

REPORT OF RCRA COMPLIANCE EVALUATION INSPECTION

At

RED STAR YEAST CO. LLC

950 60th Avenue SW
Cedar Rapids, Iowa 52404
319-896-2620

EPA ID Number: IAR000505669

On

January 23, 2023

By

TOEROEK ASSOCIATES, INC.

For

U. S. ENVIRONMENTAL PROTECTION AGENCY

Region 7

Enforcement and Compliance Assurance Division

INTRODUCTION

At the request of the Enforcement and Compliance Assurance Division/Chemical Branch/RCRA Section (ECAD/CB/RCRA) of the U. S. Environmental Protection Agency (EPA) Region 7, Toeroek Associates, Inc., and its subcontractor CLAENE Group (Toeroek team) conducted a hazardous waste compliance evaluation inspection (CEI) at Red Star Yeast (Red Star) at 950 60th Avenue SW in Cedar Rapids, Iowa. The CEI was conducted under the authority of Section 3007 of the Resource Conservation and Recovery Act (RCRA), as amended. The CEI covered hazardous waste generator requirements, used oil management, and universal waste requirements, as applicable. This report and its attachments present the results of the CEI.

PARTICIPANTS

Red Star:

Scott Groth, Environmental, Health and Safety Manager

Mathieu Cagnard, Plant Manager

Paige Beckner, Environmental Assistant

Nick Kessel, Technical Manager

David Paulini, Fermentation Supervisor

Kelly Hart, Process Superintendent

Toeroek Team:

Clifford Nelles, Inspector, 816-213-5192

INSPECTION PROCEDURES

Prior to the CEI at Red Star on January 23, 2023, I conducted a drive-by visual inspection. I did not observe any areas of concern during the drive-by. At approximately 0755 hours, I informed the guard at the main gate that I was there to conduct a CEI. She contacted Mr. Groth by telephone and then directed me to the administration building where I met Mr. Groth and Ms. Beckner. I introduced myself and explained that I was there to conduct a hazardous waste CEI at Red Star. Mr. Groth, Ms. Beckner, and I adjourned to a conference room where we were joined by Mr. Cagnard. After introductions, I conducted an entry briefing with Messrs. Cagnard and Groth and Ms. Beckner.

During the entry briefing, I presented my business card and EPA credentials to Messrs. Cagnard and Groth and Ms. Beckner. I explained the scope and procedures for the CEI. I explained the facility's right to make confidentiality claims for any or all the information obtained and provided a Notice Regarding Proprietary/Confidential Business Information. I stated that at the conclusion of the CEI, Mr. Groth would be presented a Confidentiality Notice (Notice) with which he could make or not make a claim of confidentiality for the facility. I also provided Messrs. Cagnard and Groth and Ms. Beckner a copy of U. S. Federal Codes 1001 and 1002, concerning communication of false statements and documents to federal inspectors, and RCRA Section 3007, explaining EPA's inspection authority, both of which they read.

A copy of each of the following documents was left with Mr. Groth during the inspection:

- RCRA Facility Access Information Sheet
- Mr. Trevor Urban's business card
- RCRA Section 3007
- U.S. Federal Codes 1001 and 1002
- Instructions for Responding to a Notice of Preliminary Findings
- Notice Regarding Proprietary/Confidential Business Information
- E-Manifest Fact Sheet: Generators
- Managing your Hazardous Waste: A Guide for Small Businesses
- U.S. EPA Small Business Resources Information Sheet
- Recycling Electronics: A Guide for Businesses
- Lead-Based Paint Activities: Handling and Disposal
- Battery Recycling/Disposal
- Management of Fluorescent Lamps for Businesses
- Incompatible Chemicals
- Universal Wastes – Including Aerosol Cans
- TCLP – Toxicity Characteristic Leaching Procedure
- Part 279 Requirements: Used Oil Management Standards
- EPA Region 7 Emergency Response Program
- Chemical Facility Anti-Terrorism Standards
- Iowa Environmental Guide for Businesses

I reviewed the Notification Acknowledgement/Verification Report (Verification Report) with Mr. Groth (Attachment 1). Based on this review, I made no updates to the Verification Report.

I conducted the visual inspection of the facility, accompanied by Mr. Groth and Ms. Beckner. Following the visual inspection, I reviewed facility records including waste determination documentation, hazardous waste manifests with land disposal restriction (LDR) notifications, Safety Data Sheets (SDS), contingency plan, and training documentation. I prepared and completed a site-specific inspection checklist to document my observations.

At the conclusion of the CEI, I conducted an exit briefing with Messrs. Cagnard, Groth, and Kessel and Ms. Beckner. During the exit briefing, I provided a Receipt for Documents and Samples, which Mr. Groth signed, acknowledging receipt (Attachment 2). I provided Mr. Groth the Notice, which he signed indicating no confidential business information had been provided (Attachment 3). I also provided Mr. Groth a Notice of Preliminary Findings (NOPF), which he signed to acknowledge receipt (Attachment 4).

A map of the facility obtained during the CEI is included in Attachment 5, and a Google Earth aerial photograph of the facility is included as Attachment 6. The 16 photographs taken during the CEI are included in Attachment 7.

FINDINGS AND OBSERVATIONS

1. Facility Description and General Information

Red Star produces compressed and liquid yeast (cream yeast) for baking and industrial ethanol production. It also manufactures nutritional yeast to which selenium has been added. Major raw materials used by the facility include yeast culture, growth medium (corn syrup, ammonia, water, and molasses), and selenium additive. Red Star began operation at this location in 2005 and currently has approximately 145 full-time employees. Mr. Groth stated that the facility runs 24 hours per day, 7 days per week, with three primary shifts. Based on my review of aerial photographs, the Red Star facility covers approximately 10 acres with two primary buildings—the manufacturing building and the maintenance building (Attachment 5). The facility also has a tank farm for raw materials and cream yeast product, consisting of approximately 70 tanks.

The adjacent property, which shares a gate with Red Star, is owned and operated by Biospringer North America (Biospringer), a manufacturer of yeast extract. According to Mr. Groth Biospringer is a sister company to Red Star, both of which are owned by Lesaffre. However, he said that the two operations are managed and operated separately, with separate management and environmental staff. Mr. Groth said that the only cooperative enterprise is contracted use of Red Star's laboratory for analysis of Biospringer's wastewater. I concluded that Biospringer and Red Star are operating as two separate facilities. The Biospringer facility does not have an EPA ID number.

Yeast is grown in large (greater than 100,000-gallon) fermenter tanks. The pure culture is introduced into the growth medium, and then fermented in batches. During production of nutritional yeast, selenium is also added. After fermentation, the material in the tank is physically separated into liquid (beer) and solid phases. The yeast is then dried and compressed or mixed with other liquid to produce cream yeast. The beer is either accumulated in a tank to be treated in

the on-site wastewater treatment plant (WWTP) (beer containing selenium) or discharged to the City of Cedar Rapids publicly owned treatment works (POTW).

Wastewater is also generated when tanks, tanker trucks, and other vessels are cleaned with nitric acid and other sanitizers as part of the clean-in-place (CIP) process. According to Mr. Cagnard, the cleaning solutions are used once, and then discharged to the POTW as part of the larger wastewater stream.

The WWTP began operation in October 2015 when the City of Cedar Rapids asked the facility to decrease concentration of selenium in the wastewater discharged to the POTW. The WWTP meets the definition of an exempt wastewater treatment system, as described in Title 40 *Code of Federal Regulations* (40 CFR) 260.10. The selenium beer, which the facility considers hazardous based on analysis, is accumulated in a tank that is part of the exempt WWTP. The beer is piped to two reactant tanks, and then to a dissolved air flotation (DAF) tank where the precipitate forms sludge. The treated wastewater is combined with the other wastewater going to the POTW. The sludge, which the facility considers to be hazardous based on analysis, is then accumulated in separate tanks for disposal off site.

Selenium waste is also generated during reprocessing of dry nutritional yeast. Yeast containing selenium is swept up during cleaning of packaging areas and accumulated in plastic bags. Three to four times a year, according to Mr. Kessel, the material is sifted. After sifting, the fines are considered hazardous waste based on analysis. The coarser materials retained by the sieve are not considered waste and are sold as a lower grade product for animal feed.

The facility also has an on-site laboratory for analysis of wastewater before discharge and for quality testing of raw materials and product. The laboratory generates spent solutions and expired materials, which are considered hazardous waste by the facility. Nutritional yeast tested for quality control at the laboratory is sent for reprocessing with material generated during the packaging process.

Facility and equipment maintenance activities generate used oil and used oil filters, which are managed as used oil. Building maintenance generates used lamps and used batteries (considered hazardous waste by the facility and managed as universal waste) and general trash (considered nonhazardous waste by the facility).

The facility was last inspected on March 29, 2016 by an EPA contractor with the following findings:

- Failure to include complete information about all waste streams generated in the 2015 Biennial Report
- Failure to document annual hazardous waste training for the primary emergency coordinator
- Failure to document home telephone numbers and addresses for emergency coordinators in the RCRA Contingency Plan

2. RCRA Status

Red Star is identified as a large quantity generator (LQG) of hazardous waste (generating more than 1,000 kilograms [kg] of hazardous waste per month) on the Verification Report provided by EPA (Attachment 1). During the CEI, I reviewed hazardous waste manifests generated over the last three years as well as the facility's 2021 Biennial Report obtained from the EPA Region 7 Records Center prior to the inspection (Attachment 8). I also reviewed the facility's hazardous waste log used to track quantities of wastes shipped (Attachment 9). Based on the hazardous waste log (Attachment 9, Pages 5 and 6), the facility generated 834,270 pounds (378,419 kg) of hazardous selenium sludge in 2022. Based on the generation rate of selenium sludge alone, I concluded that Red Star is currently operating as a LQG of hazardous waste. Red Star is also a small quantity handler (SQH) of universal waste (accumulating less than 5,000 kg of universal waste at any time) and a generator of used oil.

The facility operates one less-than-90-day hazardous waste container accumulation area (HWCAA) in the warehouse of the Manufacturing Building and two 10,000-gallon hazardous waste aboveground storage tanks.

3. Waste Streams

This section of the CEI report describes waste streams generated by the facility, including the facility's waste determination and waste codes, generation process and rate, management at the facility, and disposition. The following discussion of waste streams is based on conversations with Mr. Groth, the visual inspection, and my review of waste shipping documents. Mr. Groth, and Ms. Beckner accompanied me throughout the CEI. The visual inspection included the maintenance building, laboratory, CIP room, tanker truck wash, WWTP, and warehouse. All inspection participants were provided a copy of U.S. Federal Codes 1001 and 1002, which they read.

Wastewater is generated during separation of fermented yeast, cleaning of vessels and tanks, and treatment of selenium wastewater. The facility has determined that the wastewater is exempt from the definition of solid waste per 40 CFR 261.4(a)(2). Wastewater is discharged to the City of Cedar Rapids POTW via a permitted outfall. According to Mr. Cagnard, the wastewater is monitored for oxygen demand, suspended solids, nitrogen, and selenium. The facility discharges, on average 1.35 million gallons per day.

Selenium wastewater is generated during separation of yeast containing selenium. The facility considers the waste hazardous (D010) based on product and process knowledge. The wastewater is piped directly from the separator to the on-site WWTP where it is held in a 40,000-gallon or 60,000-gallon tank. The WWTP meets the definition of an exempt wastewater system. Treatment generates selenium sludge and treated selenium wastewater, which is consolidated with the general wastewater stream.

Selenium sludge is generated from treatment of selenium wastewater in the WWTP. The facility considers the waste hazardous (D010) based on toxicity characteristic leaching procedure (TCLP) analysis (Attachment 10). The waste is accumulated in one of two 10,000-gallon hazardous waste tanks adjacent to the WWTP. Mr. Groth stated that the facility generates

approximately 32,000 pounds per week of selenium sludge and the selenium sludge is approximately 3 to 10% solids. Selenium sludge is transported to Clean Earth in Calvert City, Kentucky, for stabilization prior to land disposal.

During the inspection, I observed two 10,000-gallon hazardous waste accumulation tanks (Attachment 7, Photographs 10 and 11). The tanks were labeled with the words “hazardous waste,” but were not labeled with an indication of the nature of the hazard as required by 40 CFR 262.17(a)(5)(ii)(B). (**NOPF No. 7**). NOPF #7 was not initially left with the facility, but was added on February 1, 2023. Mr. Groth was notified of its addition by email and telephone on February 1, 2023.

The hazardous waste accumulation tanks appeared to be in good condition with adequate secondary containment. I asked Mr. Groth how much selenium sludge was in each tank. Mr. Groth and I entered the adjacent building to ask the two operators—Ms. Harty and Mr. Paulini. Mr. Paulini stated that Tank 21 was at 171 inches and, at 50 gallons per inch, held approximately 8,550 gallons of sludge. Ms. Hart stated that Tank 22 was at 193 inches, or approximately 9,650 gallons of sludge. I asked Mr. Groth when the last time each tank was RCRA empty. He replied that Tank 21 was RCRA empty on November 11, 2022 (73 days prior to the CEI) and that Tank 22 was RCRA empty on September 29, 2022 (116 days prior to the CEI). I determined that the facility stored hazardous waste beyond 90 days without a RCRA permit required by RCRA Section 3005 (**NOPF No. 6**).

I asked Mr. Groth why Tank 22 had exceeded the 90-day limit. He stated that on October 26, 2022, Clean Earth cancelled four shipments of selenium sludge. Mr. Groth sent an e-mail on February 3, 2023, explaining the events that occurred since the September 29, 2022, accumulation start date for Tank 22 (Attachment 11). In summary, on November 21, 2022, the Arkansas treatment/storage/disposal facility (TSDF) accepted one shipment for treatment. On November 29, 2022, the Arkansas TSDF rejected a second load, and the material was returned to Red Star on December 2, 2022. Testing by the accredited laboratory showed that the material was acceptable, and several unsuccessful attempts were made to find another TSDF. With no treatment options found, there were no shipments during the month of December 2022. On December 29, 2022, the waste exceeded its 90-day accumulation limit. On January 16, 2023, the waste was sent to an Idaho TSDF for treatment.

Selenium dust is generated during the reprocessing (sifting) of nutritional yeast that cannot be sold as-is, either because it has been used for quality control testing or because it has spilled. The facility considers the dust hazardous (D010) based on product knowledge. Red Star accumulates nutritional yeast that cannot be sold as-is and reprocesses the material approximately every three or four months. Fines generated from reprocessing are considered to be hazardous waste selenium dust. The facility generated approximately 1,681 pounds of selenium dust in 2022 (Attachment 9, Pages 5 and 6). The dust is transported to Veolia ES Technical Solutions (Veolia ES) in Menomonee Falls, Wisconsin, for stabilization prior to land disposal. I did not observe selenium dust in accumulation during the CEI.

Laboratory waste consists of expired, off-specification, or spent solutions generated in the laboratory. The facility considers laboratory waste hazardous based on product and process

knowledge. Laboratory waste is manifested under a range of D, U, and P-list waste codes depending on the waste; however, the majority of the waste is corrosive waste (D002) or spent solvent (D001, F003). Two of the main chemicals used in the laboratory are acetonitrile and nitric acid. Copies of the Safety Data Sheets (SDS) for these chemicals are included as Attachments 12 and 13. Based on the 2021 Biennial Report (Attachment 8) and the 2022 waste log (Attachment 9, Pages 5 and 6) the facility generates approximately 250 pounds of laboratory waste per year.

During the inspection, I observed three 1-gallon containers of laboratory waste in the satellite accumulation area in the laboratory (Attachment 7, Photograph 6). Two containers held waste nitric acid, and the one in the middle held waste acetonitrile. The satellite accumulation containers were near the point of generation and under control of the operator, closed, and labeled with the words “hazardous waste.” Only the middle acetonitrile container was labeled with the nature of the hazard. I determined that the facility failed to label the other two satellite accumulation containers of nitric acid with an indication of the nature of the hazard, as required by 40 CFR 262.15(a)(5)(ii) (**NOPF No. 1**).

I provided compliance assistance regarding management of satellite accumulation containers. During the inspection, employees of Red Star affixed pictographs to the satellite containers (Attachment 7, Photograph 15).

Used oil is generated during maintenance of facility equipment. The facility manages used oil under provisions of 40 CFR Part 279. According to Mr. Groth, the facility generates approximately 110 gallons of used oil per month. It is collected by Valley Environmental Services (VES) and transported to Newton, Iowa, for recycling.

During the inspection, I observed four 55-gallon containers of used oil in the maintenance shop (Attachment 7, Photographs 1 and 2). The used oil storage containers appeared to be in good condition with no apparent leaks or damage and were all labeled with the words “used oil.”

Used oil filters are generated during maintenance of facility equipment. The facility manages used oil filters as used oil under provisions of 40 CFR Part 279. According to Mr. Groth, the facility generates approximately 55 gallons of used oil filters every two or three months. They are collected by VES and transported to Newton, Iowa for recycling.

During the inspection, I observed one oil filter draining into a used oil storage container (Attachment 7, Photograph 2). Mr. Groth explained that used oil filters are drained prior to placement in a labeled used oil storage container.

Used lamps are generated during facility maintenance. Although the facility is transitioning to lower mercury, nonhazardous lamps, the transition is not complete. The facility considers the older lamps hazardous waste and manages all used lamps as universal waste under provisions of 40 CFR Part 273. Mr. Groth estimated that the facility generates approximately 25 used lamps per month. Used lamps are consolidated in a universal waste collection area in the Maintenance building. Full containers are shipped to Veolia ES in Port Washington, Wisconsin, for recycling.

During the inspection, I observed one universal waste lamps accumulation container in the maintenance building (Attachment 7, Photographs 3 through 5). The universal waste lamps accumulation container was structurally sound, closed, labeled with the words “universal waste lamps,” and dated July 8, 2022.

Used batteries are generated during facility maintenance and include alkali, nickel-cadmium, and lead-acid batteries. The facility considers all used batteries hazardous waste and manages them as universal waste under provisions of 40 CFR Part 273. Mr. Groth estimated the facility generates approximately five used batteries per year. Used batteries are consolidated in a universal waste collection area in the maintenance building.

During the visual inspection, I observed two 5-gallon containers for used batteries—one for lead-acid batteries and one for nickel-cadmium batteries. The universal waste batteries accumulation container for nickel-cadmium batteries was labeled with the words “universal waste batteries,” held three used Ni-Cad batteries, and was dated June 21, 2022. The universal waste batteries accumulation container for lead-acid batteries was empty.

Aerosol can residue is generated by puncturing and draining waste aerosol cans used for facility maintenance. The empty aerosol cans are punctured and drained at a satellite accumulation area in the maintenance building. The facility considers aerosol can residue hazardous (D001) based on product knowledge. I estimated the aerosol can residue generation rate to be less than one gallon per year. The waste is drained into a satellite accumulation container, and the empty aerosol cans are disposed in the general trash. Aerosol can residue has not yet been shipped offsite for treatment or disposal.

During the visual inspection. I observed the aerosol can puncturing unit (Attachment 7, Photographs 12 and 13). The satellite accumulation container was structurally sound, near the point of generation, under control of the operator, and labeled with the words “hazardous waste.” However, the satellite accumulation container was not labeled with an indication of the nature of the hazard, as required by 40 CFR 262.15(a)(5)(ii) (**NOPF No. 1**). The satellite accumulation container was not closed, as required by 40 CFR 262.15(a)(4) (**NOPF No. 2**).

I provided compliance assistance regarding management of satellite accumulation containers. During the inspection, employees of Red Star affixed pictographs to the satellite container to indicate the nature of the hazard and closed the container (Attachment 7, Photograph 14).

General trash consists of nonhazardous production wastes, packaging wastes, and general office-type refuse. The facility considers general trash nonhazardous based on product knowledge. The waste is accumulated in various containers throughout the facility. General trash is collected by Waste Management and transported to Scott County Landfill in Davenport, Iowa, for disposal. I did not observe any deficiencies related to general trash.

4. Required Response Equipment and Hazard Management

Per 40 CFR 262.15(a)(8) and 262.17(a)(6), a LQG must operate to minimize the possibility of a fire, explosion, or spill, and must maintain emergency response equipment. During the visual inspection, I observed spill response equipment comprised of mats, absorbent materials, shovels,

and brooms, as well as the presence and availability of fire extinguishers. I determined that the spill and fire response equipment was adequate for the hazardous wastes generated and accumulated at the facility.

5. Container Accumulation Areas

Red Star maintains one HWCAA in the warehouse of the manufacturing building. During the inspection I observed a 1-liter hazardous waste accumulation container (HWAC) in the HWCAA (Attachment 7, Photograph 7). The HWAC was structurally sound, closed, and labeled with the words “hazardous waste” and an indication of the nature of the hazard. However, the HWAC was not marked with an accumulation start date, as required by 40 CFR 262.17(a)(5)(i)(C) (**NOPF No. 5**). During the CEI, employees of Red Star determined the accumulation start date was January 2, 2023, and marked the date on the HWAC (Attachment 7, Photograph 16).

I observed a 55-gallon container of dry yeast with selenium (D010) in the HWCAA (Attachment 7, Photograph 9). The container was structurally sound, closed, labeled with the words “hazardous waste,” and dated November 19, 2022. However, the HWAC was not labeled with an indication of the nature of the hazard, as required by 40 CFR 262.17(a)(5)(i)(B) (**NOPF No. 4**).

I also observed twenty 1-gallon HWACs of lab waste in the HWCAA (Attachment 7, Photograph 8). The HWACs were structurally sound, closed, labeled with the words “hazardous waste” and marked with accumulation start dates. The earliest accumulation start date was November 11, 2022. All of the HWACs holding flammable wastes were labeled with an indication of the nature of the hazard. However, none of the HWACs holding corrosive wastes was labeled with an indication of the nature of the hazard, as required by 40 CFR 262.17(a)(5)(i)(B) (**NOPF No. 4**).

According to Mr. Groth, the HWCAA is inspected weekly and a log is maintained. I reviewed three years of inspection logs and noted a missed inspection on the week of October 5, 2020. A copy of the inspection log for the month of October 2020 is included as Attachment 14. Because of the missed inspection, I determined the facility failed to inspect the HWCAA on a weekly basis, as required by 40 CFR 262.17(a)(1)(v) (**NOPF No. 3**).

I provided compliance assistance regarding management of hazardous waste in a HWCAA.

I asked Mr. Groth how a worker would summon emergency assistance. He stated that all workers who handle hazardous waste are required to carry a two-way radio.

6. Manifests and Biennial Report

Red Star generated manifests for 128 hazardous waste shipments from January 23, 2020, to January 23, 2023. During the CEI, I reviewed manifests and LDR notifications for five shipments in 2020, five in 2021, five in 2022, and three in 2023. Copies of the manifest and LDR notifications for shipments dated September 16, 2022, and October 17, 2022, are included as Attachment 15 as examples. I noted no deficiencies during my review of manifests.

The Hazardous Waste Biennial Report for 2021 was submitted in February 23, 2022 (Attachment 8).

7. Preparedness and Prevention Plan

LQG facilities are required by 40 CFR 262.17(a) to meet the emergency preparedness, prevention, and procedures requirements including documented arrangements with response agencies. According to Mr. Groth, Red Star is the subject of a regular inspection by the Cedar Rapids Fire Department hazardous materials team. During those inspections, he said the fire department is shown the layout of the facility, the location of the HWCAA, and other facility features.

During the CEI, I reviewed the facility's Contingency Plan and noted that Red Star last updated their contingency plan on June 21, 2022. Mr. Groth is listed as the emergency coordinator and all pertinent contact information and emergency evacuation procedures were included. The contingency plan appeared to meet all content requirements of 40 CFR 262.261. A copy of the Emergency Action Plan (Contingency Plan) and Quick Reference Guide are included in Attachment 16.

8. Personnel Training Requirements

Personnel training is required by LQG regulations specified in 40 CFR 262.17(a)(7) to ensure that employees are thoroughly familiar with proper waste handling procedures relevant to their responsibilities. During the CEI, I asked Mr. Groth if hazardous waste training is provided to employees. He stated that hazardous waste management training is provided to all employees who handle hazardous waste within six weeks of hiring or being assigned to a job that handles hazardous waste. He also stated that annual refresher training is conducted. I asked Mr. Groth who conducts the training. He stated that all training is online with Lion Technology. Copies of training records for Mr. Groth are included in Attachment 17 as examples of the training documentation maintained at the facility. I reviewed the written job descriptions for Mr. Groth, Mr. Kessel, and Ms. Beckner and did not observe any deficiencies related to job descriptions or titles. A copy of the Job Description for an Environmental Health and Safety Manager is included as Attachment 18.

9. Summary of Preliminary Findings

In summary, as part of the CEI, I made the following preliminary findings:

- (1) Failure to label three satellite containers with an indication of the nature of the hazard as required by 40 CFR 262.15(a)(5)(ii) (**NOPF No. 1**).
- (2) Failure to keep a satellite container closed when not adding or venting as required by 40 CFR 262.15(a)(4) (**NOPF No. 2**).
- (3) Failure to inspect a hazardous waste container accumulation area on a weekly basis as required by 40 CFR 262.17(a)(1)(v) (**NOPF No. 3**).
- (4) Failure to label several hazardous waste accumulation containers with an indication of the nature of the hazard as required by 40 CFR 262.17(a)(5)(i)(B) (**NOPF No. 4**).

- (5) Failure to mark one hazardous waste accumulation container with an accumulation start date as required by 40 CFR 262.17(a)(5)(i)(C) (**NOPF No. 5**).
- (6) Storage of hazardous waste beyond 90 days without a RCRA permit as required by RCRA 3005 (**NOPF No. 6**).
- (7) Failure to indicate the nature of the hazard on a hazardous waste tank as required by 40 CFR 262.17(a)(5)(ii)(B) (**NOPF No. 7**).

Other than items specifically noted in the narrative, I observed no additional issues. However, further review by EPA may change or add to my findings.

Clifford A. Nelles

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Clifford A. Nelles, Inspector
CLAENE Group

AMBER WHISNANT

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Amber Whisnant, Section Chief
ECAD/CB/RCRA, EPA Region 7

Attachments:

1. Notification Acknowledgement/Verification Report (2 pages)
2. Receipt for Documents and Samples (1 page)
3. Confidentiality Notice (1 page)
4. Notice of Preliminary Findings (1 page)
5. Site Map (1 page)
6. Google Earth Aerial Photograph of Facility (1 page)
7. Photographic Documentation (Photolog and 16 Photographs) (11 pages)
8. 2021 Biennial Report (7 pages)
9. Hazardous Waste Tracking Spreadsheet (7 pages)
10. TCLP Analytical for Selenium Sludge (1 page)
11. Email from Scott Groth of Timeline of Tank Shipments (6 page)
12. SDS for Acetonitrile (9 pages)
13. SDS for Nitric Acid (9 pages)
14. Copy of Inspection Log for October 2020 (1 page)
15. Manifests and LDRs for Shipments on September 16, 2022 and October 17, 2022 (4 pages)
16. Contingency Plan and Quick Reference Guide (33 pages)
17. Training Records Groth (4 pages)
18. Job Description Groth (4 pages)