


<p>SEND COMPLETED FORM TO: The Appropriate State or Regional Office.</p>	<p>United States Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION FORM</p>			
<p>1. Reason for Submittal</p> <p>MARK ALL BOX(ES) THAT APPLY</p>	<p>Reason for Submittal:</p> <p><input checked="" type="checkbox"/> To provide an Initial Notification (first time submitting site identification information / to obtain an EPA ID number for this location)</p> <p><input type="checkbox"/> To provide a Subsequent Notification (to update site identification information for this location)</p> <p><input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application</p> <p><input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____)</p> <p><input type="checkbox"/> As a component of the Hazardous Waste Report (If marked, see sub-bullet below)</p> <p><input type="checkbox"/> Site was a TSD facility and/or generator of $\geq 1,000$ kg of hazardous waste, > 1 kg of acute hazardous waste, or > 100 kg of acute hazardous waste spill cleanup in one or more months (LQG regulations)</p>		<p style="color: red; font-size: 24px; font-weight: bold;">4110</p> <p style="color: yellow; font-size: 18px;">need training record review of Emergency alternate's listed in contingency plan. During Ops log review, ask to see 5870475</p> <p style="font-size: 24px; font-weight: bold;">9657</p>	
<p>2. Site EPA ID Number</p>	<p>EPA ID Number NM R 0 0 0 0 1 8 1 4 3</p>			
<p>3. Site Name</p>	<p>Name: Los Amigos Towing Service & Recover</p>			
<p>4. Site Location Information</p>	<p>Street Address: 3961 San Felipe Rd</p>			
	<p>City, Town, or Village: Santa Fe, NM 87507</p>			
	<p>State: New Mexico</p>	<p>Country: USA</p>		
<p>5. Site Land Type</p>	<p><input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Tribal <input type="checkbox"/> Other</p>			
<p>6. NAICS Code(s) for the Site (at least 5-digit codes)</p>	<p>A. 4 8 8 4 1 0</p>	<p>C. </p>		
	<p>B. </p>	<p>D. </p>		
<p>7. Site Mailing Address</p>	<p>Street or P.O. Box: 3961 San Felipe Rd</p>			
	<p>City, Town, or Village: Santa Fe</p>			
	<p>State: New Mexico</p>	<p>Country: USA</p>		
<p>8. Site Contact Person</p>	<p>First Name: Saul</p>	<p>MI: </p>	<p>Last: Gomez</p>	
	<p>Title: owner</p>			
	<p>Street or P.O. Box: 3961 San Felipe Rd</p>			
	<p>City, Town or Village: Santa Fe</p>			
	<p>State: New Mexico</p>	<p>Country: USA</p>		
	<p>Email: </p>			
<p>Phone: 505-474-4444</p>		<p>Ext.: </p>		
<p>9. Legal Owner and Operator of the Site</p>	<p>A. Name of Site's Legal Owner: Andrew Ortiz</p>		<p>Date Became Owner: 1975</p>	
	<p>Owner Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Tribal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p>			
	<p>Street or P.O. Box: 1138 Tono del Este</p>			
	<p>City, Town, or Village: Santa Fe</p>		<p>Phone: </p>	
	<p>State: New Mexico</p>	<p>Country: USA</p>		<p>Zip Code: 87507</p>
	<p>B. Name of Site's Operator: Saul Gomez</p>		<p>Date Became Operator: 8/2008</p>	
	<p>Operator Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Tribal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p>			

10. Type of Regulated Waste Activity (at your site)
 Mark "Yes" or "No" for all current activities (as of the date submitting the form); complete any additional boxes as instructed.

A. Hazardous Waste Activities; Complete all parts 1-10.

- Y N **1. Generator of Hazardous Waste**
 If "Yes", mark only one of the following - a, b, or c.
- a. LQG: Generates, in any calendar month, 1,000 kg/mo (2,200 lbs./mo.) or more of hazardous waste; or Generates, in any calendar month, or accumulates at any time, more than 1 kg/mo (2.2 lbs./mo) of acute hazardous waste; or Generates, in any calendar month, or accumulates at any time, more than 100 kg/mo (220 lbs./mo) of acute hazardous spill cleanup material.
- b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs./mo) of non-acute hazardous waste.
- c. CESQG: Less than 100 kg/mo (220 lbs./mo) of non-acute hazardous waste.

If "Yes" above, indicate other generator activities in 2-4.

- Y N **2. Short-Term Generator** (generate from a short-term or one-time event and not from on-going processes). If "Yes", provide an explanation in the Comments section.
- Y N **3. United States Importer of Hazardous Waste**
- Y N **4. Mixed Waste (hazardous and radioactive) Generator**

- Y N **5. Transporter of Hazardous Waste**
 If "Yes", mark all that apply.
- a. Transporter
- b. Transfer Facility (at your site)
- Y N **6. Treater, Storer, or Disposer of Hazardous Waste** Note: A hazardous waste Part B permit is required for these activities.
- Y N **7. Recycler of Hazardous Waste**
- Y N **8. Exempt Boiler and/or Industrial Furnace**
 If "Yes", mark all that apply.
- a. Small Quantity On-site Burner Exemption
- b. Smelting, Melting, and Refining Furnace Exemption
- Y N **9. Underground Injection Control**
- Y N **10. Receives Hazardous Waste from Off-site**

B. Universal Waste Activities; Complete all parts 1-2.

- Y N **1. Large Quantity Handler of Universal Waste** (you accumulate 5,000 kg or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste managed at your site. If "Yes", mark all that apply.
- a. Batteries
- b. Pesticides
- c. Mercury containing equipment
- d. Lamps
- e. Other (specify) _____
- f. Other (specify) _____
- g. Other (specify) _____

- Y N **2. Destination Facility for Universal Waste**
 Note: A hazardous waste permit may be required for this activity.

C. Used Oil Activities; Complete all parts 1-4.

- Y N **1. Used Oil Transporter**
 If "Yes", mark all that apply.
- a. Transporter
- b. Transfer Facility (at your site)
- Y N **2. Used Oil Processor and/or Re-refiner**
 If "Yes", mark all that apply.
- a. Processor
- b. Re-refiner
- Y N **3. Off-Specification Used Oil Burner**
- Y N **4. Used Oil Fuel Marketer**
 If "Yes", mark all that apply.
- 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

D. Eligible Academic Entities with Laboratories—Notification for opting into or withdrawing from managing laboratory hazardous wastes pursuant to 40 CFR Part 262 Subpart K

- ❖ You can **ONLY** Opt into Subpart K if:
 - you are at least one of the following: a college or university; a teaching hospital that is owned by or has a formal affiliation agreement with a college or university; or a non-profit research institute that is owned by or has a formal affiliation agreement with a college or university; AND
 - you have checked with your State to determine if 40 CFR Part 262 Subpart K is effective in your state

- Y N 1. Opting into or currently operating under 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories
 See the item-by-item instructions for definitions of types of eligible academic entities. Mark all that apply:
- a. College or University
 - b. Teaching Hospital that is owned by or has a formal written affiliation agreement with a college or university
 - c. Non-profit Institute that is owned by or has a formal written affiliation agreement with a college or university

- Y N 2. Withdrawing from 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories

11. Description of Hazardous Waste

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.



SUSANA MARTINEZ
Governor

JOHN A. SANCHEZ
Lieutenant Governor

**NEW MEXICO
ENVIRONMENT DEPARTMENT**

Hazardous Waste Bureau

**2905 Rodeo Park Drive East, Building 1
Santa Fe, New Mexico 87505-6303
Phone (505) 476-6000 Fax (505) 476-6030
www.nmenv.state.nm.us**



DAVE MARTIN
Secretary

BUTCH TONGATE
Deputy Secretary

THOMAS SKIBITSKI
Acting Director
Resource Protection Division

March 22, 2013

**LOS AMIGOS TOWING SERVICE & RECOVERY
3961 SAN FELIPE ROAD
SANTA FE, NM 87507**

Attn: Andrew Ortiz:

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:

**LOS AMIGOS TOWING SERVICE & RECOVERY
3961 SAN FELIPE ROAD
SANTA FE, NM 87507**

Your EPA Identification Number for this installation is **NMR000018143**.

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.

Vanessa Baros
Administrator
Hazardous Waste Bureau