OREGON DEQ Hazardous Waste
Filing Information Acknowledgement

Date September 30, 1996

Your recent communication is hereby acknowledged. This communication resulted in the following filing information action:

ACTION:

- ☐ Modified/Added Status (as identified under Status)
- X Issued New EPA ID Number (identified under Facility)
- ☐ Canceled or Withdrawn EPA ID Number (identified under Facility)
- ☐ Reactivate EPA ID Number (identified under Facility)

STATUS:

- ☐ Transporter
- ☐ Market/Burn Hazardous Waste Fuels
- ☐ Market/Burn Used Oil
- ☐ Recycler
- X Generator Status effective 28-AUG-1996
  - ☐ Large Quantity Generator (LQG)
  - ☐ Small Quantity Generator (SQG)
  - X Conditionally Exempt Small Quantity Generator (CEG)

FACILITY:

EPA ID Number ORD046266078

Facility Name SPEED CARTER PROFESSIONAL YACHT REPAIR

Corporate Name NA

Site Address 58144 OLD PORTLAND RD
ST HELENS OR 97051

This EPA ID Number is permanently assigned to the site location listed above and is to be used on all shipping papers, manifests and correspondence concerning hazardous waste pertaining to that site. If the name, ownership, status, contact name, or similar changes occur, you will need to update your filing information. If you sell, leave, or abandon the site you must update your filing information. If for any reason hazardous waste is no longer generated, stored, or disposed of at this site, you may want to request a temporary withdrawal or cancel the EPA ID Number. For these updates request a "Notification Form" from DEQ by calling 229-5913.

Please note that all generators must respond to the annual reporting requirements due by March 1 of each calendar year. Each facility with an open EPA ID Number will receive instructions the previous December. All LQGs and SQGs must generate a toxics use reduction plan or a toxics use reduction annual progress report and file the appropriate notice or report to DEQ by September 1 of the following year. For more information call the above number.

Notification of Hazardous Waste Activity

RECEIVED
AUG 28 1996

Waste Management & Cleanup Division
Department of Environmental Quality

PLEASE TYPE ALL FORMS.

General Facility Information

This form asks some questions about your facility. The term "facility" is used to mean facility, business or site.

1. Why are you completing the Notification Form? (Check one)

☑ **First notification:** This is my first notification of hazardous waste activity for this location. I need to receive a DEQ/EPA ID number.

☐ **Update information:** To update information, please check all that apply:

- ☐ Business closed at this location. Date of closure _____
- ☐ Business change of ownership. Date of change _____.
- ☐ Business name change.
- ☐ Generator status change. (Facility is now a Conditionally Exempt Generator.)
- ☐ Business address changed by Post Office.
- ☐ Other _____.

2. What is the EPA ID number for this facility (if it already has one)? ORD 046266078

3. Facility name Speed Carter Professional Yacht Repair

4. If different from #3, how is your facility name filed with the Oregon Secretary of State, Corporations Division?

_____

5. The PHYSICAL LOCATION of this facility is (Do NOT enter a PO Box):

Street Address: 58144 Old Portland Rd

City: St. Helens State: OR ZIP: 97051 County: Columbia

Specific Location (if available): _____

(If available, provide the precise location of the facility. Indicate whether you used Township/Range, UTM Number, tax lot, latitude/longitude, or another indicator to provide this.

Are there other businesses located at this address? ☑ YES ☐ NO

6. The MAILING ADDRESS of this facility is:

Street Address or PO Box: 2114 Columbia Blvd. Suit 113

City: St. Helens State: Or ZIP: 97051

(Continued on reverse side)

Hazmat div

7. The LEGAL OWNER of this business or operation is:

Name of person or organization: Speed Carter

Street Address or PO Box: Columbia Blvd Suit 113

City: ST. Helens State: Or ZIP: 97051 Phone: 503-366-3830

8. The LAND OWNER of the property where this facility is located is:

Name of person or organization: Port of ST. Helens

Street Address or PO Box: 100 E Columbia City

City: Columbia City State: Or ZIP: Phone: 397-2888

9. The OPERATOR of this facility is:

Name: Speed Carter Organization: Speed Carter Repair

Street Address or PO Box: 2114 Columbia Blvd. Suit 113

City: ST. Helens State: Or ZIP: 97051 Phone: 503-366-3830

10. Whom should DEQ contact regarding site visits and inspections?

Name: Speed Job Title: Owner Phone: 503-366-3830

11. Whom should DEQ contact about hazardous waste fees?

Name: Speed Organization: Speed Carter Repair

Street Address or PO Box: 2114 Columbia Blvd Suit 113

City: ST. Helens State: Or ZIP: 97051 Phone: 503-366-3830

12. Whom should DEQ contact if clarification is needed on this form?

Name: Speed Phone: 503-366-3830

13. Please select the most appropriate classification for the Land Owner, Facility Owner, and Business Operator.

	Business Owner (check one)	Land Owner (check one)	Facility Operator (check one)
Private	☑	☐	☑
Federal	☐	☐	☐
State	☐	☐	☐
County	☐	☐	☐
District	☐	☐	☐
Municipal	☐	☑	☐
Native American	☐	☐	☐

14. The Standard Industrial Classification (SIC) code that best describes the principal products or services rendered at the site is[1]: Marine Repair 7699

15. At the time of this report, approximately how many people were employed full time at this facility?

1 to 50 ___/___ more than 50 _____

16 If the facility is CURRENTLY a generator, what is its status? If the facility is NOT YET generating a hazardous waste, what will be the status? (please check appropriate box below)[2]

☐ Large Quantity Generator ☐ Small Quantity Generator ☒ Conditionally Exempt Generator

☐ Facility does not generate hazardous waste.

16a. List up to 4 waste codes describing Federal and/or State of Oregon hazardous wastes generated or expected to be generated or managed by your facility.

D001 U002 ☐☐☐☐ ☐☐☐☐

17. Does your facility manage waste in units exempt from RCRA permit requirements such as elementary neutralization units, permitted WWTUs or accumulation tanks or containers? ☐ YES ☒ NO
(if your answer is "NO", skip to question 18.)

If your answer is "YES", does the facility manage hazardous waste :
☐ Generated at this facility ☐ Generated by other facilities

Which RCRA-exempt activities occur at this facility?
☐ Treatment ☐ Disposal ☐ Recycling

Does your facility intend to develop exempt capability in the future? ☐ YES ☐ NO

18. Does your facility market or burn hazardous waste fuels? If so, please check the boxes below for activities applicable to your site.

☐ Generator marketing to burner ☐ Other marketer ☐ Boiler and/or industrial furnace

- Burner operating under
  ☐ Smelter deferral ☐ Small Quantity Exemption
- Type of combustion device used at your facility
  ☐ Utility boiler ☐ Industrial boiler
  ☐ Industrial furnace ☐ Other _____

19. Is this facility a hazardous waste transporter? ☐ YES ☒ NO (if your answer is "NO", skip to question 20. If your answer is "YES", please check as many of the following boxes as appropriate).

☐ I transport only hazardous waste generated at my facility

☐ I am a transporter for commercial purposes

☐ I transport hazardous waste by: (check all appropriate boxes)

☐ Air ☐ Rail ☐ Highway ☐ Water

My PUC Authority # is _____

SIC codes are listed on pages 14-27 of the Guidebook.

20. Does your facility manage wastes in RCRA permitted units or units subject to permit? ☐ Yes ☑ No

If answer is yes, does the facility manage hazardous waste:
Generated at this facility ☐ Yes ☐ No Generated by other facilities? ☐ Yes ☐ No

Which RCRA permitted activities occur at this facility?
☐ Treatment ☐ Disposal ☐ Storage

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.

Speed Carter — 8-13-96
Signature — Date

Speed Carter — owner
Name (please print) — Title

Comments: