

REPORT OF RCRA COMPLIANCE EVALUATION INSPECTION

DCW CASING LLC

1001 3rd Street NW
Oelwein, Iowa 50662
(319) 283-1782

EPA RCRA ID No. IAR000503912

On

April 29, 2024 and May 1, 2024

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 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 DCW Casing LLC (DCW), at 1001 3rd Street NW in Oelwein, 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, used oil, and universal waste requirements as applicable. This report and its attachments present the findings of the CEI.

PARTICIPANTS

DCW:

Damon Herbst, Facility Manager
James Mochat, Production Supervisor
Matt McCulinich, Maintenance Manager

Toeroek Team:

Steve Johnson, Inspector, (816) 520-7009

INSPECTION PROCEDURES

Prior to the CEI on April 29, 2024, I conducted a drive-by visual inspection of the facility. I did not observe any areas of concern during the drive-by inspection. Most of the employee parking and all dock/transport locations were empty of vehicles or trailers. Upon conclusion of the drive-by inspection, I entered the main lobby entrance on the southeast corner of the building and approached the reception desk. I introduced myself to the receptionist, presented my EPA credentials, and explained the purpose of the CEI. She contacted Mr. Herbst to inform him of my arrival. Mr. Herbst met me in the reception lobby approximately 3 minutes later. I introduced myself to Mr. Herbst and explained the purpose and scope of the CEI. Mr. Herbst escorted me to an adjacent conference room where I proceeded to conduct an entry briefing with him.

During the entry briefing, I presented my EPA credentials to Mr. Herbst. I explained the scope and procedures for conducting the CEI. I explained the facility's right to make confidentiality claims and provided a Notice Regarding Proprietary/Confidential Business Information. I stated that at the conclusion of the CEI, he would be presented with a Confidentiality Notice (Notice) with which he could make or not make a claim of confidentiality for the facility. I also provided Mr. Herbst 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 he read.

A copy of each of the following documents was left with the facility during the inspection:

- RCRA Facility Access Information Sheet
- Mr. Trevor Urban's contact information
- 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

The following documents were transferred electronically to Mr. Herbst via email on May 1, 2024:

- U.S. EPA Small Business Resources Information Sheet
- Chemical Facility Anti-Terrorism Standards
- E-Manifest Fact Sheet: Generators
- Managing Your Hazardous Waste: A Guide for Small Businesses
- Part 279 Requirements: Used Oil Management Standards
- EPA Region 7 Emergency Response Program
- Recycling Electronics: A Guide for Businesses
- Battery Recycling/Disposal
- Management of Fluorescent Lamps for Businesses
- Incompatible Chemicals
- Universal Wastes – Including Aerosol Cans
- TCLP – Toxicity Characteristic Leaching Procedure
- Iowa Environmental Guide for Businesses

I reviewed the Notification Acknowledgement/Verification Report (Verification Report) with Mr. Herbst (Attachment 1). During this review, Mr. Herbst explained that the previous facility manager, Mr. Tim Hadden, passed away a little more than a year ago. The previous facility supervisor, Ms. Angela Nading-Annis, left the company a few months later. Mr. Herbst was recruited and transferred to the area approximately one year ago to assume the position of Facility Manager. He explained that he had limited experience with RCRA regulations and was still learning the requirements applicable for the facility. I revised the Site Contact Information section of the Verification Report to indicate Mr. Herbst as the site contact. I made no other changes to the Verification Report.

I conducted the visual inspection on April 29, 2024, accompanied by Mr. Herbst. Mr. Herbst explained the manufacturing processes and wastes generated in each area during the visual inspection. I observed all process, support, and storage areas at the facility.

Following the visual inspection, I attempted to perform a review of facility records such as waste shipping records, waste profiles, training records, inspection records, contingency plan, and air emission records related to Subparts BB and CC compliance. Mr. Herbst stated that he was not familiar with the location of these records. During his searches, Mr. Herbst located and provided a copy of a Hazard Communication Plan (Attachment 2), daily forklift inspection records and various daily preventative maintenance records for production equipment. However, he was unable to initially find the waste-related records I requested.

In an effort to avoid unproductive time while waiting for records to be located, I stated that I would leave the facility to allow staff to find the requested records. I returned to the facility on May 1, 2024, to conduct a review of available records and complete the inspection. I prepared and completed a site-specific inspection checklist to document my observations.

I conducted an exit briefing on May 1, 2024, with Mr. Herbst. During the exit briefing, I provided a Receipt for Documents and Samples, which Mr. Herbst signed, acknowledging receipt (Attachment 3). I provided Mr. Herbst the Notice, which he signed indicating no confidential business information had been provided (Attachment 4). I also provided Mr. Herbst a Notice of Preliminary Findings (NOPF), which he signed to acknowledge receipt (Attachment 5).

A scaled diagram of the facility was obtained during the CEI and is in Attachment 6. Aerial photographs of the facility were downloaded after the CEI and are in Attachment 7. The 28 photographs taken during the CEI are in Attachment 8. Of those photographs, 27 are discussed in this report.

FINDINGS AND OBSERVATIONS

1. Facility Description and General Information

DCW manufactures the blood anticoagulant heparin. Heparin prevents vascular sub-cellular components from spontaneously adhering. Raw materials used in the normal production process include processed and un-processed porcine mucous membranes (mucosae), sodium hydroxide, polymer adsorptive resins and ethyl alcohol. The facility has several distinct

manufacturing and operational areas, including: Digestion Area, Process Area 2, Brine Room, Weigh Room, Process Area 1, Precipitation Area/Ethanol Room (containing two precipitation tanks and a wastewater tank), Quality Control (QC) Lab, Product Storage Warehouse, Cooler Areas in Rooms 1-3, Cooler Area 4, and Truck Load Out (Attachment 6). A process flow diagram obtained during the CEI is in Attachment 9. Support services are provided through the Maintenance Shop/Physical Plant, and the General Office Area.

DCW consists of a single building with 48,375 square feet under roof (Attachment 8, Photographs 27 and 28). The facility has been operating at its current location since December 2018 when it was purchased from Abraxis Bioscience, LLC. Presently, the facility is owned by DAT-Shaub as an operating division of Danish Crown Corporation. DCW currently employs ten personnel who work one shift (7:00 a.m. to 4:30 p.m. Monday through Thursday and 7:00 a.m. to 11:30 a.m. Friday). However, Mr. Herbst explained that current market conditions and the cost of raw feed stock components had reduced production significantly. At the time of CEI, the facility had no active production orders and had idled the main process equipment indefinitely.

Under normal operations, raw mucosae are transferred to the Digestion Area serial tanks where sodium hydroxide is added to begin the digestion process. According to Mr. Herbst, the digestion tanks have been idled for more than 6 months. The current process at the facility is limited to the extraction of heparin and heparinoids from adsorptive resins received from off-site sources. Depending upon the origin of the adsorbed heparin, the individual 55-gallon polyethylene drums are stored in separate rooms. Saturated resins from South American sources are held pending sterilization prior to process introduction.

Presently, concentrated heparin in resin matrix received from off-site sources is extracted by adding a 3% saltwater solution in the elution process. Eluted heparin concentrate is then transferred to the idled Digestion Room for precipitation (crystallization) via addition of ethanol, then final filtration through small capacity filter presses and a dual-cannister 0.5-micron ultra-filtration device. The product is then rendered down to approximately 130-gallon batches that are transferred to final precipitation and drying before packaging as a heparin sodium salt. Final product is stored in an enclosure labeled as Cooler 1.

Wastewater from floor drains, floor cleaning, and tank washouts are transferred to one of two 10,000-gallon wastewater aboveground storage tanks (AST) in the neutralization area. The pH of the wastewater is tested and adjusted as needed prior to discharge to the City of Oelwein publicly owned treatment works (POTW). Accordingly, the process wastewater is considered exempt from the definition of solid waste per Title 40 *Code of Federal Regulations* (40 CFR) 261.4(a)(1)(ii). Wash water is not discussed further in this report

Manufacturing operations generate waste ethanol solution and deionization salt waste. Waste ethanol solution is generated from the crystallization process and is considered hazardous waste by product and process knowledge. The waste is transferred via elevated closed-system piping to a 7,600-gallon aboveground hazardous waste accumulation tank on the west side of the facility. Waste ethanol solution is shipped off site for energy recovery or fuel blending. Deionization salt waste is considered nonhazardous based on product and process knowledge, and is returned to the vendor for regeneration or disposed in the general trash.

Facility and equipment maintenance generate used oils and lubricants, waste lamps, waste batteries, spent absorbents and rags, and general trash. Used oils and lubricants are managed according to provisions of 40 CFR Part 279. The facility transports the waste to a local used oil collection center. Waste lamps and waste batteries are managed according to provisions of 40 CFR Part 273 and are shipped off site for recycling. Used absorbents and rags are considered nonhazardous based on product and process knowledge and are disposed in the general trash. General trash is collected for disposal at the Black Hawk County Landfill.

On February 7, 2020, DCW was inspected by an EPA contractor. During the CEI, the inspector made the following preliminary findings:

- Failure to accumulate waste lamps in a closed container, as required by 40 CFR 273.13(d)(1) (**NOPF No. 1**).
- Failure to demonstrate the length of time that universal waste has been accumulated, as required by 40 CFR 273.15(c) (**NOPF No. 2**).
- Failure to maintain a RCRA Contingency Plan, as required by 40 CFR 262.17(a)(6) Referencing 262.260(a) (**NOPF No. 4**).
- Failure to train employees on elements of a RCRA Contingency Plan, as required by 40 CFR 262.17(a)(7)(i)(C) (**NOPF No. 5**).

These preliminary findings were not repeated during this CEI.

After the inspection, EPA issued an additional two findings related to air emissions standards:

- Failure to label equipment so that it can be distinguished readily from other pieces of equipment, as required by 40 CFR 265.1050(c)
- Failure to maintain records related to a leak from equipment and to identify equipment requiring repair, as required by 40 CFR 265.1064(b)(1)

2. RCRA Status

DCW Casings was 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 confirmed DCW Casing's LQG status through a review of current operations, interviews with Mr. Herbst, and a review of waste disposal records (uniform hazardous waste manifests). However, according to Mr. Herbst, current operating conditions are expected to reflect a marked reduction in the manifested volume of waste ethanol solution generated, stored and transported in CY 2024.

Based on my review of uniform hazardous waste manifests, the facility generated approximately 30,100 gallons of waste ethanol solution in 2023. That equates to an average generation rate of approximately 2,508 gallons per month. Assuming 7 pounds per gallon, I calculated the monthly generation rate to be approximately 17,600 pounds (7,990 kg) of hazardous waste ethanol solution per month. Manifested volumes of waste ethanol solution in 2024 (10,300 gallons) indicate an average monthly generation rate of 18,000 pounds (8,060 kg) per month. Copies of the 2023 and 2024 manifests are in Attachment 10. Based on these manifests, I inspected DCW as a LQG of hazardous waste. I also inspected DCW as a small-quantity handler (SQH) of

universal waste (accumulating less than 5,000 kg of universal waste at any time) as well as a used oil generator.

During the visual inspection, I observed all process, support, and storage areas at the facility. Representative photographs of product staging and process areas are in Attachment 8, Photographs 1 through 4, 7 through 19, and 24. I also observed all waste accumulation areas, including the facility's hazardous waste central accumulation area (HWCAA) and aboveground hazardous waste accumulation tank. No hazardous waste satellite accumulation areas (SAA) were observed during the CEI.

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 final disposition. DCW and its designated waste handlers have reportedly performed hazardous waste determinations for all waste materials generated at the facility. Written records of waste profile information were not retrieved for presentation during inspection. The following discussion of waste streams is based on my interview with Mr. Herbst, the visual inspection, and my review of available documentation. Messrs. Mochat and McCulinich were also interviewed during visual inspection.

Waste ethanol solution is generated from the crystallization and condensing processes of the production system. The facility considers waste ethanol solution to be hazardous (D001) based on product and process knowledge. Manifest records indicate a generation rate of approximately 8,060 kg per month in 2024 to date. However, due to current operating conditions, the facility expects a reduced generation rate in the immediate future. The majority of the waste ethanol solution is retrieved from the process tank and transferred through a closed system to a dedicated 7,600-gallon aboveground hazardous waste storage tank. Smaller volumes are sporadically collected in 55-gallon hazardous waste accumulation containers (HWAC). The waste is transported to one of several permitted energy recovery facilities in Illinois, Indiana and Missouri.

During the CEI, I observed the hazardous waste accumulation tank (Attachment 8, Photograph 20). The tank appeared to be structurally sound, was labeled with the words "hazardous waste" and an indication of the nature of the hazard, and was empty. According to manifest records (Attachment 10), waste was last removed from the tank on April 27, 2024. No waste ethanol solution was in accumulation in the facility's HWCAA at the time of the CEI.

Used oils and lubricants are generated during the maintenance of compressors and are managed collectively as used oil in accordance with 40 CFR Part 279. Service and maintenance of compressors is performed by a contractor (Ingersoll-Rand). The waste is transferred to a 55-gallon used oil storage container by DCW maintenance staff from the contractor's containers immediately following generation. The facility generates less than 45 gallons of used oil per year. Mr. McCulinich transports used oil to Avalon Tire and Service Center in Oelwein, Iowa, for recycling. Avalon Tire and Service Center is a recognized used oil collection center, and less than 55 gallons are transported per trip in a facility-owned vehicle.

During the CEI, I observed a 55-gallon used oil storage container that held less than 5 gallons of used oil. The container was structurally sound and labeled with the words “used oil.” I noted no deficiencies with management of used oil during the CEI.

Waste batteries are generated during equipment maintenance, and include lead-acid, lithium-ion, and alkaline batteries. DCW manages all waste batteries as universal waste as regulated by 40 CFR Part 273. The facility generates approximately 60 to 90 pounds of waste batteries per year based on transport records. Waste batteries are accumulated in 5-gallon universal waste accumulation containers in the Maintenance Shop office. Waste batteries are shipped in their accumulation containers approximately every 11 months to Veolia Environmental Services in Port Washington, Wisconsin, for recycling.

During the CEI, I observed a 5-gallon universal waste accumulation container in the Maintenance Shop office that held waste alkaline and lithium batteries (Attachment 8, Photograph 25). The container was structurally sound, labeled with the words “used batteries”, and marked with an accumulation start date of April 10, 2024. I noted no deficiencies with accumulation of waste batteries.

Waste lamps consist of waste 4-foot fluorescent lamps generated from maintenance of facility lighting. Waste lamps are managed as universal wastes as regulated by 40 CFR Part 273. The facility generates approximately 80 to 90 pounds of waste lamps per year based on transport records. The waste is accumulated in a fiberboard container in the Maintenance Shop parts room. Waste lamps are shipped to Veolia Environmental Services in Port Washington, Wisconsin, for recycling.

During the CEI, I observed a universal waste accumulation container in the Maintenance Shop parts room that held waste lamps (Attachment 8, Photograph 26). I did not note the quantity of waste lamps in accumulation. The container was structurally sound, closed, and marked with an accumulation start date of July 26, 2023. However, the container was not labeled with the words “universal waste lamps” or “waste lamps” or “used lamps,” as required by 40 CFR 273.14(e) (NOPF No. 11). I provided compliance assistance regarding labeling of universal waste accumulation containers during the CEI.

Deionization salt waste is generated when routine cycling of the water treatment salts results in sporadic generation of spent solids. The facility estimated that less than 140 pounds of deionization salt waste is generated per year. The waste is considered nonhazardous based on product and process knowledge. When generated, deionization salt waste is returned to the vendor (Culligan) through the service contract for regeneration or is disposed with the general trash. I did not observe deionization salt waste in accumulation during the CEI.

Used absorbents and shop rags consist of absorbent pads and shop rags (oily rags) used for general cleaning and spill cleanup of nonhazardous materials or wastes. The facility estimated that less than 25 pounds of used absorbents and shop rags are generated per month. The waste is considered nonhazardous based on product and process knowledge. Used absorbents and shop rags are accumulated in 35-gallon containers throughout the facility and are disposed with the general trash.

During the CEI, I observed used absorbents and shop rags in accumulation in 35-gallon open steel containers. The accumulation containers were structurally sound and labeled to identify the contents. No free liquids were observed in the accumulation containers. I noted no deficiencies with management of used absorbents and shop rags during the CEI.

General trash consists of office waste, dunnage and packaging waste, wood waste, and other wastes unrelated to the production processes. The waste stream also includes deionized salt waste and used absorbents and shop rags generated on the production floor. The facility considers general trash to be nonhazardous based on product and process knowledge. The waste is accumulated in several containers throughout the facility and transferred to a 4-cubic-yard front-load trash container adjacent to the building. General trash is collected by Black Hawk Disposal Services for disposal at the Black Hawk County Landfill. During the CEI, I observed accumulation of general trash in the facility and in the outdoor front-load container. I noted no deficiencies with management of general trash or presence of impermissible waste.

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 possibility of a fire, explosion, or spill, and must maintain emergency response equipment. During the CEI, I observed no evidence of spills or leaks from any process equipment or tanks. I observed mobile spill kits in the Warehouse, Digestion Room, and near the Maintenance Shop entrance available for emergency response (Attachment 8, Photograph 16). Class B-C 20-lb fire extinguishers were present at multiple locations throughout the plant. All were inspected and maintained under contract by Pro-Shield on a monthly schedule. Two (2) 20-lb devices were observed at the outdoor tank farm. I observed the foam fire suppression system serving the building, and evacuation maps posted throughout the facility (Attachment 8, Photographs 5 and 6). I noted no deficiencies with required response equipment and hazardous management during the CEI.

5. Hazardous Waste Accumulation Tank

Waste ethanol solution generated from the crystallization process is transferred via elevated closed-system piping to a 7,600-gallon above-ground hazardous waste accumulation tank located in an outdoor tank farm on the west side of the facility. I observed the tank farm during the CEI. The tank farm was served by a single concrete access roadway with the loading zone sloped to a grated, blind collection sump. An identical tank was located south of the hazardous waste accumulation tank for storage of feedstock ethanol for the separation process. The tank system included a concrete containment structure that appeared capable of holding the volume of a single tank as well as the volume of a 24-hour, 25-year precipitation event. The tanks were fitted with pressure/vacuum (P/V) conservation vents and fluid level-high level electronic monitors linked to a digital display at the loading pad.

The hazardous waste accumulation tank was labeled with the words “hazardous waste” and an indication of the nature of the hazard (Attachment 8, Photograph 20). I noted the hazard descriptor (DOT Class 3 Flammable placard) was legible but degraded. Mr. Herbst stated that a new placard would be placed on the tank as soon as possible.

I observed stormwater accumulation within the containment structure and load pad sump. The volumes were minimal as shown in Attachment 8, Photographs 21 and 23. Mr. Herbst stated that stormwater is typically removed within 24 hours after precipitation events ended. The facility received rainfall approximately 8 hours prior to the CEI.

During the records review, I asked Mr. Herbst for records associated with installation and assessment of the hazardous waste accumulation tank, such as an installation inspection performed by an independent professional engineer (PE) and certification statements of design. Mr. Herbst was able to locate a specification sheet for the tank, an emissions analysis report dated August 13, 2021, and a P/V conservation vent application worksheet from July 2019 (Attachments 11 through 13). However, he could not locate the certification statements of design or installation inspection records. Based on the lack of documentation available for review during the CEI, the facility failed to maintain certification statements of design and inspection, as required by 40 CFR 262.17(a)(2) Referencing 40 CFR 265.192(g) **(NOPF No. 9)**.

I asked Mr. Herbst if the tank system is inspected. He stated no current inspections are performed at the tank system. Mr. Herbst stated that daily inspections of the tank system and ancillary equipment were being performed informally by the Production Supervisor; however, formal inspections with written logs have not been performed for several months. Based on the lack of documentation, the facility failed to perform and document daily or weekly inspections of the tank system and data, as required by 40 CFR 262.17(a)(2) Referencing 40 CFR 265.195(a) and (g) **(NOPF No. 10)**.

During my review of uniform hazardous waste manifests, I noted consecutive shipments of waste ethanol solution on October 23, 2023, and February 7, 2024 (107 days between shipments). Mr. Herbst could not locate any records to demonstrate that the 90-day hazardous waste accumulation limit had not been exceeded. Based on the lack of documentation, the facility failed to maintain inventory logs or other records to demonstrate that the hazardous waste tank has been emptied within 90 days, as required by 40 CFR 262.17(a)(5)(ii)(C) **(NOPF No. 20)**.

The records described above may exist, but could not be located during the CEI. I provided compliance assistance regarding recordkeeping for a hazardous waste accumulation tank system.

6. HWCAA

At the time of the CEI, the HWCAA that is used to sporadically accumulate 55-gallon HWACs of waste ethanol solution was empty. According to manifest records, the last shipment of containerized waste ethanol solution occurred on May 22, 2023. I observed requisite warning and safety signage posted on the outer doorway, and no evidence of spills or leaks in the HWCAA.

I asked Mr. Herbst if the HWCAA is inspected. He stated that no inspections are performed at the idled HWCAA. No records, such as inspection logs, were located during the CEI to determine if weekly inspections were performed when the HWCAA was in use.

7. Manifests, Bills of Lading, Biennial Report

DCW generated seven uniform hazardous waste manifests in 2023 and 2024 to date. I reviewed all seven manifests and associated land disposal restriction (LDR) notifications during the CEI (Attachment 10). The two LDR notifications from this time period presented for my review (Attachment 10, pages 1 and 12 through 15) did not include associated manifest numbers, as required by 40 CFR 262.17(a)(9) Referencing 40 CFR 268.7(a)(2) (**NOPF No. 21**).

According to Mr. Herbst, DCW did not submit a 2023 Hazardous Waste Biennial Report in 2024. No record of a biennial report submittal was returned during a query of EPA's RCRAInfo database after the CEI. I determined that the facility failed to submit a Hazardous Waste Biennial Report for the 2023 reporting year, as required by 40 CFR 262.41 (**NOPF No. 8**). I provided compliance assistance regarding biennial reporting during the CEI.

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 discussed personnel training requirements with Mr. Herbst. He stated that he knew that personnel assigned to waste management receive initial training and some form of annual RCRA handling and contingency training. However, he was unfamiliar with the scope of training or location of the personnel training plan and associated records. In addition, he stated that he had not received RCRA-specific training. Mr. Herbst is the designated emergency coordinator (EC) for the facility.

Upon my return to the facility on May 1, 2024, Mr. Herbst provided records of current contingency plan and material/waste handling training provided to personnel handling hazardous waste (Attachment 14). He could not locate training records for prior years or written elements of a training plan.

Based on the lack of documentation available for review and my interviews with Mr. Herbst, I made the following preliminary findings related to personnel training during the CEI:

- Failure to ensure the designated instructor is trained in hazardous waste management procedures, as required by 40 CFR 262.17(a)(7)(i)(B) (**NOPF No. 6**)
- Failure to prepare a written description of type and amount of introductory and continuing training, as required by 40 CFR 262.17(a)(7)(iv)(C) (**NOPF No. 7**)
- Failure to train hazardous waste personnel in a way that ensures compliance with RCRA regulations, as required by 40 CFR 262.17(a)(7)(i)(A) (**NOPF No. 13**)
- Failure to provide annual refresher training, as required by 40 CFR 262.17(a)(7)(iii) (**NOPF No. 16**)
- Failure to track specific job titles and names of employees filling positions, as required by 40 CFR 262.17(a)(7)(iv)(A) (**NOPF No. 17**)
- Failure to have written job descriptions with skills, education or qualification, and duties for each job title, as required by 40 CFR 262.17(a)(7)(iv)(B) (**NOPF No. 18**)
- Failure to maintain documentation confirming training on all subjects has been completed, as required by 40 CFR 262.17(a)(7)(iv)(D) (**NOPF No. 19**)

- Failure to maintain training records of current employees and for 3 years of former employees, as required by 40 CFR 262.17(a)(7)(v) (**NOPF No. 20**)

I provided compliance assistance regarding training and training documentation during the CEI.

9. Preparedness and Prevention and Contingency Plan

As a LQG, DCW is required to arrange for emergency response with local emergency agencies, to designate an EC for the facility, and maintain a RCRA Contingency Plan. Based on discussions with Mr. Herbst on April 30, 2024, I initially included failure to designate an EC and failure to maintain a Contingency Plan on the NOPF form as preliminary findings No. 1 and 3. However, upon my return to the facility on May 1, 2024, Mr. Herbst provided a copies of the facility's Contingency Plan/Emergency Procedures Plan (Attachment 15), Evacuation Plan (Attachment 16), and Spill Prevention, Control and Countermeasures Plan (Attachment 16). The plan was last updated on July 21, 2023.

The Contingency Plan was last updated on July 2023. I noted the plan included a description of actions needed to respond to fires, explosions, and spills; a description of arrangements with the local emergency agencies; a list of emergency response equipment (including capabilities and location); and a complete evacuation plan with a description of the signals used, as required by 40 CFR 262.17(a)(6) referencing 262.261(a, c, e, and f). The Contingency Plan also included names and telephone numbers of the primary EC (Mr. Herbst) and alternate coordinators. The first alternate coordinator (Ms. Nading-Annis) is no longer an employee at the facility. I noted this discrepancy to Mr. Herbst. He stated that a new alternate coordinator would be appointed as soon as requisite training could be completed. The facility failed to update the Contingency Plan when the list of emergency coordinators changed, as required by 40 CFR 262.17(a)(6) Referencing 40 CFR 262.263(a)-(e) (**NOPF No. 4**).

The facility's Contingency Plan did not contain a Quick Reference Guide, as required by 40 CFR 262.17(a)(6) referencing 262.262(b) (**NOPF No. 5**).

The Contingency Plan and Evacuation Plan (Attachment 16) were reportedly shared with local response authorities via direct mail and via email. According to the Contingency Plan, no arrangements with these authorities are required due to the limited volume of hazardous waste accumulated on site. Mr. Herbst could not locate any records documenting the arrangements with response agencies or the effort to make arrangements where none exist, as required by 40 CFR 262.17(a)(6) Referencing 40 CFR 262.256(b) (**NOPF No. 2**).

I provided compliance assistance regarding content of the Contingency Plan and preparedness documentation requirements.

A subsequent call to the Oelwein Fire Department from Mr. Herbst on May 1, 2024, revealed that the department had received copies of the Contingency Plan and Evacuation Plan. In addition, fire department officers were reported to visit the plant at least once per year to go over procedures and validate current plans. The facility maintains a secure key box for fire department personnel to access at all times. Fire department visits are stated to be structured and unannounced.

10. Air Emissions: 40 CFR Part 265 Subparts AA, BB, CC

EPA regulations in 40 CFR Part 265, Subparts AA, BB, and CC apply to LQGs. If a LQG manages hazardous waste with an organic concentration greater than 10 parts per million by weight (ppmw), the standards specified in Subpart AA apply to hazardous waste air emissions from certain process vents. A process vent used in distillation, fractionation, solvent extraction, thin-film evaporation, air stripping, or steam stripping is regulated by Subpart AA. DCW Casing is not subject to the Subpart AA regulations because the facility does not have any of the process vents listed above.

If a LQG has equipment that contains or contacts hazardous waste composed of 10 percent or greater organics by weight, the facility is subject to Subpart BB standards for inspection and monitoring of the equipment. DCW is subject to the Subpart BB regulations because it does have equipment (transfer pump) that contains, or comes in contact with, hazardous waste (Attachment 8, Photograph 22). The design of the pump (centrifugal) does not allow exclusion from monitoring and testing requirements specified in Subpart BB.

The standards found in Subpart CC apply to LQGs that manage hazardous waste in containers with organic compounds (VOC) concentration that exceeds 500 ppmw. The Subpart CC standards are applicable because the facility accumulates hazardous waste that contain VOCs in a dedicated aboveground storage tank and (on occasion) 55-gallon hazardous waste accumulation containers.

During the CEI, Mr. Herbst could not locate any documentation pertaining to Subparts BB and CC requirements. Based on the lack of documentation available for review, I determined that DCW failed to maintain records of equipment identification, testing, leak detection/repair, or other requirements for the hazardous waste tank system, as required by 40 CFR 262.17(a)(2) Referencing 40 CFR 265 Subparts BB and CC (**NOPF No. 12**).

11. Summary of Preliminary Findings

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

1. Rescinded (failure to designate an emergency coordinator)
2. Failure to maintain records documenting the arrangements with response agencies or the effort to make arrangements where none exist, as required by 40 CFR 262.17(a)(6) Referencing 40 CFR 262.256(b) (**NOPF No. 2**)
3. Rescinded (failure to prepare and maintain a Contingency Plan)
4. Failure to update the Contingency Plan when the list of emergency coordinators changed, as required by 40 CFR 262.17(a)(6) Referencing 40 CFR 262.263(a)-(e) (**NOPF No. 4**)
5. Failure to prepare a Quick Reference Guide, as required by 40 CFR 262.17(a)(6) referencing 262.262(b) (**NOPF No. 5**)

6. Failure to ensure the designated instructor is trained in hazardous waste management procedures, as required by 40 CFR 262.17(a)(7)(i)(B) **(NOPF No. 6)**
7. Failure to prepare a written description of type and amount of introductory and continuing training, as required by 40 CFR 262.17(a)(7)(iv)(C) **(NOPF No. 7)**
8. Failure to submit a Hazardous Waste Biennial Report for the 2023 reporting year, as required by 40 CFR 262.41 **(NOPF No. 8)**
9. Failure to maintain certification statements of design and inspection, as required by 40 CFR 262.17(a)(2) Referencing 40 CFR 265.192(g) **(NOPF No. 9)**
10. Failure to perform and document daily or weekly inspections of the tank system and data, as required by 40 CFR 262.17(a)(2) Referencing 40 CFR 265.195(a) and (g) **(NOPF No. 10)**
11. Failure to label a universal waste accumulation container with the words “universal waste lamps” or “waste lamps” or “used lamps,” as required by 40 CFR 273.14(e) **(NOPF No. 11)**
12. Failure to maintain records of equipment identification, testing, leak detection/repair, or other requirements for the hazardous waste tank system, as required by 40 CFR 262.17(a)(2) Referencing 40 CFR 265 Subparts BB and CC **(NOPF No. 12)**
13. Failure to train hazardous waste personnel in a way that ensures compliance with RCRA regulations, as required by 40 CFR 262.17(a)(7)(i)(A) **(NOPF No. 13)**
14. Rescinded (duplicate citation, designated RCRA instructor has insufficient training)
15. Rescinded (duplicate citation, failure to maintain training records)
16. Failure to provide annual refresher training, as required by 40 CFR 262.17(a)(7)(iii) **(NOPF No. 16)**
17. Failure to track specific job titles and names of employees filling positions, as required by 40 CFR 262.17(a)(7)(iv)(A) **(NOPF No. 17)**
18. Failure to have written job descriptions with skills, education or qualification, and duties for each job title, as required by 40 CFR 262.17(a)(7)(iv)(B) **(NOPF No. 18)**
19. Failure to maintain documentation confirming training on all subjects has been completed, as required by 40 CFR 262.17(a)(7)(iv)(D) **(NOPF No. 19)**
20. Failure to maintain training records of current employees and for 3 years of former employees, as required by 40 CFR 262.17(a)(7)(v) **(NOPF No. 20)**
21. Failure to include associated manifest numbers, as required by 40 CFR 262.17(a)(9) Referencing 40 CFR 268.7(a)(2) **(NOPF No. 21)**
22. Failure to maintain inventory logs or other records to demonstrate that the hazardous waste tank has been emptied within 90 days, as required by 40 CFR 262.17(a)(5)(ii)(C) **(NOPF No. 20)**

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.

Steve A.
Johnson

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A. Johnson
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Date: _____

Steve A. Johnson
Field Inspector
CLAENE Group, LLC.

AMBER
WHISNANT

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WHISNANT
Date: 2024.07.10 11:27:26 -05'00'

Date: _____

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

Attachments

1. Notification Acknowledgement/Verification Report (1 Page)
2. Hazard Communication Plan (14 Pages)
3. Receipt for Documents and Samples (1 Page)
4. Confidentiality Notice (1 Page)
5. Notice of Preliminary Findings (2 Pages)
6. Facility Diagram (1 Page)
7. Google Earth Aerial Photographs (2 Pages)
8. Photographic Documentation (Photolog and 28 Photographs) (19 Pages)
9. Facility Process Flow Diagram (1 Page)
10. Hazardous Waste Manifest and LDR Notification Documents (15 Pages)
11. Hazardous Waste Tank Specifications Sheet (1 Page)
12. Hazardous Waste Tank Emissions Analysis (3 Pages)
13. P/V Conservation Vent Application (1 Page)
14. Current Contingency Plan Training Records (4 Pages)
15. Contingency and Emergency Preparedness Plan (11 Pages)
16. Emergency Evacuation Plan (4 Pages)
17. SPCC Plan (24 Pages)