

REPORT OF RCRA COMPLIANCE EVALUATION INSPECTION

At

**Essex Industries Inc. Mfg.
Division**
6 Sunnen Drive
St. Louis, Missouri 63143-2800
(314) 832-4500

EPA ID Number: MOD981508526

On

September 27 and 28, 2023

By

U.S. ENVIRONMENTAL PROTECTION AGENCY
Region 7
Enforcement & Compliance Assurance Division (ECAD)

1.0 INTRODUCTION

I performed a Resource Conservation and Recovery Act (RCRA) compliance evaluation inspection (CEI) at Essex Industries Inc. Mfg. Division (Essex), located in St. Louis, Missouri, on September 27 and 28, 2023. I conducted the inspection under the authority of RCRA Section 3007(a), as amended. During the inspection, I collected the information necessary to determine compliance with the applicable regulatory and statutory requirements. This report and attachments present the results of the inspection. Based on the information obtained during the inspection, I inspected the facility as a Large Quantity Generator (LQG) of hazardous waste, a small quantity handler of universal waste, and a used oil generator. Essex was last inspected for RCRA compliance on February 5, 2019, by the Missouri Department of Natural Resources (MoDNR). Fifteen potential findings or violations were observed or cited as a result of the 2019 MoDNR RCRA inspection.

2.0 PARTICIPANTS

Essex:

Kurtis Mueller, Maintenance Lead

U.S. Environmental Protection Agency (EPA):

Timothy Evans, Life Scientist, ECAD

3.0 INSPECTION PROCEDURES

On September 27, 2023, I arrived at the facility at approximately 2:00 p.m. A drive-by inspection was possible on all sides of the facility. No apparent issues were observed. I then proceeded to the facility main entrance where I used an intercom to call and ask for Ronald Miller, who was listed as site contact on the Notification Acknowledgement/Verification Report form (Attachment 6). I was greeted by Corey Waldman and Kurtis Mueller. Mr. Mueller then escorted me to a conference area on the second floor of the facility building for the in-briefing. I provided Mr. Mueller with my business card, and I presented my EPA credentials. During the in-briefing, I presented Mr. Mueller with a copy of the Notification Acknowledgement/Verification Report form and asked if all information appeared to be accurate. I then presented Mr. Mueller with the RCRA Facility Access Information Sheet, March 2013, which provides inspection authority. I also explained my need to collect accurate information and presented Mr. Mueller with a copy of Title 18 U.S. Code, Sections 1001 and 1002. As part of the in-briefing, Mr. Mueller was made aware of Essex's confidentiality rights and informed that a Confidentiality Notice would be provided at the end of the inspection to make, or not to make, any claims. Mr. Mueller acted as the facility representative during the on-site inspection activities.

During the inspection, discussions consisted of wastes generated and waste management practices. Document photocopies and photographs were collected as inspection documentation (see Attachments 1-10, including Photos 1-29).

Because the facility first shift ended at 3:00 p.m., I was only able to complete an in-briefing on September 27, 2023. At approximately 8:00 a.m. on September 28, 2023, I began a visual inspection of the following areas:

Less Than 90-Day Accumulation Area
Machine Shop
Product Storage
Area Adjacent to Workstation 1212
Staging Area/X-ray Area WS 1704
Staging
Degreaser Area
Penetrant Inspection Room
Mechanical Assembly Department (Outside and East of White Room Testing)
White Room Testing
Final Inspection
Outside and South of Final Inspection
Induction Welding Room
Processing Department
Anodizing Room
Fuel Test Equipment Room
Equipment Room
Hydraulic Testing
Fuel Lab/Fuel Test
Dimensional Inspection

Electrical Assembly (T7A Room)
Electrical Testing
Flammable Storage Cabinet Between Electrical Testing and Electrical Assembly
Electrical Assembly
Electrical Assembly Training Room
Potting Room
Wire Room
Paint Booth
Area Outside and North of Paint Booth
Expired Chemical Flammable Storage Cabinet
Maintenance

Information collected during the inspection was documented in a bound field note logbook and as discussed below.

At the conclusion of the inspection on September 28, 2023, I summarized the findings and recommendations with Mr. Mueller. I provided Mr. Mueller with a Confidentiality Notice (Attachment 3) which he signed as acknowledgement of receipt. Mr. Mueller made a confidentiality claim for one photo showing parts in the process of being assembled in the Mechanical Assembly Department. I provided Mr. Mueller with a Receipt for Documents and Samples (Attachment 4) and Notice of Preliminary Findings (NOPF) (Attachment 5), which Mr. Mueller signed as acknowledgement of receipt.

The following inspection documents were provided to Essex:

Inspection Documents

Confidentiality Notice

*Notice Regarding Proprietary/Confidential Business Information Submitted to or Collected by
EPA In Connection with Inspections*

Receipt of Documents and Samples

NOPF

EPA Compliance Assistance Handouts (Provided by e-mail on September 29, 2023)

U.S. EPA Small Business Resources

EPA Industry Sector Notebooks List

EPA Compliance Assistance Centers

EPA Compliance Assistance Handouts (Provided at time of inspection)

EPA Solvent-Contaminated Wipes Final Rule

E-Manifest Fact Sheet

E-Manifest Fact Sheet – Generators

MoDNR Compliance Assistance Handout (Provided at time of inspection)

EPA Solvent-Contaminated Wipes Checklist

I followed the inspection procedures discussed in the RCRA CEI Standard Operating Procedure (No. 2321.1E), unless noted differently.

Any federal regulatory citations noted in this report are as adopted by reference in the authorized Missouri regulations.

4.0 FINDINGS AND OBSERVATIONS

4.1 General Information/Facility Description and RCRA Status

As described in the 2019 MoDNR RCRA inspection report (Attachment 8), Essex is a manufacturer of aerospace parts that are primarily used by military and some commercial airlines. This site manufactures aircraft stick grips/joysticks, oxygen valves, hydraulic valves for landing gear, and various assembly parts for oxygen equipment (e.g., hydraulics, aircraft platform controls, etc.). The second floor of the two-story building consists of office space and conference rooms. The first floor of the building consists of the production and general storage areas. Manufacturing processes employed at the facility include, but are not limited to, machining metal, anodizing, painting, induction welding, and soldering.

Essex has been operating at this location since 1985. The office operates 8:00 a.m. until 4:30 p.m., Monday through Friday. The production area operates Monday through Friday, 6:00 a.m. to 2:30 p.m.; the Machine Shop operates two shifts from 6:00 a.m. to 2:30 p.m. and 2:30 p.m. to 11:00 p.m. Occasional weekend work occurs for production and machine shop personnel. See Attachment 2 for facility diagram and aerial photo.

Hazardous waste generated at the facility includes, but is not limited to:

- Paint related solid waste – D007, D035, F003, and F005;
- Waste paint material – D001;
- Waste methyl ethyl ketone (MEK) solvent – D035 and F005;
- MEK-contaminated wipes – F005;
- Isopropyl Alcohol, MEK, and Lysol-Contaminated Paper Wipes, Q-Tips, Nitrile Gloves, and Plastic Cups and Bags – Hazardous waste determination not conducted;
- Waste Sponges and Solder – Hazardous waste determination not conducted;
- Expired chemicals – Waste codes vary;
- Water base cleaner – D001 and D002;
- Waste acetone – F003;
- Solvent Parts Washer – D039;
- Waste Sulfuric Acid – D002

According to the RCRAInfo database, Essex has notified as an LQG of D001, D002, D005, D007, D018, D035, D038, and D039 characteristic hazardous waste and F003, F005, U002, U019, and U134 listed hazardous waste, last notifying on February 28, 2022. I provided Mr. Mueller with a Notification Acknowledgement/Verification Report form for review (Attachment 6). Mr. Mueller made no changes to the form. See Section 4.5.7 for additional information related to the Notification Acknowledgement/Verification Report form and associated facility waste codes. Based upon the amount and type of hazardous waste generated at Essex, I inspected the facility as an LQG of hazardous waste, a small quantity handler of universal waste, and a used oil generator.

4.3 Previous Inspection and Related Findings

Essex was previously inspected by the MoDNR on February 5, 2019. The 2019 MoDNR inspection report (Attachment 8) described the following potential findings or violations:

1. Generator did not determine if waste is hazardous pursuant to methods referenced in 40 CFR 262.11– 10 CSR 25-5.262(1) incorporating 40 CFR 262.11.
2. Satellite container not marked with words “Hazardous Waste” or with other words identifying the contents–10 CSR 25-5.262(2)(C)3 incorporating 40 CFR 262.34(c)(1)(ii).
3. Satellite containers not stored at or near any point of waste generation where wastes initially accumulate, which is under the control of the operator of the process generating the waste – 10 CSR 25-5.262(2)(C)3 referencing 40 CFR 262.34(c)(1).
4. Whenever hazardous waste is being poured, mixed, spread or otherwise handled, all personnel involved in the operation do not have immediate access to an internal alarm or emergency communication device, either directly or through visual or voice contact with another employee, unless such a device is not required under 265.32 – 10 CSR 25-5.262(1) incorporating 40 CFR 262.34(a)(4) referencing 40 CFR 265.34(a).
5. The generator’s name, mailing address and phone number (site address only if different from the mailing address) are not entered on the manifest (Item #5) – 10 CSR 25-5.262(1) incorporating 40 CFR 262.20(a)(1).
6. Waste codes most representative of the waste (federal and state codes) to describe each waste stream in Item #9 are not entered on the manifest (Item #13) – 10 CSR 25-5.262(1) incorporating 40 CFR 262.20(a)(1).
7. Notification/certification does not include correct EPA hazardous waste number, corresponding treatment standards, manifest number, and waste analysis data – 10 CSR 25-7.268(1) incorporating 40 CFR 268.7(b).
8. The personnel training plan is not maintained at the facility – 10 CSR 25-5.262(1) incorporating 40 CFR 262.34(a)(4) referencing 40 CFR 265.16(d).
9. The training plan does not give the job description for each position at the facility related to hazardous waste management. The descriptions must include the requisite skill, education, or other qualifications and duties of facility personnel assigned to each position – 10 CSR 25-5.262(1) incorporating 40 CFR 262.34(a)(4) referencing 40 CFR 265.16(d)(2).
10. Written description of type and amount of introductory and continuing training that will be given to each position not documented – 10 CSR 25-5.262(1) incorporating 40 CFR 262.34(a)(4) referencing 40 CFR 265.16(d)(3).
11. Contingency plan not submitted to all local police departments, fire departments, hospitals and state and local emergency response teams that may be called upon to provide emergency services – 10 CSR 25-5.262(1) incorporating 40 CFR 262.34(a)(4) referencing 40 CFR 265.53(b).
12. Contingency plan does not describe actions personnel must take in response to fires, explosions or any unplanned sudden or non-sudden releases of hazardous waste or hazardous waste constituents to air, soil or surface water at the facility – 10 CSR 25-5.262(1) incorporating 40 CFR 262.34(a)(4) referencing 40 CFR 265.52(a).

13. Contingency plan does not describe arrangements with local police departments, fire departments, hospitals, contractors and state and local emergency response teams to coordinate emergency services pursuant to 265.37 – 10 CSR 25-5.262(1) incorporating 40 CFR 262.34(a)(4) referencing 40 CFR 265.52(c).
14. Contingency plan does not list names, addresses and phone numbers (home and office) of all persons qualified to act as emergency coordinator(s) and the list is kept up to date. Where more than one is listed, the primary emergency coordinator is named, and others listed in the order in which they will assume responsibility as alternates – 10 CSR 25-5.262(1) incorporating 40 CFR 262.34(a)(4) referencing 40 CFR 265.52(d).
15. Containers/above ground tanks storing used oil not labeled or marked clearly “Used Oil” – 10 CSR 25-11.279(1) incorporating 40 CFR 279.22(c)(1).

4.4 Waste Streams and Waste Management

Information related to waste streams is listed in the Waste Stream Table (Attachment 7). It should be noted that Essex had previously notified the MoDNR of their intent to manage Satellite Accumulation Area (SAA) containers under the Federal regulations. SAA container management regulations can be found in the 2019 MoDNR inspection report, which includes the Hazardous Waste Large Quantity Generator Inspection Checklist (Attachment 8).

4.5 Areas Visually Inspected and Related Preliminary Findings

4.5.1 Facility-Wide

Hazardous Waste Determination Not Conducted, 10 CSR 25-5.262(1) referencing 40 CFR 262.11. (NOPF 1) - During inspection of the Staging Area for X-Ray, Mechanical Assembly, White Room Testing near Final Inspection, Processing Department, Hydraulic Testing, Fuel Lab/Fuel Test, Electrical Assembly, Electrical Assembly Training Room, Potting Room, Paint Booth, adjacent and north of Paint Booth, and Maintenance, I observed approximately 38 trash cans and containers, ranging in size from 2-55 gallons capacity, used to accumulate isopropyl alcohol, MEK, and Lysol-contaminated paper wipes, Q-Tips, nitrile gloves, and plastic cups and bags (Photos 5, 6, 8, and 9, 11-13, and 16-19). Lysol and isopropyl alcohol-contaminated waste is generated exclusively in the Electrical Testing Area.

When interviewing facility personnel within the Mechanical and Electrical Assembly Areas regarding use of isopropyl alcohol and MEK on Q-tips and paper wipes, some Essex employees indicated that they either separated isopropyl alcohol-contaminated Q-tips and paper wipes from MEK-contaminated waste or managed all isopropyl alcohol and MEK-contaminated waste separately from non-isopropyl alcohol and MEK-contaminated waste. However, many employees interviewed could not say if only isopropyl alcohol or MEK were on waste observed in step cans and trash cans. Therefore, it was not possible to determine if waste in some containers would be potentially D001 characteristic or F005 listed hazardous waste. It should be noted that multiple step cans were not labeled with either the words “Hazardous Waste” or “Excluded Solvent-Contaminated Wipes” and none of the trash cans I observed were closed.

Lysol and isopropyl alcohol-contaminated waste generated in the Electrical Testing Area would have the possibility of being a D001 characteristic hazardous waste but was not being managed in closed or labeled containers.

Because there didn't appear to be consistent management of lysol, isopropyl alcohol, and MEK-contaminated waste throughout the facility, I asked Mr. Mueller if a hazardous waste determination needed to be conducted for the material described above. Mr. Mueller stated that a hazardous waste determination needed to be conducted for the lysol, isopropyl alcohol, and MEK-contaminated waste generated throughout the facility.

4.5.2 Mechanical Assembly Department, Electrical Assembly Area, Electrical Assembly Training Room, and Wire Room

Hazardous Waste Determination Not Conducted, 10 CSR 25-5.262(1) referencing 40 CFR 262.11. (NOPF 1) - During inspection of the area east and outside of White Room Testing, within the Mechanical Assembly Department; the Electrical Assembly Area; and Electrical Assembly Training Room, I observed soldering guns in use (Photos 10 and 19). I also observed a soldering dip pot for use within the Wire Room. However, I did not observe any soldering scrap waste or sponges in the Wire Room at the time of the inspection. Wire Room personnel were not available at the time of the inspection to ask about possible generation of Wire Room solder-related waste.

I asked Beverly Miller, Mechanical Assembly Department, if the solder she used contained lead. According to Ms. Miller, the solder she used would contain lead. I asked Ms. Miller what happens to sponges when they become waste. Ms. Miller stated that she exchanges sponges at the Electrical Assembly Area. I asked Mr. Mueller if he knew what happens to sponges after they are taken to the Electrical Assembly Area. Mr. Mueller stated that he did not know what happens to the sponges when they become waste. Because Ms. Miller and Mr. Mueller did not know the final disposition of the solder-contaminated sponges generated at the facility, I asked Mr. Mueller if a hazardous waste determination needed to be conducted for any waste solder-contaminated sponges and solder scrap generated throughout the facility. Mr. Mueller stated that a hazardous waste determination needed to be conducted for the waste solder-contaminated sponges and solder scrap generated throughout the facility.

4.5.3 Fuel Test Equipment Room

Hazardous Waste Determination Not Conducted, 10 CSR 25-5.262(1) referencing 40 CFR 262.11. (NOPF 1) - During inspection of the Fuel Test Equipment Room, flammable storage cabinet, I observed the following inherently waste-like containers and an unknown liquid under the containers (Photos 14 and 15):

- One closed 5-gallon metal can labeled "Trichloroethane."
- One unlabeled closed 1-gallon metal can.
- One closed 5-gallon metal can labeled "Braycote 120."
- An unknown clear liquid covering a 2 by 2- foot area on the bottom flammable cabinet shelf.

An unknown clear liquid was observed under the containers, in the bottom of the flammable storage cabinet. I asked Mr. Mueller if he knew if material within the containers was still in use. Mr. Mueller was not familiar with the containers or chemicals within the flammable storage cabinet. Because the containers were sitting in an unknown clear liquid, one container was unlabeled, and the condition of the containers was inherently waste-like, I asked Mr. Mueller if a hazardous waste determination needed to be conducted. Mr. Mueller stated that a hazardous waste determination needed to be conducted for the three containers and unknown liquid in the bottom of the flammable storage cabinet.

4.5.4 Less Than 90-Day Accumulation Area

Aisle Space Not Maintained to Allow Unobstructed Movement of Personnel and Equipment, 10 CSR 25-5.262(1) referencing 40 CFR 265.35. (NOPF 2) - During inspection of the Less Than 90-Day Accumulation Area, I observed multiple drums containing hazardous waste that were difficult to inspect on all sides or were completely inaccessible (Photos 1-4). A lack of aisle space between drums prevented clear visibility of drum labels. See Attachment 7, Waste Stream Table, for additional information related to waste and containers observed in the Less Than 90-Day Accumulation Area at the time of the inspection.

4.5.5 North and Outside of Paint Booth

Length of Time Universal Waste Has Been Accumulated Not Demonstrated for Universal Waste Lamps, 10 CSR 25-16.273(1), incorporating 40 CFR 273.15(c); and Each Lamp or Lamp Container or Package Not Marked or Labeled Clearly as “Universal Waste Lamps” or “Waste Lamp(s)” or “Used Lamps,” 10 CSR 25-16.273(1), incorporating 40 CFR 273.14(e). (NOPF 4 and 6, respectively) - During inspection of the area north and outside of paint booth, I observed the following containers:

- One 8-foot, fiber drum containing approximately 20, 8-foot and approximately 20, 4-foot spent fluorescent lamps (Photos 20 and 21).
- One 4-foot, fiber drum containing approximately 60 spent fluorescent lamps (Photos 20 and 22).

The containers were both closed and labeled with the words “Universal Waste” and “Bulbs.” However, the containers were not labeled with the word “Lamps” and were not marked with accumulation start dates. I asked Mr. Mueller if Essex employed an alternative method to track accumulation time for spent fluorescent lamps. Mr. Mueller stated that Essex did not employ an alternate way to document accumulation time for the spent fluorescent lamps, however he was able to estimate when lamps were first accumulated in the containers. Mr. Mueller marked the containers with the word “Lamps” and accumulation start dates, addressing NOPF 6, and part of NOPF 4, at the time of the inspection (Photos 27 and 28).

4.5.6 Maintenance

Length of Time Universal Waste Has Been Accumulated Not Demonstrated for Universal Waste Batteries, 10 CSR 25-16.273(1), incorporating 40 CFR 273.15(c); and Each Container of Universal Waste Batteries Not Labelled with the Words “Universal Waste,” 10 CSR 25-16.273(1), incorporating 40 CFR 273.14(a). (NOPF 4 and 5, respectively) - During inspection of Maintenance, I observed the following container:

- One white 5-gallon poly bucket containing approximately seven small Lithium-Ion batteries (Photos 25 and 26).

The container was closed and labeled with the word “Batteries.” However, the container was not labeled with the words “Universal Waste” and was not marked with an accumulation start date. I asked Mr. Mueller if Essex employed an alternative method to track accumulation time for spent Lithium-Ion batteries. Mr. Mueller stated that Essex did not employ an alternate way to document accumulation time for the spent Lithium-Ion batteries, however he was able to estimate when batteries were first accumulated in the container. Mr. Mueller marked the container with the words “Universal Waste” and an accumulation start date, addressing NOPF 5, and part of NOPF 4, at the time of the inspection (Photo 29).

4.5.7 Records Review and Related Preliminary Findings

Weekly Inspections

According to Mr. Mueller, weekly inspections are conducted and documented on a weekly inspection form. Mr. Mueller provided me with electronic copies of “HazWaste Weekly Inspection” forms, dated 2020 through 2023.

No apparent issues were observed during review of “HazWaste Weekly Inspection” forms.

Uniform Hazardous Waste Manifests and Land Disposal Restriction (LDR) Notification Forms

Prior to arriving at the facility, I had conducted an inspection of electronic manifests from November 2020 through July 2023, using RCRAInfo. During the inspection, I reviewed the following LDR notification forms associated with hazardous waste generated at, and shipped from, the facility:

- Methacrylate Sealant – U008, U055, U096, and U162 (Treatment Method H040)
- Waste Phosphorus Tribromide - D002 and D003 (Treatment Method H040)
- Waste Flammable Liquid (Dimethoxyethane) - D001, D002, and D003 (Treatment Method H040)
- Waste Oxidizing Solid (Chromic Acid, Barium Nitrate) – D001, D002, D005, and D007 (Treatment Method H061)

No apparent issues were observed during review of manifests and LDR notification forms.

2021 Comprehensive Biennial Report

Prior to arriving at the facility, I was able to review the facility 2021 biennial report using RCRAInfo.

No apparent issues were observed during review of the 2021 comprehensive biennial report.

Emergency Action Plan and Contingency Plan

During review of the facility's Emergency Management Plan and Contingency Plans, I noted that Ron Miller was listed as the Facility Safety Coordinator and Primary Emergency Coordinator, respectively. Mr. Mueller is listed as the Secondary Emergency Coordinator within the Contingency Plan.

During review of the facility's contingency plan (Attachment 9), the following information was noted:

- The contingency plan was last updated on March 3, 2023.
- A description of emergency response equipment, their capabilities, and locations is listed in Annex 3, Emergency Equipment Description and Capabilities
- Evacuation procedures, including primary and secondary evacuation routes
- Facility diagrams

The Contingency Plan was made available to the City of Maplewood Fire Department and Police Department on January 1, 2023. The Contingency Plan was also shared with St. Mary's Hospital on January 1, 2023. The facility emergency action plan and contingency plan appeared to be complete with no apparent issues.

Facility Registration with MoDNR

Updated Generator Information Not Filed/Communicated with MoDNR, 10 CSR 25-5.262(2)(A)3.B. (NOPF 3) - As part of the inspection in-briefing, I provided a Notification Acknowledgement/Verification Report form to Mr. Mueller for review (Attachment 6). I asked Mr. Mueller if all the information appeared to be accurate. Mr. Mueller stated that to the best of his knowledge everything was accurate. However, upon review of facility manifests and the 2021 biennial report, I observed multiple waste codes associated with shipments of hazardous waste were not listed on the Notification Acknowledgement/Verification Report form.

For example, Waste Flammable Liquids, Corrosive (1,2 Dimethoxyethane), last shipped on July 14, 2023, has an associated waste code of D003. It appeared that the facility still generated this waste stream; during the inspection I observed a SAA 55-Gal. drum located outside paint booth area dedicated to Waste Flammable Liquids, Corrosive (1,2 Dimethoxyethane).

Also, Waste Environmentally Hazardous Liquid (Methacrylate Sealant), last shipped on December 8, 2022, has associated waste codes U008, U055, U096, and U162. Waste codes D003, U008, U055, U096, and U162 were not listed on the notification. According to 10 CSR 25-5.262 (2)(A)3.B., State of Missouri businesses are required to complete and file an updated Notification of Regulated Waste Activity form whenever there is any change in a waste stream or waste streams.

Personnel Training

Documentation that training had been given to, and completed by, facility personnel not available, 10 CSR 25-5.262(1) incorporating 40 CFR 262.34(a)(4) referencing 40 CFR 265.16(d)(4) (NOPF 7 Added After Inspection) - During review of personnel training records, I looked at several RCRA training certificates, issued by Heritage, the facility's training provider. Mr. Mueller stated that he and Brian Firestine are the two Essex employees that handle hazardous waste at the facility. Mr. Mueller provided me with his 2021 through 2023 RCRA Training Certifications and 2022 and 2023 certifications for Mr. Firestine. Mr. Mueller also provided me with training certifications for Ron Miller, Maintenance Supervisor/Safety & Environmental Coordinator, for the years 2021 and 2023. Training consisted of, but was not limited to, Definition of Solid Waste; Waste Determinations; Generator Classification; Tank and Accumulation Standards; Satellite Accumulation Standards; Preparedness & Prevention; Contingency Planning; Record Keeping; Used Oil Standards; and Universal Waste Standards.

Because Mr. Miller is listed as the Primary Emergency Coordinator within the Essex Contingency Plan (Attachment 9), Mr. Miller is required to complete training and retain documentation of that training. However, training documentation was not on file for Mr. Miller for 2022. According to Mr. Mueller, an Essex Human Resources employee who typically would receive training certificates from Heritage, and then forward those certificates on to Essex employees that attended RCRA training, had retired in 2022, shortly after Mr. Miller completed his training. Mr. Mueller stated that after the Human Resources employee retired, her emails were erased. Therefore, Mr. Miller never received his RCRA training certificate. Mr. Mueller stated that he would check with Heritage to see if they could provide documentation, showing that Mr. Miller's 2022 RCRA training had occurred. To date, Essex has not provided documentation for Mr. Miller's 2022 RCRA training.

An e-mail was sent to the facility on November 17, 2023, informing the facility of the additional NOPF (Attachment 10).

Preparedness and Prevention

During the inspection, I observed ABC-rated, Purple K-rated, Halon, Water, and carbon dioxide fire extinguishers throughout the facility. According to the Contingency Plan (Attachment 9), the facility is also equipped with Clean Guard fire extinguishers in the event of an electrical or computer fire. The extinguishers had been inspected by Cintas, St. Louis, Missouri, in December of 2022. Fire extinguishers are also inspected monthly by facility personnel.

A list of emergency contacts was posted next to the phone at the entrance of the Less Than 90-Day Accumulation Area.

5.0 SUMMARY

I inspected Essex as an LQG of hazardous waste, a small quantity handler of universal waste, and a used oil generator. The following preliminary findings were noted as discussed above:

1. Hazardous Waste Determination Not Conducted, 10 CSR 25-5.262(1) referencing 40 CFR 262.11. (NOPF 1)

2. Aisle Space Not Maintained to Allow Unobstructed Movement of Personnel and Equipment, 10 CSR 25-5.262(1) referencing 40 CFR 265.35. (NOPF 2)
3. Updated Generator Information Not Filed/Communicated with MoDNR, 10 CSR 25-5.262(2)(A)3.B. (NOPF 3)
4. Length of Time Universal Waste Has Been Accumulated Not Demonstrated for Fluorescent Lamps and Lithium-Ion Batteries, 10 CSR 25-16.273(1) incorporating 40 CFR 273.15(c).
5. Container of Spent Lithium-Ion Batteries Not Labelled with the Words “Universal Waste,” 10 CSR 25-16.273(1), incorporating 40 CFR 273.14(a).
6. Each lamp or lamp container or package not marked or labeled clearly as “Universal Waste Lamps” or “Waste Lamp(s)” or “Used Lamps,” 10 CSR 25-16.273(1) incorporating 40 CFR 273.14(e).
7. Documentation that training had been given to, and completed by, facility personnel not available, 10 CSR 25-5.262(1) incorporating 40 CFR 262.34(a)(4) referencing 40 CFR 265.16(d)(4) (NOPF 7 Added After Inspection)

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

**TIMOTHY
EVANS**  Digitally signed by
TIMOTHY EVANS
Date: 2024.02.15
15:06:25 -06'00'

Timothy R. Evans
Life Scientist
ECAD/CB/RCRA, EPA Region 7

Mike Martin - signing  Digitally signed by Mike Martin -
for Amber Whisnant signing for Amber Whisnant
Date: 2024.02.15 15:14:46 -06'00'

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

Attachments

1. Digital Image Log (33 pages/29 photos)
2. Aerial Photo and Facility Diagrams (2 pages)
3. Confidentiality Notice (1 page)
4. Receipt for Document (1 page)
5. NOPF (3 pages)
6. Notification Acknowledgement/Verification Report Form (2 pages)
7. Waste Stream Table (11 pages)
8. 2019 MoDNR Report Including Hazardous Waste Large Quantity Generator Inspection Checklist (172 pages)
9. Contingency Plan (22 pages)
10. Additional NOPF E-Mail (1 page)