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

Form Approved, OMB No. 2050-0028 Expires 10/31/99
GSA No. 0246-EPA-OT

Please refer to Section V. Line-by-Line Instructions for Completing EPA Form 8700-12 before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).

# Notification of Regulated Waste Activity

EPA United States Environmental Protection Agency

Date Received (For Official Use Only)

RECEIVED
Waste, Pesticides & Toxics Division
U.S. EPA – REGION 5

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

[ ] A. Initial Notification
[X] B. Subsequent Notification (Complete Item C)

C. Installation's EPA ID Number: I L D 0 0 6 9 2 7 9 2 5

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

PATTEN INDUSTRIES INC

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

Street: 635 W LAKE ST

Street (Continued):

City or Town: ELMHURST

State: IL

Zip Code: 60126 –

County Code:

County Name: DUPAGE

## 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): FLICK

(First): TERRY

Job Title: FACILITIES MGR

Phone Number (Area Code and Number): 630 – 279 – 4400

## 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: SAME

Street, P.O. Box, or Route Number: SAME

City or Town:

State:

Zip Code: – Waste Pesticides & Toxics Div. Date Received

Phone Number (Area Code and Number): 630 – 279 – 4400

B. Land Type: P

C. Owner Type: P

D. Change of Owner Indicator: Yes [ ] No [ ]

(Date Changed) Month Day Year



Checklist updated

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

Form Approved, OMB No. 2050-0028 Expires 10/31/99
GSA No. 0246-EPA-CT

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.)
   - [X] 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)
   - [X] a. For own waste only
   - [ ] b. For commercial purposes

Mode of Transportation
- [ ] 1. Air
- [ ] 2. Rail
- [XX] 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. Boiler and/or Industrial Furnace
     - [ ] 1. Smelter Deferral
     - [ ] 2. Small Quantity Exemption

   Indicate Type of Combustion Device(s)
     - [ ] 1. Utility Boiler
     - [ ] 2. Industrial Boiler
     - [ ] 3. Industrial Furnace
5. [ ] Underground Injection Control

### B. Used Oil Recycling Activities

1. Used Oil Recycling Marketer
   - [ ] a. Marketer Directs Shipment of Used Oil to Off-Specification Burner
   - [X] b. Marketer Who First Claims the Used Oil Meets the Specifications
2. Used Oil Burner - Indicate Type(s) of Combustion Device
   - [ ] a. Utility Boiler
   - [ ] b. Industrial Boiler
   - [ ] c. Industrial Furnace
3. Used Oil Transporter - Indicate Type(s) of Combustion Device(s)
   - a. Transporter
   - b. Transfer Facility
4. Used Oil Processor/Re-refiner - Indicate Type(s) of Activity(ies)
   - [ ] a. Process
   - [ ] b. Re-refine

## 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. Toxicity Characteristic | (List specific EPA hazardous waste number(s) for the Toxicity characteristic 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 |
|---|---|---|---|---|---|
| D001 | | | | | |
| 7 | 8 | 9 | 10 | 11 | 12 |
| | | | | | |

### C. Other Wastes. *(State or other wastes requiring a handler to have an I.D. number; See instructions.)*

| 1 | 2 | 3 | 4 | 5 | 6 |
|---|---|---|---|---|---|
| | | | | | |

## X. 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 |
|---|---|---|
| Blythe Cozza | Blythe I. Cozza, Corp. Engineering, Inc. as Agent of the Owner | 1/22/01 |

## XI. Comments

When servicing off road equipment or power generators, service technicians may be transporting more than 55 gallons of used oils back to the shop. Currently, it is picked up at the shop by Duke's Oil and transported to Beaver Oil. If they have over 1500 gals., Duke's may pay them.

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

EPA United States Environmental Protection Agency

# Handler Confirmation Screen

RCRAInfo

**PATTEN INDUSTRIES INC ELMHURST ILD006927925**

Last Updated By: **CVK** Last Updated On: **01/26/2001 3:18:43 PM**

The following information was processed:

## General Information:

| Source | Received Date | Non-notifier | Extract Flag | Acknowledgement Flag | Acknowledgement Date |
|---|---|---|---|---|---|
| N | 01/26/2001 | | X | | |

## I. Installation ID:

| EPA ID: | Activity Location: | Second ID: |
|---|---|---|
| ILD006927925 | IL | |

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

| Installation Name: |
|---|
| PATTEN INDUSTRIES INC |

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

| Number: | Street1: | Street2: | City: | State: | Zip code: | County: | State District: |
|---|---|---|---|---|---|---|---|
| | 635 W LAKE ST | | ELMHURST | IL | 60126 | DU PAGE | |

## IV. Installation Mailing address

| Number: | Street1: | Street2: | City: | State: | Zip code: |
|---|---|---|---|---|---|
| | 635 WEST LAKE ST | | ELMHURST | IL | 60126 |

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

| First Name: | Last Name: | Job Title: | Phone Number: |
|---|---|---|---|
| TERRY | FLICK | FAC MGR | 6302794400 |

## VI. Installation Contact Address:

| Street1/P.O. Box: | Street2/P.O. Box: | City: | State: | Zip code: |
|---|---|---|---|---|
| 635 WEST LAKE ST | | ELMHURST | IL | 60126 |

## VII. Ownership:

| Owner No.: | Name of Legal Owner: | Street1 or P.O. Box: | Street2 or P.O. Box: | City: | State: | Zip code: | Phone Number: | Land Type: | Owner Type: | Change Date: |
|---|---|---|---|---|---|---|---|---|---|---|
| 1 | patten industries INC | 635 W LAKE ST | | ELMHURST | IL | 60126 | 6302794400 | P | P | |

## VIII. Type of Federal Regulated Waste Activity:

### A. Hazardous Waste Activity

| | Type | Federally Regulated | Federal Description | State Regulated | State Description |
|---|---|---|---|---|---|
| Generator | 2 | R | | | |
| Transporter | S | | | | |
| Mode of Transportation | Air | Rail | Highway | Water | Other |
| | | | | | |
| Treater, Storer, Disposer | | | | | |
| Hazardous Waste Fuel | | | | | |
| Other Activity(ies) | | Underground Injection Control | | | |

### B. Universal Waste Activity:

| | | | | | |
|---|---|---|---|---|---|
| Hazardous Waste Fuel | | | | | |
| **C. Used Oil Management Activities:** | X | | | | |

**1. Used Oil Fuel Marketer**

| | | |
|---|---|---|
| | | Marketer Directs Shipment of Used Oil to Off-Specification Burner |
| | X | Marketer Who First Claims the Used Oil Meets the Specifications |
| **2. Used Oil Transporter Activity** | | |
| **3. Used Oil Processor/Re-refiner Activity** | | |

| Type D | Type F | Type K | Type P | Type U | Type X |
|---|---|---|---|---|---|
| D001 | | | | | |

## X. Comments:

**Continue**

URL: /Handler/Hand_Notif_addupd_rtn.asp

Patten
INDUSTRIES, INC.
635 W. LAKE ST. • ELMHURST, ILL. 60126 • CHGO: (312) 626-1860 • ELMH: (312) 279-4400

SMALL QUANTITY GENERATOR Sjh 1/9/85

January 3, 1984

RECEIVED
JAN 7 1985
WASTE MANAGEMENT BRANCH

Mr. Kenneth P. Bechely
Illinois Environmental Protection Agency
1701 First Avenue
Maywood, Illinois 60153

Ref: L04300000 - DuPage County - Elmhurst - Patten Industries/ILD 006927925 G

Dear Mr. Bechely:

In reference to your letter dated December 19, 1984, Patten Industries, Inc. as a small quantity generator will comply with the small quantity regulation pursuant to 35 Ill. Adm. Code 721.105. We understand that should our status change in the future we will be required to comply with 35 Ill. Adm. Code 720 through 725, 40 CFR 122 through 124, and the notification requirements of Section 3010 of RCRA.

Pursuant to 40 CFR 270.11d the following certification is included:

> "I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the 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."

Sincerely,

PATTEN INDUSTRIES, INC.

Constance N. Masulunes,
Purchasing Manager

CNM/law

cc: U.S. EPA, Region V,
RCRA Activities

RECEIVED
JAN 07 1985
WMD-RAIU
EPA, REGION V

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

U.S. ENVIRONMENTAL PROTECTION AGENCY

# NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

INSTALLATION'S EPA I.D. NO.

I. NAME OF INSTALLATION

II. INSTALLATION MAILING ADDRESS

III. LOCATION OF INSTALLATION

PLEASE PLACE LABEL IN THIS SPACE

001628 JAN 27 81

**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 A

## FOR OFFICIAL USE ONLY

COMMENTS: C

| INSTALLATION'S EPA I.D. NUMBER | APPROVED | DATE RECEIVED (yr., mo., & day) |
|---|---|---|
| F ILD006192725 01 | A | 810326 |

## I. NAME OF INSTALLATION

PATTEN INDUSTRIES INC.

## II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX: 3 635 WEST LAKE ST.

| CITY OR TOWN | ST. | ZIP CODE |
|---|---|---|
| 4 ELMHURST ILLINOIS | | 60126 |

## III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER: 5 635 WEST LAKE ST.

| CITY OR TOWN | ST. | ZIP CODE |
|---|---|---|
| 6 ELMHURST | IL | 60126 |

## IV. INSTALLATION CONTACT

| NAME AND TITLE (last, first, & job title) | PHONE NO. (area code & no.) |
|---|---|
| 2 WILLIAM SCHAEFER PROPERTY MGR | 312-279-4400 |

## V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER: 8 INCORPORATED

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))

- [X] A. GENERATION
- [ ] 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
- [ ] 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.: ILD006192725

## IX. DESCRIPTION OF HAZARDOUS WASTES

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

MAR 26 1981