



Florida Department of  
Environmental Protection  
Hazardous Waste Inspection Report

**FACILITY INFORMATION:**

**Facility Name:** Crowley Liner Services Inc

**On-Site Inspection Start Date:** 05/20/2010

**On-Site Inspection End Date:** 05/20/2010

**ME ID#:** 21129

**EPA ID#:** FL0000360560

**Facility Street Address:** 4300 McIntosh Rd, Fort Lauderdale, Florida 33316

**Contact Mailing Address:** 4300 Macintosh Rd, Ft Lauderdale, Florida 33316-4219

**County Name:** Broward

**Contact Phone:** (904) 727-2449

**NOTIFIED AS:**

SQG (100-1000 kg/month)

Transporter

Transfer Facility

**INSPECTION TYPE:**

Routine Inspection for Hazardous Waste Transfer Facility

**INSPECTION PARTICIPANTS:**

Principal Inspector: Magdalena Gierczak, Inspector

Other Participants: Jose Santiago, Materials Manager

**LATITUDE / LONGITUDE:** Lat 26° 4' 5.4186" / Long 80° 7' 19.456"

**SIC CODE:** 8999 - Services - services, nec

**TYPE OF OWNERSHIP:** Private

**Introduction:**

The facility is a seaport shipping and transfer facility. It has been in operation for over 20 years. It is located on 25 acres, employs about 150 people, and uses city utilities.

**Process Description:**

Facility does maintenance on their own vehicles and generates used oil, oil filters and solids, antifreeze, and mineral spirits wastes.

The 2 parts washers are System One machines serviced by Safety Kleen, antifreeze and oil waste is managed by Cliff Berry.

There are 2 underground fuel tanks holding gasoline and diesel.

There is an underground 3-unit water-oil separator. Each unit is about 2000 gal, all are maintained by Cliff Berry and waste is picked up about once per year.

Two compressor rooms were noted holding 5-gal buckets of undetermined contents. Three buckets were marked as waste synthetic oil/grease, 13 were not marked clearly. Oily rags that scattered about.

**Transfer Facility:**

Facility does not take wastes off/out of containers. They accept shipping containers, move them into the parking area and ship them off all without unloading.

**New Potential Violations and Areas of Concern:**

**Transporters Checklist**

Type: Violation

Inspection Date: 05/20/2010

Rule: 265.15(d)

Question Number: 1.270

Question: Does the facility have completed inspection logs?

Explanation: No inspection logs were provided for review during the inspection.

Corrective Action: All container inspection logs must be maintained and kept on record and available for review for at least 3 years. Please provide a copy of inspection log within 30 days.

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Type: Violation

Rule: 265.16(a)(1)

Question Number: 1.310

Question: Do facility personnel complete hazardous waste training?

Explanation: Facility completes their HAZWOPER training once every 3 years. In addition, the emergency coordinator, Michael Hopkins, has not been trained since 2006.

Corrective Action: All HAZWOPER training must be completed on annual basis. Please train all needed personnel on annual basis. Please provide HAZWOPR current training record with 30 days.

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Type: Violation

Rule: 265.35

Question Number: 1.520

Question: Is there sufficient aisle space to allow unobstructed movement of personnel and equipment? (e.g., adequate aisle space in between barrels to check for leakage, corrosion and proper labeling, etc.)

Explanation: Two compressor areas contained numerous 5-gal buckets of unmarked waste.

Corrective Action: Please properly mark all containers in the compressor rooms and provide pictures of corrective action to the department within 30 days.

**Attachments:**

Compressor Rm2 -Unmarked buckets1



Compressor Rm2 -Unmarked buckets2



Inspection Date: 05/20/2010

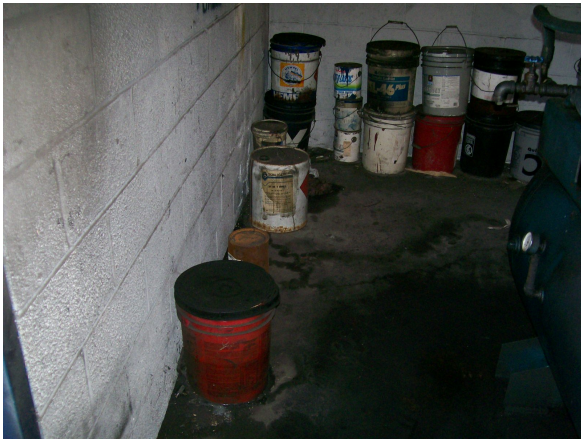
Compressor Rm2 -Unmarked buckets3



Compressor Rm2 -Unmarked buckets4



Compressor Rm2 -Unmarked buckets5



Compressor Rm1 -Unmarked buckets1



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Type:	Violation
Rule:	265.52(f), 265.52(e), 265.51(a)
Question Number:	1.620
Question:	Does the plan include:
Explanation:	<p>The plan does not include a list of all emergency equipment at the facility (such as fire extinguishing systems, spill control equipment, communications and alarm systems (internal and external), and decontamination equipment), where this equipment is required.</p> <p>The Contingency plan did not include spill procedures.</p> <p>Contingency plan does not list addresses for emergency personnel.</p>
Corrective Action:	<p>Please amend the Contingency Plan to include a list of all emergency equipment at the facility and provide copy to the Department and local authorities.</p> <p>Please incorporate the spill procedures into the Contingency plan and properly distribute an updated version to ALL proper authorities and DEP within 30 days.</p> <p>Please update the contingency plan including addresses for all emergency response personnel and distribute the updated CP to ALL proper authorities</p>

Inspection Date: 05/20/2010

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Type: Violation  
 Rule: 265.53(b)  
 Question Number: 1.690  
 Question: Has the facility supplied local police and fire departments with a copy of the contingency plan?  
 Explanation: No contingency plan was provided to local authorities.  
 Corrective Action: Please provide updated copies of the Contingency Plan to the proper authorities and obtain proof of delivery. Keep proof of delivery on file and provide copies to the Department within 30 days.

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Type: Area Of Concern  
 Rule: 62-730.171(2)(b)  
 Question Number: 1.800  
 Question: Does facility have a written closure plan satisfying requirements of closure performance, notification, and decontamination standards of 40 CFR 265.111, 265.112(c), 265.114, 265.115?  
 Explanation: The facility did not have a copy of their closure plan during the inspection.  
 Corrective Action: Please provide a copy of the closure plan to the Department within 30 days.

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### Summary of Potential Violations and Areas of Concern:

#### Potential Violations

Rule Number	Area	Date Cited	Explanation
Transporters Checklist			
265.15(d)		05/20/2010	No inspection logs were provided for review during the inspection.
265.16(a)(1)		05/20/2010	Facility completes their HAZWOPER training once every 3 years. In addition, the emergency coordinator, Michael Hopkins, has not been trained since 2006.
265.35		05/20/2010	Two compressor areas contained numerous 5-gal buckets of unmarked waste.
265.52(f), 265.52(e), 265.51(a)		05/20/2010	The plan does not include a list of all emergency equipment at the facility (such as fire extinguishing systems, spill control equipment, communications and alarm systems (internal and external), and decontamination equipment), where this equipment is required.  The Contingency plan did not include spill procedures.  Contingency plan does not list addresses for emergency personnel.



Inspection Date: 05/20/2010

Rule Number	Area	Date Cited	Explanation
265.53(b)		05/20/2010	No contingency plan was provided to local authorities.

Areas of Concern

Rule Number	Area	Date Cited	Explanation
Transporters Checklist 62-730.171(2)(b)		05/20/2010	The facility did not have a copy of their closure plan during the inspection.

**ATTACHMENTS:**

## Evacuation Route

**Conclusion:**

Please address and correct all violations and areas of concern listed above within 30 days. Provide all requested documentation in order to return into compliance.

Inspection Date: 05/20/2010

**Signed:**

A hazardous waste compliance inspection was conducted on this date, to determine your facility's compliance with applicable portions of Chapters 403 & 376, F.S., and Chapters 62-710, 62-730, 62-737, & 62-740 Florida Administrative Code (F.A.C.). Portions of the United States Environmental Protection Agency's Title 40 Code of Federal Regulations (C.F.R.) 260 - 279 have been adopted by reference in the state rules under Chapters 62-730 and 62-710, F.A.C. The above noted potential items of non-compliance were identified by the inspector(s).

This is not a formal enforcement action and may not be a complete listing of all items of non-compliance discovered during the inspection.

Magdalena Gierczak

**PRINCIPAL INSPECTOR NAME**

Inspector

**PRINCIPAL INSPECTOR TITLE****PRINCIPAL INSPECTOR SIGNATURE**

5/20/2010

**DATE**

Jose Santiago

**REPRESENTATIVE NAME**

Materials Manager

**REPRESENTATIVE TITLE****REPRESENTATIVE SIGNATURE**

Crowley

**ORGANIZATION**

5/20/2010

**DATE****Report Approvers:**

Karen Kantor

**SUPERVISOR NAME**

Supervisor

**SUPERVISOR TITLE****SUPERVISOR SIGNATURE**

DEP

**ORGANIZATION**

5/20/2010

**DATE**

NOTE: By signing this document, the Site Representative only acknowledges receipt of this Inspection Report and is not admitting to the accuracy of any of the items identified by the Department as "Potential Violations" or areas of concern.