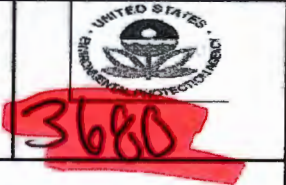


New



SEND 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 13.)

MARK ALL BOX(ES) THAT APPLY

- 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 (page 14)

EPA ID Number: NM.R.10.010.10.1.3.1.7.9.7.

3. Site Name (page 14)

Name: Sangre De Cristo Powersportz

4. Site Location Information (page 14)

Street Address: 1509 Paseo del Pueblo Sur
 City, Town, or Village: Taos State: NM
 County Name: Taos Zip Code: 87571

5. Site Land Type (page 14)

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

6. North American Industry Classification System (NAICS) Code(s) for the Site (page 14)

A. 8111111111 B. _____
 C. _____ D. _____

7. Site Mailing Address (page 15)

Street or P. O. Box: 1509 Paseo del Pueblo Sur
 City, Town, or Village: Taos
 State: NM
 Country: USA Zip Code: 87571

8. Site Contact Person (page 15)

First Name: JO MI: _____ Last Name: DAVISON
 Phone Number: (575) 758 3088 Extension: _____ Email address: _____

9. Operator and Legal Owner of the Site (pages 15 and 16)

A. Name of Site's Operator: Sangre de Cristo Powersport Date Became Operator (mm/dd/yyyy): 6/2008
 Operator Type: Private County District Federal Indian Municipal State Other
 B. Name of Site's Legal Owner: JO Davison Date Became Owner (mm/dd/yyyy): 6/2008
 Owner Type: Private County District Federal Indian Municipal State Other

9. Legal Owner (Continued) Address	Street or P. O. Box: <u>1509 Paseo del Pueblo Sur</u>	
	City, Town, or Village: <u>Taos</u>	
	State: <u>NM</u>	
	Country: <u>USA</u>	Zip Code: <u>87571</u>

10. Type of Regulated Waste Activity
Mark "Yes" or "No" for all activities; complete any additional boxes as instructed. (See instructions on pages 17 to 20.)

A. Hazardous Waste Activities
Complete all parts for 1 through 6.

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./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.

d. United States Importer of Hazardous Waste

e. Mixed Waste (hazardous and radioactive) Generator

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)

5. Exempt Boiler and/or Industrial Furnace If "Yes", mark each that applies.

a. Small Quantity On-site Burner Exemption

b. Smelting, Melting, and Refining

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 that apply:

	<u>Manage</u>
a. Batteries	<input type="checkbox"/>
b. Pesticides	<input type="checkbox"/>
c. Mercury containing equipment	<input type="checkbox"/>
d. Lamps	<input type="checkbox"/>
e. Other (specify) _____	<input type="checkbox"/>
f. Other (specify) _____	<input type="checkbox"/>
g. Other (specify) _____	<input type="checkbox"/>

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
If "Yes", mark each that applies.

a. Transporter

b. Transfer Facility

2. Used Oil Processor and/or Re-refiner
If "Yes", mark each that applies.

a. Processor

b. Re-refiner

3. Off-Specification Used Oil Burner

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

11. Description of Hazardous Wastes (See instructions on page 21.)

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.

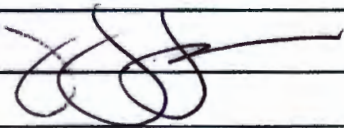
D002						
D008						

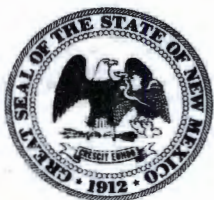
B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed for waste codes.

12. Comments (See instructions on page 21.)

used oil generator
used anti-freeze generator

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. For the RCRA Hazardous Waste Part A Permit Application, all operator(s) and owner(s) must sign (see 40 CFR 270.10 (b) and 270.11). (See instructions on page 21.)

Signature of operator, owner, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)
	JODRISON VP	9.23.08



BILL RICHARDSON
GOVERNOR

State of New Mexico
ENVIRONMENT DEPARTMENT

Hazardous Waste Bureau
2905 Rodeo Park Drive East, Bldg. 1
Santa Fe, New Mexico 87505-6313
Telephone (505) 476-6000
Fax (505) 476-6030



RON CURRY
SECRETARY

JON GOLDSTEIN
DEPUTY SECRETARY

October 15, 2008

1509 Paseo del Pueblo Sur
Taos, NM 87571

Attn: Jo Davison:

This is to acknowledge that, due to tracking requirements of the Environmental Protection Agency (EPA) in compliance with Section 3010 of the Resource Conservation and Recovery Act (RCRA): a number has been assigned for the Notification of Regulated Waste Activity for your facility site:

Sangre De Cristo Powersports
1509 Paseo del Pueblo Sur
Taos, NM 87571

Your EPA Identification Number for this installation is **NMR000013797**

The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes: on all Biennial 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 reports and documents required under Sub-title C of RCRA.

Charlotte Duran
Financial Specialist
Data Management Program
Hazardous Waste Bureau