EPA

ACKNOWLEDGEMENT OF NOTIFICATION OF REGULATED WASTE ACTIVITY
(VERIFICATION)

This is to acknowledge that you have filed a Notification of Regulated 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

VA0000313163

INSTALLATION ADDRESS

VIRGINIA NATURAL GAS
5100 E VIRGINIA BCH BLVD
NORFOLK VA 23502
CRAIG BONNEY SUPVR

350 HILL ST
SUFFOLK VA 234343856

EPA Form 8700-12A (6-90)

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

Date Receive
(For Official Use

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

[X] A. First Notification [ ] B. Subsequent Notification (*complete item C*) ew 5/20/94

C. Installation's EPA ID Number: VA000031316

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

VIRGINIA NATURAL GAS

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

Street: 350 HILL ST

Street (continued):

City or Town: SUFFOLK | State: VA | ZIP Code: 23435-38

County Code: 800 | County Name:

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*): BONNEY | (*first*): CRAIG

Job Title: SUPERVISOR | Phone Number (*area code and number*): 804-466-5559

VI. Installation Contact Address (*See Instructions*)

A. Contact Address: Location [ ] Mailing [X]

B. Street or P.O. Box: 5100 E. VIRGINIA BCH BLV

City or Town: NORFOLK | State: VA | ZIP Code: 23502-

VII. Ownership (*See Instructions*)

A. Name of Installation's Legal Owner: SAME

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

City or Town: | State: | ZIP Code:

Phone Number (*area code and number*): 804-466-5559

B. Land Type: P | C. Owner Type: P | D. Change of Owner Indicator: Yes [ ] No [X] | (Date Changed) Month Day

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MAY 03 1994
EPA, R3

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

Form Approved. OMB No. 2050-0039.

ID - For Official Use O

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. 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 Fuel Activities

1. Off-Specification Used
   - [ ] a. Generator Marketing
   - [ ] b. Other Marketer
   - [ ] c. Burner - indicate Type of Combustion
     - [ ] 1. Utility Boiler
     - [ ] 2. Industrial Boi
     - [ ] 3. Industrial Fur
2. [ ] Specification Used Oil F (or On-site Burner) Who 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 hazardo wastes your installation handles. *(See 40 CFR Parts 261.20 - 261.24)*

1. Ignitable (D001)	2. Corrosive (D002)	3. Reactive (D003)	4. Toxicity Characteristic (D000)	(List specific EPA hazardous waste number(s) for the Toxicity characteristic contaminant(s))
X	X		X	D018

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
F001	F003	F005			
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 supervisi accordance with a system designed to assure that qualified personnel properly gather and evaluate the inform submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsib gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, complete. I am aware that there are significant penalties for submitting false information, including the possibility of fin imprisonment for knowing violations. CRAIG BONNEY

Signature	Name and Official Title (type or print)	Date Signed
Craig Bonney	SR. BUYER	4/22/94

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XI. Comments

Transport: W.L. Black & Associates
VA Permit: VAD988223814

CW 6/3

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

HST 5-26-94

GEN

RESOURCE CONSERVATION AND RECOVERY INFORMATION SYSTEM MAINTENANCE FORM FOR EPA NOTIFICATION

EPA-ID# VA0000313163 Date: 3-20-95

FACILITY NAME Virginia Natural Gas

New Facility Name

Name Change _____

Location of Installation

Street _____

City/Town _____ State _____ Zip _____

County Code _____ County Name _____

Installation Mailing Address

Street _____

City/Town _____ State _____ Zip _____

Installation Contact

Last Name _____ First _____

Job Title _____ Phone # ( ) _____

Street _____

City/Town _____ State _____ Zip _____

Ownership

Name of Legal Owner _____

Street _____

City/Town _____ State _____ Zip _____

Phone # ( ) _____ Land Type _____ Owner Type _____

Waste Codes

Delete Old Waste Codes

Add New Waste Codes

Updated in RCRIS by: HST Date: 3/23/95 3-22-95

Waste Activity	Type	RCRA Reg. Status	RCRA Reg. Desc.
Generator	2		
TSD			
Transporter			

Mode of Transportation

Air _____ Rail _____ Highway _____ Water _____ Other _____

Burner/Blender _____

- B Boiler and/or Industrial Furnace (BIF) only.
- D BIF only; Smelter Deferral.
- E BIF only; Small Quantity Exemption Claimed.
- N Not a Burner/Blender, Verified.
- X Other Burner/Blender Activity.
- Blank Unverified.

HWF Market to Burner _____

- X Code indicates that the Handler is a generator engaged in marketing burners of hazardous waste fuel activities.
- Blank No activity

HWF Other Market _____

- X Code indicates that the Handler is engaged in hazardous waste fuel marketing activities other than generator marketing to burner.

HWF Burner _____

- B Boiler and/or Industrial Furnace (BIF) only.
- X Indication of Activity.

UO Market to Burner _____

- X Code indicates that the Handler is a generator engaged in marketing to burners of off-spec. used oil fuel.

UO Other Market _____

- X Code indicates that the Handler is engaged in marketing of off-spec used oil fuel other than generator marketing to burner (e.g., marketing to used oil refinery).

UOF Burner _____

- B Boiler and/or Industrial Furnace.
- X Indication of Activity.

UO Act _____

- B Boiler and/or Industrial Furnace.
- X Code indicating that the Handler is engaged in marketing of specification fuel oil activities.

Burner Types

Utility Boiler _____ Industrial Boiler _____ Ind. Furnace _____

Underground Injection Control _____

- X Code indicates that the Handler generates and/or treats, stores, or disposes of hazardous waste and has an injection well located at the installation.

Recycler _____

- C Commercial
- R Non-Commercial Recycler
- N Not a Recycler, Verified
- Blank Not a Recycler, Unverified

Virginia Natural Gas

A CNG COMPANY

5100 East Virginia Beach Blvd.
Norfolk, Virginia 23502-3488
(804) 466-5400

Department of Environmental
Quality - Waste Division
P. O. Box 10009
Richmond, VA 23240-0009

Attention: Claire Slaughter
Reference: EPA ID # VA0000313163

Dear Ms. Slaughter:

It has been brought to our attention that Virginia Natural Gas (VNG) located at 350 Hill Street, Suffolk, Virginia has been incorrectly listed as a large quantity generator. VNG only generates small amounts of waste due to routine maintenance. We are requesting that this be changed to a small quantity generator classification.

If there is any questions please contact me at (804) 466-5559.

Respectfully,

Craig Bonney

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EPA, RS

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*************************************************************************
*                  RCRIS: Notification View Screen 2 of 6               *
*************************************************************************
*EPA ID: VA0000313163     Other ID:                   Merge Send: Y     *
*Date Received(MMDDYY):  050394   Source( N/E/S ):  N Non-Notifier Flag: *
*Date Acknowledged (MMDDYYYY):              Send Acknowledgement:       *
*Name of Installation:  VIRGINIA NATURAL GAS                            *
*                      Installation Location Address                    *
*Streets:  350 HILL ST                                                  *
*City:     SUFFOLK                      State:  VA   Zip:    234343856  *
*County Code:  800     County Name:  SUFFOLK                            *
*                      Installation Mailing Address                     *
*Streets:  350 HILL ST                                                  *
*City:     SUFFOLK                      State:  VA   Zip:    234343856  *
*                         Contact Information                           *
*   Last Name        First Name            Title          Phone  Address(M,L,O)*
* BONNEY            CRAIG             SUPVR            8044665559       O  *
*Streets:  5100 E VIRGINIA BCH BLVD                                     *
*City:     NORFOLK                      State:  VA   Zip:    23502      *
*Land Type:  P                                                          *
*************************************************************************
* Enter-Continue          F1-Previous Screen      F3-Exit                *
*************************************************************************
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*****************************************************************************
*                  RCRIS: Notification View Screen 3 of 6
*****************************************************************************
* EPA ID:   VA0000313163     Other ID:                    Source:  N
*
* Owner Sequence Number:     1
* Ownership:  VIRGINIA NATURAL GAS                         Type of Owner:  F
*
*
*                        Address of Owner/Operator
*
*      Street: 5100 E VIRGINIA BCH BLVD
*      City:   NORFOLK                    State: VA Zip Code    23502
*      Phone:  8044665559
*
* Current/Previous Indicator:  CO  Change Date(MMDDYY):
*
*
*
*****************************************************************************
* Enter-Continue   F1-Previous Screen    F3-Exit            F5-Curr. Owner
* F6-Prev. Owner       F8-Help           F9-First           F10-Next
*****************************************************************************

*****************************************************************************
*                  RCRIS: Notification View Screen 4A of 6
*****************************************************************************
* EPA ID:  VA0000313163    Other ID:                  Source:  N
*
*                                 RCRA Reg  RCRA Reg  State Reg   State Reg
* Waste Activity            Type   Status     Desc      Status      Desc
* --------------------      ----  --------  --------  ---------  ----------
* HW Generator:              1       R
* HW TSD:
* HW Transporter:
*   Transport Mode:  Air:      Rail:      Highway:      Water:
*                    Other:
* HW Burner/Blender:
* NHW Used Oil Recycler:
* ---------------------------------------------------------------------------
* Underground Injection Control:
* Recycler:
*
*
*****************************************************************************
* Enter-Continue      F1-Previous Screen     F3-Exit            F8-Help
*****************************************************************************

*****************************************************************************
*                  RCRIS: Notification View Screen 5 of 6
*****************************************************************************
*        EPA ID:  VA0000313163  Other ID:                  Source:  N
*
*     Hazardous Waste Codes:  Specific/Non-Specific/Commercial/Chemical
*                    D000   D001     D002   D018     F001
*                    F003   F005
*
*
*
*
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EPA

ACKNOWLEDGEMENT OF NOTIFICATION OF REGULATED WASTE ACTIVITY

(VERIFICATION)

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EPA I.D. NUMBER

VA0000313163 03/27/95

INSTALLATION ADDRESS

VIRGINIA NATURAL GAS
5100 E VIRGINIA BCH BLVD
NORFOLK, VA 23502
CRAIG BONNEY SURVR

350 HILL ST
SUFFOLK, VA 234343856

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