ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

08/01/94

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 ->	NJD011297959
FACILITY NAME ->	WIRE PRO INC
MAILING ADDRESS ->	23 FRONT ST SALEM, NJ 08079
INSTALLATION ADDRESS ->	23 FRONT ST SALEM, NJ 08079

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 1009
HAZARDOUS & SOLID WASTE PROGRAMS BRANCH
RCRA NOTIFICATIONS

TO: MULFORD, MICHAEL
HAZ MAT CONTROL
WIRE PRO INC
23 FRONT ST
SALEM, NJ 08079

ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

07/25/94

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 ->	NJD011297959
FACILITY NAME ->	WIRE PRO INC
MAILING ADDRESS ->	23 FRONT ST SALEM, NJ 08079
INSTALLATION ADDRESS ->	23 FRONT ST SALEM, NJ 08079

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: MULFORD, MICHAEL
HAZ MAT CONTROL
WIRE PRO INC
23 FRONT ST
SALEM, NJ 08079

des

Form Approved. OMB No. 2050-0028 Expires 6-30-96

[redacted]

[redacted]

[redacted]

[redacted]

[redacted]

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

II. INSTALLATION MAILING ADDRESS

III. LOCATION OF INSTALLATION

ENVIRONMENTAL PROTECTION AGENCY, REGION II
NEW YORK, N.Y.
1985 APR 22 PM 4: 18
RCRA ADMINISTRATION BRANCH

PLEASE PLACE LABEL IN THIS SPACE

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: F NJD011297959 (F/N: 1)

APPROVED:

DATE RECEIVED *(yr., mo., & day)*:

I. NAME OF INSTALLATION

WIRE PRO INCORPORATED

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX: 3 23 FRONT STREET

CITY OR TOWN: 4 SALEM — ST.: NJ — ZIP CODE: 08079

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER: 5 23 FRONT STREET

CITY OR TOWN: 6 SALEM — ST.: NJ — ZIP CODE: 08079

Salem 033

IV. INSTALLATION CONTACT

NAME AND TITLE *(last, first, & job title)*: 2 KARAWIN KENNETH ENGINEER

PHONE NO. *(area code & no.)*: 609.935.7560

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER: 8 BOB BARBERA

DETACH A

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

F = FEDERAL
M = NON-FEDERAL

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.:

IX. DESCRIPTION OF HAZARDOUS WASTES

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

CONTINUE ON REVERSE

I.D. FOR OFFICIAL USE ONLY

W | T/A | C | 1

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 U159	32 U220	33 U226	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
Kenneth J. Karawin	KENNETH J. KARAWIN ENGINEER	4/18/85

DETACH

FOIA Report of Non-Sensitive Compliance Monitoring and Enforcement Data

Report run on: December 11, 2013 - 3:34 PM

Version 5.0

User Selection Criteria

Location:	New Jersey, all activities	**Activity Location:**	None Chosen
Handler ID:	NJD011297959	**Group of IDs:**	None Chosen
Handler Name:			
Handler Universe:	All Facilities Regardless of Universe		
Determined Date Range:	From: 10/01/1980 To: 12/11/2013		
Location County Code:	None Chosen	**Evaluation Type:**	
Location City:		**Focus Area:**	
Location Zip Code:		**Violation Type:**	
State District:	None Chosen	**Display Code Descrip.:**	Yes
Sort Order:	Region, State, Handler Name	**Display Universes:**	Yes

Results

Data meeting the criteria you selected follows.

Total Pages:5 Total Handlers:1

Report Description

This report presents available information from the Resource Conservation and Recovery Act Information System (RCRAInfo) about compliance evaluations, violations, and enforcement actions meeting the criteria supplied by the user. Evaluations showing no violations does not always indicate that no violations were determined. Violation without enforcement actions does not always mean no enforcement action will be issued. In order to avoid releasing enforcement sensitive information to the public the following information is not shown on the report: pending civil / judicial referrals, criminal actions and referrals, and State to EPA referrals; all other enforcement actions are released.

Report Information

Name:	cme_foia.rdf
Developed by:	EPA Headquarters, Office of Enforcement and Compliance Assurance
Deployed:	June 2006
Last Updated:	May 2012
Contact:	rcrainfo.help@epa.gov
Tables Used:	cmecomp3, ccitation3, hreport_univ5, lu_citation, lu_state, hid_groups
Libraries:	none

FOIA Report of Non-Sensitive Compliance Monitoring and Enforcement Data

Report run on: December 11, 2013 - 3:34 PM

WIRE PRO INC County Name / Code: SALEM / NJ033 **NJD011297959**

Location: 23 FRONT ST; SALEM, NJ 08079 **REGION 02**

Mailing: 23 FRONT ST; SALEM, NJ 08079

Activity Location: NJ | State District: SOUTHERN | Accessibility: | Non-Notifier: | Extract Flag: Y | Active Site: Y

Generator: SQG | Transporter: N | Operating TSDF: ----- | IC In Place: N | EI Indicator (HE / GW) N / N
Short-Term Gen: N | Transfer Facility: N | Offsite Receiver: N | HSM: N | Subpart K: —
Full Enforcement: ----- | Converter: ----- | State Unaddressed SNC: N | EPA Unaddressed SNC: N
CA Wrtid: N | State TSDF: —— | State Addressed SNC: N | EPA Addressed SNC: N
Active State Gen: N | State SNC w/Comp Sched: N | EPA SNC w/Comp Sched N

Violations Activity Location: NJ Type: 262.A Determined Date: 12/20/1991 Determined by Agency: State Responsible Agency: State
Scheduled Compliance Date: 01/16/1992 Actual Compliance Date: 01/24/1992 RTC Qualifier: OBSERVED Sequence Number: 2

CSE Evaluation 01/24/1992 Activity Location: NJ By: State Identifier: 000 Person: R2DEP Branch: NJ Found Violation: YES
Citizen Complaint: NO Multimedia Inspection: NO Sampling: NO Not Subtitle C: NO Day Zero: Focus Area:

CEI Evaluation 12/20/1991 Activity Location: NJ By: State Identifier: 000 Person: R2DEP Branch: NJ Found Violation: YES
Citizen Complaint: NO Multimedia Inspection: NO Sampling: NO Not Subtitle C: NO Day Zero: Focus Area:

Enforcement: Activity Location: NJ Type: 120 Action Date: 12/20/1991 Identifier: 000
Docket: Agency: State Responsible Person: R2DEP Branch: NJ
CA Component: N Disposition Status: Appeal Initiated: Appeal Resolved:

Violations Activity Location: NJ Type: 262.A Determined Date: 12/20/1991 Determined by Agency: State Responsible Agency: State
Scheduled Compliance Date: 01/16/1992 Actual Compliance Date: 01/24/1992 RTC Qualifier: OBSERVED Sequence Number: 3

CSE Evaluation 01/24/1992 Activity Location: NJ By: State Identifier: 000 Person: R2DEP Branch: NJ Found Violation: YES
Citizen Complaint: NO Multimedia Inspection: NO Sampling: NO Not Subtitle C: NO Day Zero: Focus Area:

CEI Evaluation 12/20/1991 Activity Location: NJ By: State Identifier: 000 Person: R2DEP Branch: NJ Found Violation: YES
Citizen Complaint: NO Multimedia Inspection: NO Sampling: NO Not Subtitle C: NO Day Zero: Focus Area:

Enforcement: Activity Location: NJ Type: 120 Action Date: 12/20/1991 Identifier: 000
Docket: Agency: State Responsible Person: R2DEP Branch: NJ
CA Component: N Disposition Status: Appeal Initiated: Appeal Resolved:

Evaluations With No Violations:

CEI Evaluation 03/28/2012 Activity Location: NJ By: State Identifier: 001 Person: SOTWO Branch: Found Violation: NO
Citizen Complaint: NO Multimedia Inspection: NO Sampling: NO Not Subtitle C: NO Day Zero: 03/28/2012 Focus Area:

CEI Evaluation 04/13/2000 Activity Location: NJ By: State Identifier: 000 Person: NJTO Branch: S Found Violation: NO
Citizen Complaint: NO Multimedia Inspection: NO Sampling: NO Not Subtitle C: NO Day Zero: Focus Area:

CEI Evaluation 01/28/1997 Activity Location: NJ By: State Identifier: 000 Person: NJRR Branch: S Found Violation: NO
Citizen Complaint: NO Multimedia Inspection: NO Sampling: NO Not Subtitle C: NO Day Zero: Focus Area:

* Note: Penalty amount may not reflect all violations cited.

WIRE PRO INC, NJD011297959, SALEM, NJ, continued -

CEI Evaluation	12/23/1986	Activity Location: NJ	By: State	Identifier: 001	Person: RZDEP	Branch:	Found Violation: NO	
Citizen Complaint: NO		Multimedia Inspection: NO	Sampling: NO	Not Subtitle C: NO	Day Zero:		Focus Area:	

Total Number of Handlers: 1
Total Number of Activity Locations: 1

*** End of Report ***

* Note: Penalty amount may not reflect all violations cited.

Description of codes used on the report:

Universes	Description of Universes
Generator	Indicates that the facility is a Large Quantity Generator (LQG), Small Quantity Generator (SQG), Conditionally Exempt Small Quantity Generator (CEG), or not a generator (N).
Transporter	Indicates that the facility Transports waste subject to RCRA regulations. ('Y' indicates that the facility is in this universe).
Operating TSDF	Indicates that the facility is a Treatment, Storage or Disposal facility subject to any type of enforcement. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment)
IC in Place	Indicates that the facility has Institutional Controls in place. ('Y' indicates that the facility is in this universe).
EI Indicator (HE / GW)	Indicates that the facility has controls in place for Environmental Indicators. HE - Human Exposures ('+' indicates the exposure exists and is under control; '-' indicates the exposure exists and is not under control; 'N' indicates the exposure does not exist) GW - Groundwater Release ('+' indicates the exposure exists and is under control; '-' indicates the exposure exists and is not under control; 'N' indicates the exposure does not exist)
Short-Term Gen	Indicates that the facility is a short term or one time event generator and not generating from ongoing processes.
Transfer Facility	Indicates that the facility transfers hazardous waste.
Offsite Receiver	Indicates that the facility, whether public or private, currently accepts hazardous waste from another site (site identified by a different EPA ID).
HSM	Indicates that the facility manages hazardous secondary material(s) (e.g. spent material, by-product or sludge) that when discarded, would be identified as hazardous waste.
Subpart K	Indicates that the facility has opted into the subpart K laboratory rule. It then specifies the type of facility (C - College or University; H - Teaching Hospital; N - Non-profit Research Institute; W - withdrawal from the rule)
Full Enforcement	Indicates that the facility is a Treatment, Storage or Disposal facility which is part of the Full Enforcement universe. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment)
CA Workload	Indicates that the facility is part of the Corrective Action Workload universe. ('Y' indicates that the facility is in this universe).
Active State Gen	Indicates that the facility is an Active State Generator. ('Y' indicates that the facility is in this universe).
Converter	Indicates that the facility is a Converter Treatment, Storage or Disposal facility. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment)
State TSDF	Indicates that the facility is a State Treatment, Storage or Disposal facility. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment)
State Unaddressed SNC	Indicates that the facility is a State Unaddressed Significant Non-Complier. ('Y' indicates that the facility is in this universe).
State Addressed SNC	Indicates that the facility is a State Addressed Significant Non-Complier. ('Y' indicates that the facility is in this universe).
State SNC w/ Compl. Sched	Indicates that the facility is a State Significant Non-Complier with a Compliance Schedule. ('Y' indicates that the facility is in this universe).
EPA Unaddressed SNC	Indicates that the facility is an EPA Unaddressed Significant Non-Complier. ('Y' indicates that the facility is in this universe).
EPA Addressed SNC	Indicates that the facility is an EPA Addressed Significant Non-Complier. ('Y' indicates that the facility is in this universe).
EPA SNC w/ Compl. Sched	Indicates that the facility is a EPA Significant Non-Complier with a Compliance Schedule. ('Y' indicates that the facility is in this universe).

* Note: Penalty amount may not reflect all violations cited.

Description of codes used on the report:

ACCESSIBILITY - indicates the reason why the handler is not accessible for normal RCRA tracking and processing (previously called Bankrupt Indicator):

Code	Description
B	Indicates that the handler has filed for bankruptcy and bankruptcy litigation is in process.
C	Indicates that all RCRA responsibilities for permitting/closure, corrective action, and compliance monitoring and enforcement at the facility have been formally transferred to the CERCLA program or state equivalent.
F	Indicates that all responsible parties (owners/operators) for the handler have fled the country or are otherwise not available for prosecution.
L	Indicates that the handler's case is tied up in litigation to the extent that further progress in achieving RCRA compliance through normal enforcement is not possible.

NON-NOTIFIER - Indicates that the handler has been identified through a source other than Notification and is suspected of conducting RCRA-regulated activities without proper authority:

Code	Description
E	Indicates that the handler was initially a non-notifier, subsequently determined to be exempt from requirements to notify.
O	Indicates that the handler is a former non-notifier.
X	Indicates that the handler is a non-notifier.

Violation Type	Description
262.A	GENERATORS - GENERAL

Evaluation Type	Type Description
CEI	COMPLIANCE EVALUATION INSPECTION ON-SITE
CSE	COMPLIANCE SCHEDULE EVALUATION

Enforcement Type	Enforcement Description
120	WRITTEN INFORMAL

* Note: Penalty amount may not reflect all violations cited.