

HWB GENERAL FIELD WORKSHEET Follow-up

1. Facility Name: Safety Kleen

2. Date observed: 12/12/03 Inspector: Berry Birch

3. Citation and description of apparent violation (include specific data such as location, drum size/color, waste type, quantity):

Failure to maintain secondary containment - inspection
after remediation of secondary containment w/ #304 stainless
double welds on seams inside and out

4. Were photos taken? () No () Yes Were samples collected? () No () Yes; describe:

5. How long has the violation existed?

N/A

6. Did the facility know or could have known of this condition? () No () Yes; explain:

7. Was the violation abated at the time of the inspection? () No () Yes; explain:

Abated before this date (12/12/03) and are in the process of
filling containment vessel for leak check. Will forward results tomorrow.

8. Facility comments (record source's name):

Top of secondary containment has a gap that will be sealed with
silicone. The containment should hold ~550 gallons and
the maximum storage of the building is 4310 gallons

Facility Rep: Danny Evans Signature: Danny Evans

Attach (or use back) additional who, what, when, where, why and how notes relating to violation.

HWB Field Worksheet

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- 1. Facility Name:
- 2. Condition was:
 - Observed by inspector on 9/9/03 Determined by interview to have occurred on ____.
 - Noted by other evidence
 Describe:

3. Description of apparent violation (s): include specific data such as drum size, waste type, quantity of each type, etc.:

Specific location (distance, landmarks, etc.)

Number of instances regulation violated:

Number of photos taken and what is shown:

4. How long has the violation (s) existed? unknown

5. Did facility know or could have known of this condition?
 No Yes; explain:

6. Not abated Abated at time of inspection; explain:

7. Any stress conditions? (soil condition, dead plants/animals, odors, human exposure)
 No Yes; explain:

8. Any mitigating or contributing circumstances?
 No Yes; explain:

9. Facility/Employee comments or statements:

10. Sample (s) collected? Mike Crawford they sealed the crack several times, and is going to have it sandblasted & cover the vented sump.
 No Yes; explain:

Inspector's Initials AM

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HWB Field Worksheet

1. Facility Name:
2. Condition was:
 - Observed by inspector on 9/9/03 Determined by interview to have occurred on ____.
 - Noted by other evidence
 Describe:
3. Description of apparent violation (s): include specific data such as drum size, waste type, quantity of each type, etc.:

Specific location (distance, landmarks, etc.)

Number of instances regulation violated:

Number of photos taken and what is shown:
4. How long has the violation (s) existed? *Don't know previous practice, but was suitable for June 17, 2003 (during insp.)*
5. Did facility know or could have known of this condition?
 - No Yes; explain:
6. Not abated Abated at time of inspection; explain:
7. Any stress conditions? (soil condition, dead plants/animals, odors, human exposure)
 - No Yes; explain:
8. Any mitigating or contributing circumstances?
 - No Yes; explain:
9. Facility/Employee comments or statements:

Agreement was updated and passed out to local entities
10. Sample (s) collected?
 - No Yes; explain:

Inspector's Initials AM

HWB Field Worksheet

1. Facility Name:
2. Condition was:
 - Observed by inspector on 9/9/03 Determined by interview to have occurred on ____.
 - Noted by other evidence
 Describe:
3. Description of apparent violation (s): include specific data such as drum size, waste type, quantity of each type, etc.:

 Specific location (distance, landmarks, etc.)

 Number of instances regulation violated:

 Number of photos taken and what is shown:
4. How long has the violation (s) existed? Evacuation routes
5. Did facility know or could have known of this condition?
 - No Yes; explain:
6. Not abated Abated at time of inspection; explain:
7. Any stress conditions? (soil condition, dead plants/animals, odors, human exposure)
 - No Yes; explain:
8. Any mitigating or contributing circumstances?
 - No Yes; explain:

9. Facility/Employee comments or statements:
List of equipment was in the contingency plan, but not 3 hole punch & attached and the routes were added later. per Mike Crawford during the insp.

10. Sample (s) collected?
 - No Yes; explain:

Would like to discuss this viol' w/ mgmt.
 Inspector's Initials AM
If this violation was in fact a SNC.

HWB Field Worksheet

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1. Facility Name:
2. Condition was:
 Observed by inspector on 9/9/03 Determined by interview to have occurred on ____.
 Noted by other evidence
Describe:
3. Description of apparent violation (s): include specific data such as drum size, waste type, quantity of each type, etc.:

Specific location (distance, landmarks, etc.)

Number of instances regulation violated:

Number of photos taken and what is shown:
- 4. How long has the violation (s) existed?
- 5. Did facility know or could have known of this condition?
 No Yes; explain:
- 6. Not abated Abated at time of inspection; explain:
- 7. Any stress conditions? (soil condition, dead plants/animals, odors, human exposure)
 No Yes; explain:
- 8. Any mitigating or contributing circumstances?
 No Yes; explain:
- 9. Facility/Employee comments or statements:
Annual Certification was misfiled and consequently given to NMED with NOU response. PER Mike Crawford
- 10. Sample (s) collected?
 No Yes; explain:

Inspector's Initials AM

Safety-Kleen - Albuquerque Branch
Available Monitoring, Safety, and Emergency Equipment
Container Storage Area (CSA) Building, Two CSAs

Equipment	Type	Quantity	Capabilities
Soap	SK 666 or equiv.	1 gallon	Decontamination, use with water
Mop and Bucket	--	1	Decontamination, use with water
Shovel	Spark-proof	2	Remove spilled materials
Gloves	Neoprene	4 pairs	Handling decontamination
Safety glasses	With side shields	4 pairs	Eye protection
Boots	Neoprene/ Steel Toed	4 pairs	Foot protection
Aprons	Saranex or similar	4	Body and arm protection
Respirator	Air Purifying	each employee carries his own	Respiratory protection
Respirator Cartridges	Organic vapor and acid vapor combo	4 pair	Respiratory Protection
Sorbent Pad	Non-organic - Pig HazMat or similar	½ box min.	Absorbing spills
Absorbent Socks	Non-organic - Pig HazMat or similar	20 min.	Absorbing spills
Loose Absorbent	Non-organic - vermiculite or similar	2 bags min.	Absorbing spills
95-gallon recovery drum	UN Spec. Steel	1	Containing spill materials

At a minimum, each employee is issued gloves, respirator, and steel-toed boots. Additional boots and gloves are kept in the spill kits. However, each employee carries his own respirator.

Material safety data sheets for all hazardous materials and profiles for hazardous wastes handled at Safety-Kleen show neoprene gloves/boots and NIOSH respirators with organic vapor cartridges appropriate for normal handling and small spill cleanup. For large spills and/or emergencies, Safety-Kleen personnel will evacuate and notify local hazmat team with proper SCBA equipment for response.

The CSA also has a fire extinguisher at the north west doorway and at the southeast doorway.

A first-aid kit (including an eyewash and shower) is located by the southeast exit.

A first-aid kit is located in the restroom in this building.

A telephone is located in the office in the very northwest corner of the building.

Please see the emergency equipment map on the wall in the area for the locations of all emergency equipment.