

IMAGE QUALITY

AS YOU VIEW THE FOLLOWING
DOCUMENT, PLEASE NOTE THAT
PORTIONS OF THE ORIGINAL WERE OF
POOR QUALITY

HN

McKesson

November 11, 1983

D.E.R.

NOV 14 1983

**SOUTHWEST DISTRICT
TAMPA**

Richard J. Powell
Environmental Permitting
State of Florida
Department of Environmental Regulation
7601 Highway 301 North
Tampa, Florida 33610

Dear Dick:

I have attached the various items from our Tampa file that would be of interest to you. You can see the sequence-- Notification, Form 1, Form 3, Inspection--leading to our assumption of interim status. Unfortunately very little business developed in 1980-1982 because of the general business malaise, the distance from Tampa to our T/S/D/R facility in New Castle, Ky., and the fact that we only reclaim solvents and do not offer disposal services.

Where the confusion arose is our request to withdraw from the treatment category (6/10/81 Ltr.) only. This function was excluded from regulation by amendment and our simple pH adjustment and neutralization system became exempt.

We have consistently sought to retain our interim status as a "storer", both to complement our transporter permits and also to support our recycling division, even though we would merely act as a transfer agent for off-site generators of containerized, reclaimable solvent streams.

Now that business is improving and my management is aware of our need to "get something going" concerning Tampa, we would certainly appreciate your understanding of our situation and help in this regard.

Sincerely,

Hal Brown

Hal Brown

HB/jc

Attachments

cc: DMB CCH
DLE DEP
JHF DHS



Serving the Nation
Since 1833

McKesson

November 7, 1983

Mr. Lloyd Woosley, P.E.
U. S. Environmental Protection Agency
Region IV, 345 Courtland Street
Atlanta, Georgia 30365

Dear Lloyd:

Thank you for your note of 11/2/83. The Federal Register NPR (4/4/83) you sent was interesting, but, unfortunately, will not impact us significantly. We are still looking and hoping for proposed legislation that will:

1. Recognize, define and legitimize our function as third party transfer/staging agents between off-site generators of recyclable solvents (as raw materials) and our T/S/D/R facilities that reclaim these high-quality wastes.
2. In recognition of our legitimate and valuable recovery function, grant some substantial relief from the onerous, time-consuming, and duplicative requirements of full compliance with the Part B application requirements.

In fact what you will see from us, if there is no legislative relief, is the same Part B (in various revisions), with only the names, places and dates changed.

Once we submit our revised Kingsport application, later this month, perhaps we can get the Regional Administrator involved in the review process. Once you understand the similarity of function, management, stability, fiscal responsibility, and internal operating rules and procedures involved in our facility/regional/national hazardous waste management programs, it may then be possible for Region IV to grant us some administrative relief on future Part B applications. We would be eager to continue to supply that information unique to any individual facility, (primarily Sec. B), such as maps, location layout, management, emergency response, and hazard prevention equipment/contacts, etc. However, the text of Sections C, D, F, G, H, & I will remain essentially unchanged except for local and special information in all our future applications.



Serving the Nation
Since 1833

Mr. Lloyd Woosley P.E.
Page 2
November 7, 1983

On a related subject, I have attached a copy of my 6/14/83 letter to Mr. Scarbrough which remains unanswered. The copy of the notification you sent me was for our former location in Jacksonville, Fl., and not the Part A sent with my 14 June letter. You may have us listed as "Moreland-McKesson" Company as went through a name change in 1981.

I hope this information will be helpful to you.

Sincerely,

MCKESSON CHEMICAL COMPANY

Hal

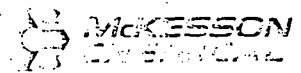
Hal Brown
HB/jc
Attachment

cc: D. Black
D. Eisner
J. Foster
D. Simpson

Darwin

McKesson-McKesson
Chemical Group
McKesson Chemical Company
Post Office Drawer 2150
Spartanburg, South Carolina 29304
803-583-8451

June 14, 1983



James A. Scarbrough, Chief
Residuals Management Branch
U. S. Environmental Protection Agency
Region IV, 345 Courtland Street
Atlanta, Georgia 30365

Re: Applications for Interim Status Approval
as a Hazardous Waste Storer

Dear Mr. Scarbrough:

We are requesting interim status approval for hazardous waste storage for our branch locations in Region IV as follows:

Atlanta, Ga.	GAD072472707
Augusta, Ga.	GAD000828269
Charlotte, N. C.	NCD024481848
Greensboro, N. C.	NCD089903983
Mobile, Al.	ALD000737478
Spartanburg, S.C.	SCD008941619
Tampa, Fl.	FLD020985727

Our branches in Chattanooga, Kingsport, & Nashville, Tennessee will be subject to an independent series of actions since Tennessee is operating under Phase II and we have already achieved interim status at Kingsport.

Please note that our Jacksonville, Fl. facility (FLD000737429) should be included in the group of branches above, but since we have moved its location we will be required to submit a corrected Part A application. (attached) Also, we have closed our Birmingham, Al. facility (ALD095697447).

As you may already know, our Company is the largest private distributor of chemicals in the U.S.A. We purchased a multi-plant waste recycling company two years ago, so we can now provide complete distribution services for virgin and recycled fluorinated, chlorinated, oxygenated and petroleum solvents from the generic groups F001, F002, F003, and F005.

Our operating rules for the profitable servicing of hazardous waste accounts restricts us to handling only containerized, high-grade waste streams. We solicit only solvents from the four main solvent groups mentioned above and have invested heavily in analytical lab equipment to pre-screen and qualify prospective waste streams to eliminate those with difficult, toxic impurities which would not be profitable for us to handle. This includes all constituents listed on the D, K and P Groups listed in Part 261.

As a matter of practical consequence we are acting strictly as a transfer agent for these hazardous waste transactions and need interim status authorization only because:

(1) The overwhelming majority of waste streams we regularly handle involve chemicals which are unregulated in their virgin state and only become subject to regulation when they are lightly contaminated with cutting oils, grease, paint solids, etc. which do not significantly alter their original chemical properties. If this were not so, they would be of no commercial value or interest to us.

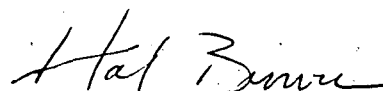
(2) Point (1) notwithstanding, we still would not need interim status authorization if it were not for the fact that we (our branches and the regional office) cannot in all cases directly control the trucking operations involved in these hazardous waste transactions. These are handled by and large by our independent recycling operation and occasionally they would not be able to move the drums to our recycling facilities within the prescribed storage time limits dictated by our transporter permits.

I will also be applying to the individual states concerned to petition their participation in and approval of our interim status authorizations. Since we have filed Part A applications for the facilities mentioned above in August of 1980, you and the state agencies concerned already have the factual information needed for our current requests.

If I can provide you with any additional information required for the completion of this process, please contact me at your earliest convenience.

Sincerely,

MCKESSON CHEMICAL COMPANY



Hal Brown
Regional Warehousing Manager

HB/jc
Attachment
(Rev. Part A-Jacksonville, Fl.)
bcc: DLE

JHF
DHS

To
D. L. Eisner - HOC/27

Date
October 14, 1983

From
Hal Brown

Location/Tel.
Southeast Regional Office
(803) 583-8481

M-Kesson

Intra Company
Correspondence

Subject
Status of RCRA Part B
Permitting TD 84097

Copies To
D. M. Black
J. H. Foster
D. H. Simpson

Two points of interest to Southeast Region:

1. Kingsport was omitted. This application should be listed either under paragraph 5--Applications Submitted and Branches Visited, or paragraph 6--Application Submitted and No Further Activity.

We have not heard from EPA Region IV in more than a year, nor from Tennessee DWSM in more than ten months on our application, so I can understand your omission of our "Forgotten Application".

2. Tampa's due date is not established, yet, because it is a voluntary application. If we do not set a date soon, it may never be processed. I understand that Don will be real busy for the next four months on the existing list, but may I suggest an April 1, 1984 date?



Hal Brown
HECB:tw

Date _____

September 30, 1983

Copies to

D. A. Davis
R. R. Powell
W. R. Landry

m-plc for
Nesler
Brown
Kerbeland
Wetteland
Butler

Don't mind this
sorry late
I'll circulate
Dr. Don's
future
monthly
reports
near the
first of
the
month.

9

5. Omaha, called for Dec 9

- A. Region V of the USEPA has notified us that permits for Cincinnati, Columbus, and Cleveland will issue today.
- B. On the other hand, the Ohio EPA has notified us informally that the office of Ohio's Attorney General has requested additional information on the applications of these branches. The OEPA is somewhat stunned, particularly in light of the Federal permits, and considers the request "totally irrelevant". Some delay will ensue.
- C. New Jersey has issued the Woodbridge draft permit with the public hearing scheduled for October 31.
- D. Part B's filed for Altoona with both state and USEPA (new facility - not called).
- E. Part B for Pittsburgh filed with USEPA in order to provide for expanded storage capacity (had been called by Pennsylvania).
- F. Other applications in process:

1. Portland, called for November 14.
2. Philadelphia, called for December 1.
3. Albuquerque, called for February 1.
4. Chattanooga, called for February 29.

G. Turmoil at Hummelstown continues. The PADER is taking it in stride and has tentatively scheduled standard public hearing during period of November 16-23.

September 30, 1983

ACTIVITY REPORT - SEPTEMBER, 1983

Page two.

II. Other Permitting Activity

- A. New Jersey Pollutant Discharge Elimination System permit application filed for Woodbridge. Securing this permit is a requisite for Woodbridge's HW storage permit.
- B. Application for kosher labelling of sorbitol solution at Woodbridge filed.
- C. Hazardous waste and hazardous material transport permit filing for Boston and Albany.
- D. New Jersey has issued a permit for storage of toluene in bulk at Woodbridge.

III. Miscellaneous

- A. Bids for incineration of distress Triton X-202 at Woodbridge received from SCA and Ross Incineration and submitted to Region.
- B. Facility of marketer of distress chemicals visited and working arrangement established for ER.



Donald M. Black

DMB:dc



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION IV

345 COURTLAND STREET
ATLANTA, GEORGIA 30365

JUL 01 1982

4AW-RM

Mr. Julian H. Foster
Regional Operations Manager
Foremost-McKesson Chemical Group
McKesson Chemical Company
Post Office Drawer 2169
Spartanburg, South Carolina 29304

Re: Moreland-McKesson, EPA I.D. #FLD020985727

Dear Mr. Foster:

In response to your letter dated June 3, 1982, this is to confirm that the referenced facility is still carried in our records as a potential generator and transporter of hazardous waste under the same I.D. #FLD020985727.

If there are any questions pertaining to this, please contact this office.

Sincerely yours,

A handwritten signature in cursive script, appearing to read "James H. Scarbrough".

James H. Scarbrough, Chief
Residuals Management Branch

June 3, 1982

U. S. Environmental Protection Agency
Region IV
345 Courtland Street
Atlanta, Georgia 30365

Attention: James H. Scarbrough, Chief
Residuals Management Branch

Re: EPA ID# FLD 020 985 727
Your letter of May 11, 1982 - 4AW-RM

Dear Mr. Scarbrough:

In reply to the above letter, we wish to emphasize that we are to retain our EPA Registration #FLD 020 985 727 as a potential generator and transporter of hazardous waste. Please acknowledge this status.

Yours truly,

MCKESSON CHEMICAL COMPANY

Julian H. Foster
Regional Operations Manager

JHF/jc



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION IV

345 COURTLAND STREET
ATLANTA, GEORGIA 30365

MAY 11 1982

4AW-RM

Mr. Julian H. Foster
Regional Operations Manager
Foremost-Mckesson
Chemical Group
McKesson Chemical Company
P. O. Drawer 2169
Spartanburg, SC 29304

Re: EPA I. D. Number FLD 020 985 727

Dear Mr. Foster:

This letter acknowledges receipt of your request to be removed from our hazardous waste activity list. Based on the information furnished by you, EPA agrees that the hazardous waste regulations apparently do not apply to your facility, therefore, you will be classified as a non-handler of hazardous waste.

EPA intends to retain your notification file within our data management system, so that, in the future, should the need arise, an EPA identification number will be available to you.

You should be aware that the state in which your facility is located has its own rules and regulations concerning hazardous waste. You should contact that office to insure that you are in compliance with their regulations.

If you require further information, please contact Nell Keever of my staff at (404)881-3446.

Sincerely yours,

A handwritten signature in cursive script, appearing to read "James H. Scarbrough".

James H. Scarbrough, Chief
Residuals Management Branch

cc: Florida Department of Environmental Regulations

April 19, 1982

U. S. Environmental Protection Agency
Region IV
345 Courtland Street
Atlanta, Georgia 30365

Attention: James H. Scarbrough, Chief
Residuals Management Branch

Dear Mr. Scarbrough:

Re: McKesson Chemical Co., Tampa, Fla. -EPA #FLD020985727

We wish to emphasize that we are to retain our EPA Registration #FLD 020985727, as a potential generator of hazardous waste. Please acknowledge this status.

Yours truly,

MCKESSON CHEMICAL COMPANY

Julian H. Foster
Regional Operations Manager

JHF/jc

D.E.R.

NOV 14 1983

SOUTHWEST DISTRICT
TAMPA



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION IV

345 COURTLAND STREET
ATLANTA, GEORGIA 30365

APR 12 1982

REF: 4AW-RM

Mr. J. H. Foster
Regional Operations Manager
Moreland McKesson Chemical Company
Chemical Group
Drawer 2169
Spartanburg, SC 29304

Re: McKesson Chemical Co., Tampa, FL - EPA #FLD 020 985 727

Gentlemen:

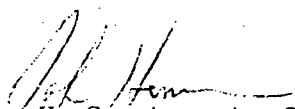
This letter is to acknowledge receipt of your request for withdrawal of your application for a permit under the Resource Conservation and Recovery Act (RCRA), as amended. Your letter indicated that you no longer treat, store, or dispose of hazardous wastes. Therefore, your application is considered withdrawn, and your file has been inactivated.

This letter should not be construed as concurrence with your determination that the Federal regulations are not applicable to your facility.

However, based on your voluntary request for removal from our list of permit applicants, your interim status under §3005(e) of the Act has been terminated. Consequently, if we determine upon subsequent inspection that your facility is treating, storing, or disposing of hazardous waste without a permit (or interim status), you will be subject to enforcement action under §3008 of the Act.

If you wish to reconsider your request for withdrawal, please advise us within the next ten days.

Sincerely yours,


James H. Scarbrough, Chief
Residuals Management Branch

CC: FL Department of Environmental Regulations

Ref. - - -
Reply - We wish to emphasize that we are to retain our EPA
Registration # _____, as a potential generator
of hazardous waste. Please acknowledge this status.

November 23, 1981

Mr. Paul C. Keith
United States Environmental Protection Agency
Region IV
345 Courtland Street
Atlanta, Georgia 30365

Dear Mr. Keith:

As we discussed previously, we should like to request the addition of transporter registration for our various branches listed below that are now permitted as potential generators of hazardous waste.

We have various customers who are asking us to pick up solvents from them for recycling, and we should like to be registered as transporters of hazardous waste so that we might perform this service. Please advise if there is anything further that we need to do to effect this registration. The locations and I. D. numbers are:

Richmond, Va.	VAT000619973
Greensboro, N. C.	NCD089903983
Charlotte, N. C.	NCD024481848
Spartanburg, S.C.	SCD008941619
Kingsport, Tenn.	TND000822973
Chattanooga, Tenn.	TND000737445
Nashville, Tenn.	TND000737437
Atlanta, Ga.	GAD072472707
Augusta, Ga.	GAD000828269
Mobile, Ala.	ALD000737478
Tampa, Fla.	FLD020985727

Yours very truly,

Julian H. Foster
Regional Operations Manager

JHF/jc

EFF. 10/1/81

Please complete only the ONE of the three sections below which applies to your status as a hazardous waste generator in Florida:

I. I hereby certify that the waste generated by the following facility does not meet the definition of a hazardous waste as defined in Chapter 17-30, Florida Administrative Code, and is therefore not subject to the tax levied on generators of hazardous waste in Florida. I am aware that if at any time the waste generated at the referenced facility meets the criteria for a hazardous waste, the generator will be subject to the hazardous waste tax as mandated in Chapter 208, Florida Statutes, and must notify the Department of such a change.

Foremost - McKesson Inc.

Owner's Name

(1) Box 498A, Tampa, Fla. 33619

Box 37242, Jacksonville, Fla. 32205

(-)Business Address

(1) Hwy 41A -Route 3, Tampa, Fla. 33619

(7) 924 Lane Avenue, Jacksonville, Fla. 32205

(4) Mailing Address

M. Jozef - Regional Opns. Mgr.
Owner's Signature or
Authorized Representative

We registered with the EPA as potential generators only. Our business is chemical distribution, and there is occasionally a possibility of an accidental spill, drum breakage, etc. which might result in some hazardous waste, and which might require an EPA no. for proper disposal. Thus we elected to apply for "stand-by" type of registration as potential generators.

June 10, 1981

Mr. Paul Keith
EPA Region IV
RCRA Activities
345 Courtland Street, N. E.
Atlanta, Georgia 30365

Dear Mr. Keith:

Per our conversation, please withdraw our application for our location in Tampa, Florida as submitted on EPA Form 3. (face copy attached) The original application was for treatment facility which is simple pH adjustment and neutralization system that we have to adjust wastewater before discharge to POTW.

As subject facility was exempt from necessity of registration by an amendment in the Federal Register on or about November 19, 1980, we should like to remove this simple pH adjustment facility from registration and withdraw our application from same.

Yours very truly,

MCKESSON CHEMICAL COMPANY

J. H. Foster
Regional Operations Manager

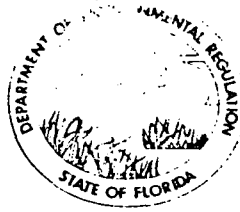
JHF/jc
Attachment

*File
Fla. RCRA*

DEPARTMENT OF ENVIRONMENTAL REGULATION

SOUTHWEST DISTRICT

7601 HIGHWAY 301 NORTH
TAMPA, FLORIDA 33610



BOB GRAHAM
GOVERNOR

JACOB D. VARN
SECRETARY

WILLIAM K. HENNESSEY
DISTRICT MANAGER

June 8, 1981

Mr. Emory N. Thomas
Tampa Branch Manager
Moreland McKesson Co.
6051 Highway 41 A South
Tampa, FL 33619

Dear Mr. Thomas:

Thank you for your helpfulness in touring the Moreland McKesson plant. Attached for your information is a copy of the appropriate checklist that will be forwarded to Tallahassee for their consideration.

If you have any further questions, please do not hesitate to call me at 813/985-7402.

Sincerely,

Phyllis Jones

Phyllis Jones

PJ/bc

cc Ed + Sullivan

EPA I.D. #
FLD 020985727

GENERATORS CHECKLIST

1. Check manifest

- a. identification (I.D. code, name, address, date)
- b. waste information (shipping description, hazard class, quantity and unit)
- c. emergency information (immediate response information, special handling instructions, phone no.)
- d. certification: This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the EPA."

Moreland McKesson
6051 Hwy 41A South
Tampa, FL 33619
after neutralization,
goes to city sewer

yes

N/A

2. Check containers

- a. improper construction
- b. leaks or corrosion
- c. heat generation from incompatible wastes

no

no

no

3. Labeling practices

- a. DOT shipping description
- b. Label saying: HAZARDOUS WASTE - Federal Law Prohibits Improper Disposal. If found, contact the nearest police or public safety authority or the U.S. Environmental Protection Agency.

N/A

Generator's Name and Address _____

Manifest Document Number _____

N/A

N/A

4. Placards for transport

5. Check accumulation time of wastes:

a. check records and dates

ok

b. check containers

ok

6. Check contingency plan

ok

7. Recordkeeping practices:

a. manifests

N/A

b. annual reports

-

c. exception reports

-

d. test results

yes

8. International shipments

No

9. Permit information: NONE

a. List all applicable permits held by the generator:

NPDES Permit

SPCC Plan

State Permit (Specify) _____

Air Permits

Local Permit

RCRA Disposer

RCRA Storer

RCRA Treater

Other (Specify) PERMIT NO. 1039-5818

expired
Nov 11 1982

b. In Compliance Yes No Unknown with respect to: _____

Regulation Name/#

10. Past regulatory actions:

None

Yes

If yes, summarize: _____

This checklist
covers injection
checklist.

FIGURE 11

GENERAL SITE INSPECTION CHECKLIST

EPA I.D.#
FLD 020985727

1. Site Identification:

- a. site name Moreland McKesson Company
- b. street (or other identifier) 6051 Highway 41A South
- c. city, state, zip Tampa FL 33619
- d. county name Hillsborough
- e. owner/operator Emory Thomas
- f. telephone ⁸¹³ 677-8414
(if known)
- ☐ Federal ☒ State ☐ County
☐ Municipal ☒ Private ☐ Unknown
- g. site description _____

2. Characterization of site activity:

- a. check off the appropriate activities below:

STORER

Pile _____
Surface Impoundment _____
Drums _____
Tank, Above Ground _____
Tank, Below Ground _____
Other _____

TREATER →

Adjust pH
Filtration _____
Incineration _____
Thermal Treatment _____
Volume Reduction _____
Recycling/Recovery _____
Chem/Phys/Bio Treatment _____
Waste Oil _____
Reprocessing _____
Solvent Recovery _____
Other _____

DISPOSER

Landfill _____
Land Treatment _____
Surface Impoundment _____
Incineration _____
Other Sewer _____

- b. specify details of site activities as needed:
- _____

Note: This form is undergoing Agency review. A final form will be distributed at a later date, accompanied by a separate transmittal notice.

Actions Taken or Planned

3. Permit information:

a. List all applicable permits held by the site:

NPDES Permit SPCC Plan State Permit (Specify) _____

Air Permits Local Permit RCRA Disposer

RCRA Storer RCRA Treater

Other (Specify) DER permit No. I 029 - 5818 expired Nov 1, 1982

In Compliance Yes No Unknown with respect to: _____
Regulation Name/#

4. Past regulatory actions:

None

Yes If yes, summarize: _____

5. Inspection activity (past or on-going):

Date of
Past
Action

Performed
by
EPA/State

Describe:

None

Yes -- Specify: _____

6. Remedial activity (past or on-going):

None

Yes -- Specify: _____

General Site Inspection - Continued

General Facility Standards

7. Regional notices to RA present:

- a. foreign shipments
- b. new owner/operator

Yes

No

()

(X)

()

(X)

8. General Waste Analysis Plan must include:

- a. test methods
- b. sampling method
- c. review or repeat of analysis

Yes

No

(X)

(X)

(X)

(X)

(X)

(X)

9. Adequate security:

- a. 24 hour surveillance system
- b. artificial or natural barrier around facility
- c. means to control entry
- d. danger sign(s) at entrance(s)

guard system at night

perimeter

yes

no yes

265.15 10. Inspection requirements must include:

- a. malfunction
- b. operator error
- c. discharges
- (d.) inspection schedule
- e. safety, emergency equipment
- f. security devices
- g. operating and structural equipment
- (h.) inspection log

yes - daily

yes

yes

no

yes

yes

no

11. Personnel training records:

- a. job titles

yes

General Site Inspection - Continued

- b. description of training
- c. records of training
- 12. Requirements for ignitable, reactive or incompatible wastes:
 - a. handling
 - b. no smoking signs
 - c. separation and confinement
 - d. check waste containers

ok
yes
N/A
yes
N/A
ok

Preparedness and Prevention

13. Maintenance and operation of facility:

- a. evidence of fire, explosion or contamination of the environment

No

14. Required equipment:

- a. alarm system
- b. telephone or 2-way radio
- c. portable fire extinguishers, fire control, spill control equipment and decontamination equipment
- d. water of adequate volume for hoses, sprinklers or water spray system

yes
telephone
yes
yes

15. Testing and maintenance of equipment:

- a. testing and maintenance procedures
- b. condition of equipment

yes
ok
ok

16. Required aisle space

17. Arrangements with local authorities (operating record)

Gibson 11/01
Fire Dept.

General Site Inspection - Continued

Contingency Plan and Emergency Procedures

18. Content of contingency plan

yes

19. Copies of contingency plan

yes

20. Emergency coordinator:

- a. identify emergency coordinator
- b. ensure qualifications of coordinator

*mainly because
because
checking*

*Emerg. Response
Plan. All
managers are trained
ok
ok.*

21. Emergency procedures

Manifest System, Recordkeeping, and Reporting

N/A

*The companies
truck takes
to the city sewer*

22. Use of manifest system:

- a. procedures for processing each manifest
- b. records of past shipments

23. Manifest discrepancies (methods of detection)

24. Operating record:

- a. presence
- b. maintenance

25. Availability, retention and disposition of records

26. Annual report

27. Unmanifested waste report:

- a. procedures for filling out report
- b. compliance file for reports

N/A

*Shipping
Paper
City of
Tampa
Hochstetler
No drivers
Signature
& sign.
saying
was got
to city.*

General Site Inspection - Continued

28. Additional reports:

- a. releases, fires and explosions
- b. groundwater contamination
- c. facility closure

No

N/A

OK / IN
FREE PLOT

Groundwater Monitoring

N/A

29. Applicability:

- a. check applicability
- b. operation and maintenance of a system
- c. waiver of requirement

30. Groundwater monitoring system:

- a. presence
- b. number and placement of wells
- c. maintenance of wells
- d. well integrity

31. Sampling and analysis:

- a. sampling and analysis plan
- b. records of sampling and analysis

32. Preparation, evaluation and response:

- a. outline of water quality assessment program
- b. adequacy of outline

33. Recordkeeping and reporting:

- a. groundwater analysis records
- b. reports of groundwater monitoring information to Regional Administrator
- c. annual groundwater quality reports

General Site Inspection - Continued

34. Closure and post closure:

- a. closure plan
265.111 b. adequacy of plan

} IN
FIRE
PLAN

yes
~~NO~~ ^{the} ~~the~~ closure
plan is just ~~the~~ same
the fire plan, i.e., fire
escape procedures

265.113 35. Time for closure:

- a. 90 day closure requirements
b. six month closure requirements

N/A

36. Disposal or decontamination of equipment

N/A (N/A)

37. Certification of closure

NO (N/A)

38. Post closure care and use of property:

- a. post closure plan
b. period of post closure plan
c. plan and amendments approved

N/A

39. Notice to local land authority:

- a. survey plat including records of all waste types and quantities of waste
b. submitted to proper authorities

N/A

40. Notice in deed to property:

- a. proper notification to potential purchasers

Doesn't know

FIGURE 12
TANKS CHECKLIST

1. General operating requirements:

- a. compatibility of waste type and tank (ruptures, leaks, corrosion, etc.)
- b. uncovered tanks: at least 60 cm (2 feet) freeboard or
containment structure (e.g. dike or trench) or
drainage control system or
diversion structure (standby tank)
- c. Volume of tanks: volume of containment

2. Waste analysis and trial test procedures for and records of waste analysis and trial tests

3. Inspections: maintenance and inspection of:

- a. discharge control equipment
- b. monitoring equipment (pressure and temperature gauges)
- c. level of waste in tank
- d. tank construction materials
- e. area immediately surrounding confinement structures

4. Closure plan present at site

5. Ignitable or reactive waste properly stored

6. Incompatible wastes properly stored

7. Evidence of corrosion, leakage at seams, wet spots, dead vegetation

Neutralization TANK 30,000
The pH is Adjusted to 8, then shipped by Company truck to Hooker's Point Sewage Treatment Plant

Rainy Season - tank is pumped every 2 wks. Dry season - twice mon

YES

N/A

Concrete tank

NO

NO

30,000

• Thornton
yes LABS
pH 8-8.2

NO

Visual

2' above pipe

Concrete

NO

Yes

(4)

No

()

yes

yes


NONE

Note: This form is undergoing Agency review. A final form will be distributed at a later date, accompanied by a separate transmittal notice.

Print or type in the unshaded areas only
(If in areas spaced for elite type, i.e., 12 characters/line)

inches).

Form Approved OMB No. 158-S80004

FORM 3		U.S. ENVIRONMENTAL PROTECTION AGENCY HAZARDOUS WASTE PERMIT APPLICATION Consolidated Permits Program (This information is required under Section 3005 of RCRA.)
-----------	---	---

I. EPA I.D. NUMBER													
5	4	3	2	1	0	9	8	5	7	2	7	T/A	C
F	F	L	D	0	2	0	9	8	5	7	2	7	1

FOR OFFICIAL USE ONLY

APPLICATION APPROVED	DATE RECEIVED (yr, mo., & day)
23	24

COMMENTS

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below (mark one box only) to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION (place an "X" below and provide the appropriate date)

☒ 1. EXISTING FACILITY (See instructions for definition of "existing" facility. Complete item below.)

C	YR.	MO.	DAY	FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED (use the boxes to the left)
8	77	02	21	

☐ 2. NEW FACILITY (Complete item below.)

YR.	MO.	DAY	FOR NEW FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR IS EXPECTED TO BEGIN
73	74	75	76

B. REVISED APPLICATION (place an "X" below and complete Item I above)

☐ 1. FACILITY HAS INTERIM STATUS☐ 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES - CODES AND DESIGN CAPACITIES

A. PROCESS CODE - Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process (including its design capacity) in the space provided on the form (Item III-C).

B. PROCESS DESIGN CAPACITY - For each code entered in column A enter the capacity of the process.

1. AMOUNT - Enter the amount.

2. UNIT OF MEASURE - For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY	PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:			Treatment:		
CONTAINER (barrel, drum, etc.)	S01	GALLONS OR LITERS	TANK	T01	GALLONS PER DAY OR LITERS PER DAY
TANK	S02	GALLONS OR LITERS	SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS	INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS	OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)	T04	GALLONS PER DAY OR LITERS PER DAY
Disposal:					
INJECTION WELL	D79	GALLONS OR LITERS			
LANDFILL	D80	ACRE-FEET (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER			
LAND APPLICATION	D81	ACRES OR HECTARES			
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY			
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS			
UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	G	LITERS PER DAY	V	ACRE-FEET	A
LITERS	L	TONS PER HOUR	D	HECTARE-METER	F
CUBIC YARDS	Y	METRIC TONS PER HOUR	W	ACRES	B
CUBIC METERS	C	GALLONS PER HOUR	E	HECTARES	Q
GALLONS PER DAY	U	LITERS PER HOUR	H		

EXAMPLE FOR COMPLETING ITEM III (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

C												
DUP												
T/A C												
1												
LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY		FOR OFFICIAL USE ONLY	LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY		FOR OFFICIAL USE ONLY			
		1. AMOUNT (specify)	2. UNIT OF MEASURE (enter code)				1. AMOUNT	2. UNIT OF MEASURE (enter code)				
X-1	S 0 2	600	G		5							
X-2	T 0 3	20	E		6							
1	S 0 2	200	U		7							
2					8							
3					9							
4					10							

Continued from the front.

III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS INCLUDE DESIGN CAPACITY.

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE
POUNDS	P
TONS	T

METRIC UNIT OF MEASURE	CODE
KILOGRAMS	K
METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES**1. PROCESS CODES:**

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

- Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
- In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
- Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARDOUS WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES	
				1. PROCESS CODES (enter)	2. PROCESS DESCRIPTION (If a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

NOTE: Photocopy this page before completing it

have more than 26 wastes to list.

Form Approved OMB No. 158-S80004

EPA I.D. NUMBER (enter from page 1)													FOR OFFICIAL USE ONLY																
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25					
W	F	L	D	0	2	0	9	8	5	7	2	7	W	DUP										2	DUP				
IV. DESCRIPTION OF HAZARDOUS WASTES (continued)																													
LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES																									
				1. PROCESS CODES (enter)																									
				2. PROCESS DESCRIPTION (if a code is not entered in D(1))																									
1	5002	230	T	Total wash water & surface water																									
2																													
3																													
4																													
5																													
6																													
7																													
8																													
9																													
10																													
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22																													
23																													
24																													
25																													
26																													

IV. DESCRIPTION OF HAZARDOUS WASTE
E. USE THIS SPACE TO LIST ADDITIONAL

S (continued)

PROCESS CODES FROM ITEM D(1) ON PAGE 1.

EPA I.D. NO. (enter from page 1)

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
F	L	D	0	2	0	9	8	5	7	2	7			

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)

LONGITUDE (degrees, minutes, & seconds)

2	7	5	2	0	3	4
55	56	57	58	59	60	61

0	8	2	2	3	0	0	5
72	73	74	75	76	77	78	79

VIII. FACILITY OWNER

- ☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER

2. PHONE NO. (area code & no.)

3. STREET OR P.O. BOX

4. CITY OR TOWN

5. ST.

6. ZIP CODE

IX. OWNER 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.

A. NAME (print or type)

W. D. Bain, Jr.,
Regional Vice-President

B. SIGNATURE

C. DATE SIGNED

11-18-80

X. OPERATOR CERTIFICATION

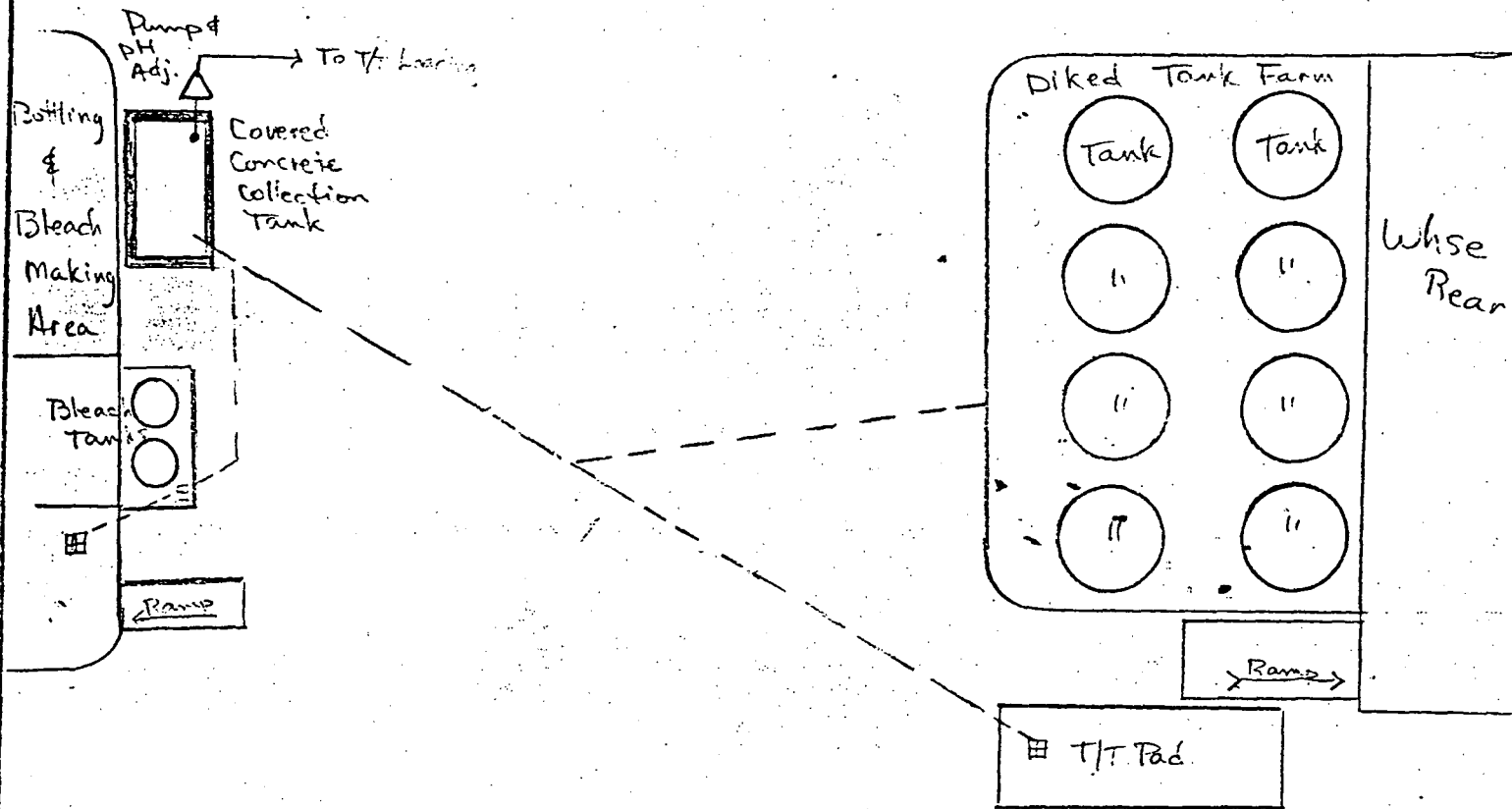
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

B. SIGNATURE

C. DATE SIGNED

ACTIVITY DRAWING (see page 4)



Surface Water &
Wash Water
Collection & pH
Adjustment System.

VI. PHOTOGRAPHS

Tampa, Fla.

[not received in time to include in 1st mailing deadline]

Please print or type in the unshaded areas only
(fill-in areas are spaced for elite type, i.e., 12 c/

ters/inch).

FORM
1
GENERAL



ENVIRONMENTAL PROTECTION AGENCY

GENERAL INFORMATION

Consolidated Permits Program
(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER

F FLD 020 985 727

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

PLEASE PLACE LABEL IN THIS SPACE

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	MARK 'X'			SPECIFIC QUESTIONS	MARK 'X'		
	YES	NO	FORM ATTACHED		YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		X		D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X			F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY

1 SKIP Moreland McKesson Company

IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)

B. PHONE (area code & no.)

2 Thomas, Emory Manager

8 1 3 677 8 4 1 4

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX

3 Route 3 Box 498A

B. CITY OR TOWN

C. STATE

D. ZIP CODE

4 Tampa

FL

33619

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER

5 6051 Highway 41A South

B. COUNTY NAME

Hillsborough

C. CITY OR TOWN

D. STATE

E. ZIP CODE

6 Tampa

FL

33619

CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)

A. FIRST				B. SECOND			
5	1	6	1	(specify)	7		(specify)
C. THIRD				D. FOURTH			
7				(specify)	7		(specify)

VIII. OPERATOR INFORMATION

A. NAME												B. Is the name listed in Item VIII-A also the owner?					
8 Moreland McKesson Company												<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO					
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)														D. PHONE (area code & no.)			
F - FEDERAL				M - PUBLIC (other than federal or state)				P (specify)		A		803		583		8481	
S - STATE				O - OTHER (specify)													
P - PRIVATE																	
E. STREET OR P.O. BOX																	
PO Box 2169																	
F. CITY OR TOWN										G. STATE		H. ZIP CODE		IX. INDIAN LAND			
B Spartanburg										SC		29304		Is the facility located on Indian lands?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)										D. PSD (Air Emissions from Proposed Sources)									
9 N										9 P /									
B. UIC (Underground Injection of Fluids)										E. OTHER (specify)									
9 U										9 I 029-5818 (specify) DER, Florida									
C. RCRA (Hazardous Wastes)										E. OTHER (specify)									
9 R										(specify)									

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

Surface water at this location is trapped in underground containment tanks where the pH is adjusted, if necessary, before the water is carried to the sewer system. To anticipate the possibility of an accidental spill which might result in trace quantities of a hazardous material being present in the containment system, we have elected to list this location as a treatment facility.

XIII. CERTIFICATION (see Instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the 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.

A. NAME & OFFICIAL TITLE (type or print)		B. SIGNATURE		C. DATE SIGNED	
W.D. Bain, Jr. Regional Vice President				11/13/80	

COMMENTS FOR OFFICIAL USE ONLY

I.D. - FOR OFFICIAL USE ONLY														
3														
W														
1	2											13	14	15

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
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
7	8	9	10	11	12
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

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
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
19	20	21	22	23	24
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
25	26	27	28	29	30
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

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. See attachment.

31	32	33	34	35	36
U 0 0 2	U 2 2 6	U 2 1 0	U 2 2 8	U 0 3 1	U 0 5 7
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
37	38	39	40	41	42
U 0 6 9	U 1 1 2	U 1 2 2	U 1 5 4	U 1 5 9	U 1 6 1
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
43	44	45	46	47	48
U 2 2 0	U 2 3 9				
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

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
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

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

G. N. Butter

NAME & OFFICIAL TITLE (type or print)

G. N. Butter, Technical Director
McKesson Chemical Company

DATE SIGNED

8-14-80

McKesson Chemical Company

Foremost-McKesson
Chemical Group
One Post Street
San Francisco, CA 94104
415 983 8300



To Whom It May Concern:

McKesson Chemical Company, which is an operating division of Foremost-McKesson, Inc., is a distributor of various chemical products for various suppliers of chemicals. It operates a large number of distribution facilities throughout the country, of which this is one. We stock an average of five-hundred (500) packaged chemical products at these locations. The products carried will vary from location to location and from time to time. It is anticipated that some or all of the products could at one time or another result in the generation of a hazardous waste and the amount generated could in one or more instances exceed the quantity limit for a small generator. Since ours is a distributing function it is impossible for us to be more specific at this time.

In addition, this particular unit is a repackager of certain chemical products which is expected to result in the generation of hazardous wastes. This is more particularly spelled out in the Notification submitted herewith.

D.E.R.

NOV 14 1983

SOUTHWEST DISTRICT
FBI

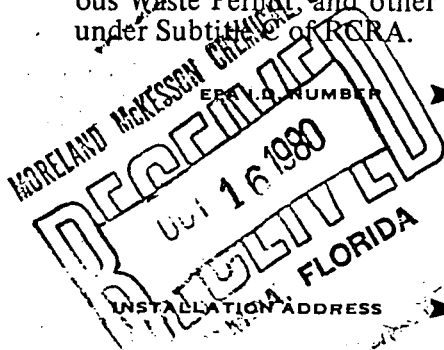
G. N. Butter
G. N. Butter
Technical Director
McKesson Chemical Company

GNB:ks
attachment (Form GSA No. 0246-EPA-OT)



ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

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 ID NUMBER
FLD0209P5727

MORELAND MCKESSON COMPANY
ROUTE 3 BOX 498A
TAMPA

FL 33619

INSTALLATION ADDRESS
6051 HIGHWAY 41A
TAMPA

FL 33619

EPA Form 8700-12A (4-80)



U.S. ENVIRONMENTAL PROTECTION AGENCY ACKNOWLEDGEMENT OF APPLICATION FOR A HAZARDOUS WASTE PERMIT

This is to acknowledge that the Environmental Protection Agency has received: (1) A notification pursuant to Section 3010 of the Resource Conservation and Recovery Act for the facility with the EPA Identification Number shown on the front of this postcard; and (2) Part A of a Hazardous Waste Permit Application for that facility, including a signed statement that the operation of the facility, or its construction, began prior to November 19, 1980. While the information provided by these submissions has not been fully reviewed for completeness or accuracy, EPA will accept this information as an **initial qualification** for interim status pursuant to Section 3005 of the Act. If after further review of this information, EPA determines that the owner or operator did not fulfill all the requirements for interim status, EPA may treat the owner or operator as not having qualified for interim status pursuant to that section and will advise the owner or operator of that determination. Facility owners and operators with interim status must comply with the standards set forth at 40 CFR Part 265 until a permit is issued. Interim status may be terminated if the owner or operator fails to furnish any additional information requested by EPA in order to process a permit application.

EPA Form 3510-3A (12-80)