			
[ ]	[X]	[ ]	[ ]	D004	D007		

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
James Shelton	James P. Shelton, Pres.	4/19/94

XI. Comments

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