

2007 BIENNIAL HAZARDOUS WASTE REPORT (BR) SUBMISSION DATA ENTRY/ QUALITY CONTROL CHECKLIST

Site EPA_ID		FL0984167791		Site Name		Safety Kleen Baynton		New Site Contact?		Phone:		
Receipt and Data Entry	form	recv pages	Submission Paper	Disk	Quality Control initial	date	QC error pages		Data Entry initial	date	Transfer Initial	Date
	SI	3	✓	✓	Et	3/7					Ac	4/12
	GM											
	WR											
	OI											
Data entry or Basic edit errors	form	page	sub pg	Action Item	QC init	date	Site Contact	date	Corrective Action	data entry initial	date	DE Comment
	GM	3,9-11		Gen 20	Ac	4/12	Ben Smith	4/13				
Advanced Edit Errors												
Subsequent Notification <input type="checkbox"/> Notification DATA Entered by: _____ Date: / /												
DATA ENTRY/FILING ASSIGNMENT: _____ Scanned to Oculus : <input type="checkbox"/> Date: / /												

MAIL THE COMPLETED FORM TO: The Appropriate EPA Regional or State Office	United States Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION FORM		RECEIVED MAR 07 2008
1. Reason for Submittal and Status of Information Supplied (see instructions on page 9) MARK ALL BOX(ES) THAT APPLY	A. Reason for Submittal: <input type="checkbox"/> To provide initial notification (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities) <input type="checkbox"/> To provide subsequent notification (to update site identification information) <input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application <input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____) <input checked="" type="checkbox"/> As a component of the Hazardous Waste Report		
2. Site EPA ID Number (see instructions on page 10)	EPA ID Number: FLD984167791		
3. Site Name (see instructions on page 10)	Name: SAFETY-KLEEN SYSTEMS INC		
4. Site Location Information (see instructions on page 10)	Street Address: 5610 ALPHA DRIVE		
	City, Town, or Village: BOYNTON BEACH	State: FL	
	County Name: PALM BEACH	Zip Code: 33426-	
5. Site Land Type (see instructions on page 10)	Site Land Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		
6. North American Industry Classification System (NAICS) Code(s) for the Site (see instructions on page 10)	A. 562112	B.	
	C.	D.	
7. Site Mailing Address (see instructions on page 11)	Street or P.O. Box: 1502 E VILLA STREET 2ND FLOOR EHS		
	City, Town, or Village: ELGIN		State: IL
	Country:		Zip Code: 60120-
8. Site Contact Person (see instructions on page 11)	First Name: JEFF	MI:	Last Name: CURTIS
	Phone Number: (561) 738-3026 Extension:		Email: JEFF.CURTIS@SAFETY-KLEEN.COM
9. Legal Owner and Operator of the Site (see instructions on pages 11 and 12)	A. Name of Site's Operator: SAFETY-KLEEN SYSTEMS INC		Date Became Operator (mm/dd/yyyy): 10/10/1989
	Operator Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		
	B. Name of Site's Legal Owner: SAFETY-KLEEN SYSTEMS INC		Date Became Owner (mm/dd/yyyy): 10/10/1989
	Owner Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		

**9. Legal Owner
(Continued)
Address**

Street or P.O. Box: 5400 LEGACY DRIVE CLUSTER II BLDG 3

City, Town, or Village: PLANO

State: TX

Zip Code: 75024-

Country:

10. Type of Regulated Waste Activity

Mark 'X' in the appropriate boxes. Mark "Yes" or "No" for each choice. (See instructions on pages 13 to 16)

A. Hazardous Waste Activities

Complete all parts for Items 1 through 6.

For Items 2 through 6, check all that apply:

Y ☒ N ☐ **1. Generator of Hazardous Waste**

If "Yes" choose only one of the following - a, b, or c.

☒ a. LQG: Greater than 1,000 kg/mo (2,200 lbs.)
of non-acute hazardous waste; or☐ b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs.)
of non-acute hazardous waste; or☐ c. CESQG: Less than 100 kg/mo
of non-acute hazardous wasteIn addition, indicate other generator activities
(check all that apply)Y ☐ N ☒ d. United States Importer of Hazardous WasteY ☐ N ☒ e. Mixed Waste (hazardous and radioactive) GeneratorY ☒ N ☐ **2. Transporter of Hazardous Waste**Y ☒ N ☐ **3. Treater, Storer, or Disposer of
Hazardous Waste (at your site) Note:**
A hazardous waste permit is required for
this activityY ☐ N ☒ **4. Recycler of Hazardous Waste (at your site)**Note A hazardous waste permit may be required
for this activity.**5. Exempt Boiler and/or Industrial Furnace**Y ☐ N ☒ a Small Quantity On-site Burner ExemptionY ☐ N ☒ b. Smelting, Melting, Refining Furnace ExemptionY ☐ N ☒ **6. Underground Injection Control****B. Universal Waste Activities**1 Large Quantity Handler of Universal Waste (accumulate 5,000 KG or more)
[refer to your State regulations to determine what is regulated]. Indicate
types of universal waste generated and/or accumulated (Managed)
at your site. (check all boxes that apply)Manageda Batteries ☐b. Pesticides ☐c. Thermostats ☐d. Lamps ☐e. Other UNSPECIFIED ☐f. Other MERCURY CONTAINING DEVICE ☐g. Other _____ ☐Y ☐ N ☒ **2. Destination Facility for Universal Waste**

Note. A hazardous waste permit may be required for this activity.

C. Used Oil Activities - Mark all boxes that applyY ☒ N ☐ **1. Used Oil Transporter**

If "Yes", mark each that applies.

☒ a. Transporter☒ b. Transfer FacilityY ☐ N ☒ **2. Used Oil Processor and/or Re-refiner -**

If "Yes", mark each that applies.

☐ a. Processor☐ b. Re-refinerY ☐ N ☒ **3. Off-Specification Used Oil Burner**Y ☐ N ☒ **4. Used Oil Fuel Marketer**

If "Yes", mark each that applies.

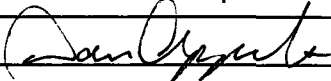
☐ a. Marketer Who Directs Shipment of Off-Specification
Used Oil to Off-Specification Used Oil Burner☐ b. Marketer Who First Claims the Used Oil Meets the
Specifications

A. Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.

D001	D004	D005	D006	D007	D008	D009
D010	D011	D018	D019	D021	D022	D023
D024	D025	D026	D027	D028	D029	D030
D032	D033	D034	D035	D036	D037	D038
D039	D040	D041	D042	D043	F002	F003
F005						

[illegible]

13. 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. **(see instructions on page 17)**

Signature of owner, operator, or an authorized representative	Name and Official Title (type or print)	D. Date Signed (mm-dd-yyyy)
	DAN APPELT DIR COMPLIANCE	02/28/2008

.ERROR LISTING FOR SAFETY-KLEEN SYSTEMS INC
04/02/08

RUN ON

. ERRORS are listed by form AND page number
. A form heading does not necessarily indicate ERRORS.
. FORM GM ERRORS LIST

page#	error message
00003	CHECK: G105 REPORT YEAR GENERATED QTY = 0
00009	CHECK: G105 REPORT YEAR GENERATED QTY = 0
00010	CHECK: G105 REPORT YEAR GENERATED QTY = 0
00011	CHECK: G105 REPORT YEAR GENERATED QTY = 0
00006	CHECK: 206 TONS SHIPPED TO SCD077995488
00007	CHECK: 452 TONS SHIPPED TO SCD077995488

. FORM WR ERROR LIST

page#	message
00192-1	WARN - R111 WASTE RECEIVED FROM BAD EPA ID FORMAT FLO000053884

. FORM IC ERROR LIST

CHECK: NO G3 FILE FOUND - NO STATE WASTE CODES?
CHECK: NO G5 FILE FOUND - NO ONSITE TREATMENT OR DISPOSAL?
CHECK: NO R3 FILE FOUND - NO STATE WASTE CODES?

. FORM GM DETAILS LIST

. FORM OI ERROR LIST

. REPORT TOTALS FOR SAFETY-KLEEN SYSTEMS INC

IN TONS

TOTAL GENERATED (GM)	=	224.53
TOTAL RECEIVED (WR)	=	630.35
TOTAL RECEIVED (GM)	=	630.82
TOTAL SHIPPED (GM)	=	868.07
TOTAL TREATED (GM)	=	0.00
TOTAL UI, POTW, & NPDES	=	0.00
TOTAL RCRA GENERATION	=	224.53

RCRA WASTE TONS GENERATED ON-SITE BY WASTE FORM (TYPE)

FORM CODE	TONS GENERATED
W002 Contaminated debris paper, clothing, rags, wood,	31 34
W203 Concentrated non-halogenated (E G non-chlorinated	193 14
w202 Paint, ink, lacquer, or varnish (fluid, not dry or	0.05

. RCRA WASTE TONS GENERATED ON-SITE BY WASTE SOURCE

SOURCE CODE	TONS GENERATED
G09 Other production or service-related processes(wher	193.14
G11 Discarding off-specification or out-of-date chemic	0.05
G19 Other one-time or intermittent processes(specify i	31.34
G61 Hazardous waste received from off-site for storage	0.00

. RCRA WASTE TONS GENERATED ON-SITE BY WASTE ONSITE SYSTEM

SYSTEM CODE	TONS TREATED
TONS RESIDUAL	
H010 Metals recovery including retorting, smelting, che	0.1038
0.0000	
! Did you have any RCRA residuals reported on a separate form GM?	
H020 Solvents recovery (distillation, extraction, etc)	0.1154
0.0000	
! Did you have any RCRA residuals reported on a separate form GM?	

. RCRA WASTE TONS SHIPPED TO OFFSITE TREATMENT SYSTEMS

SYSTEM	TONS SHIPPED
H020 Solvents recovery (distillation, extraction, etc)	836.54
H061 Fuel blending prior to energy recovery at another	31.51
H141 Storage, bulking, and/or transfer off-site - no tr	0.02