

None
10-15-02
2282

MAIL THE COMPLETED FORM TO:

The Appropriate State or EPA Regional Office.

United States Environmental Protection Agency
RCRA SUBTITLE C SITE IDENTIFICATION FORM

1. Reason for Submittal (See instructions on page 23)

MARK CORRECT BOX(ES)

Reason for Submittal:

To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities).

To provide Subsequent Notification of Regulated Waste Activity (to update site identification information).

As a component of a First RCRA Hazardous Waste Part A Permit Application.

As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____).

As a component of the Hazardous Waste Report.

2. Site EPA ID Number (See instructions on page 24)

EPA ID Number: NMR 000 002 147

3. Site Name (See instructions on page 24)

Name: Walgreen's Store # 2900

4. Site Location Information (See instructions on page 24)

Street Address: 1096 St Francis Drive

City, Town, or Village: Santa Fe

State: NM

County Name: Santa Fe

Zip Code: 87501

5. Site Land Type (See instructions on page 24)

Site Land Type: Private County District Federal Indian Municipal State Other

6. North American Industry Classification System (NAICS) Code(s) for the Site (See instructions on page 24)

A. 446

B.

C.

D.

7. Site Mailing Address (See instructions on page 25)

Street or P. O. Box: 1096 St Francis Drive

City, Town, or Village: Santa Fe

State: NM

Country: Santa Fe NM USA

Zip Code: 87501

8. Site Contact Person (See instructions on page 25)

First Name: ERIC

MI:

Last Name: ALMASI

Phone Number: (505) 982-4643

Phone Number Extension:

9. Legal Owner and Operator of the Site (See instructions on pages 25 to 26)

A. Name of Site's Legal Owner: Walgreen's Corp.

Date Became Owner (mm/dd/yyyy): 01/01/1997

Owner Type: Private County District Federal Indian Municipal State Other

B. Name of Site's Operator: NA

Date Became Operator (mm/dd/yyyy):

Operator Type: Private County District Federal Indian Municipal State Other

EPA ID No. **NMR0000002147**

10. Type of Regulated Waste Activity (Mark the appropriate boxes for activities that apply to your site. See instructions on pages 26 to 30)

A. Hazardous Waste Activities

1. Generator of Hazardous Waste

(Choose only one of the following three categories.)

- a. LQG: Greater than 1,000 kg/mo (2,200 lbs./mo.) of non-acute hazardous waste; or
- b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs./mo.) of non-acute hazardous waste; or
- c. CESQG: Less than 100 kg/mo (220 lbs./mo.) of non-acute hazardous waste

In addition, indicate other generator activities. (Mark all that apply)

- d. United States Importer of Hazardous Waste
- e. Mixed Waste (hazardous and radioactive) Generator

For Items 2 through 6, mark all that apply.

- 2. Transporter of Hazardous Waste
- 3. Treater, Storer, or Disposer of Hazardous Waste (at your site)
Note: A hazardous waste permit is required for this activity.
- 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
 - a. Small Quantity On-site Burner Exemption
 - b. Smelting, Melting, and Refining Furnace Exemption
- 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 at your site. (Mark all boxes that apply):

Generate Accumulate

- a. Batteries
- b. Pesticides
- c. Thermostats
- d. Lamps
- e. Other (specify) _____
- f. Other (specify) _____
- g. Other (specify) _____



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 apply.)

- 1. Used Oil Transporter - Indicate Type(s) of Activity(ies)
 - a. Transporter
 - b. Transfer Facility
- 2. Used Oil Processor and/or Re-refiner - Indicate Type(s) of Activity(ies)
 - a. Processor
 - b. Re-refiner
- 3. Off-Specification Used Oil Burner
- 4. Used Oil Fuel Marketer - Indicate Type(s) of Activity(ies)
 - 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

11. Description of Hazardous Wastes (See instructions on page 31)

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.

D011					

Signature of owner, operator, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)
<i>R. Mulford</i>	<i>Rox Toubert Envir. Specialist - 0</i>	<i>10/10/02</i>

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 31)

12. Comments (See instructions on page 31)

Facility installed a liquid recovery unit and have dropped from an SOG status to CE506 status

B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed for waste codes.