FILE NAME: Marley (MAR)

DATE: 1976

DOC#: MAR006

DOCUMENT DESCRIPTION: Industrial Waste Survey

DD:

1976 INDUSTRIAL WASTE SURVEY

OMB NO. 158-576002
APPROVAL EXPIRES: 9/30/77

GENERATOR:

Business Name: The Marley Cooling Tower Company No. of Employees: 300
Business Address: 6333 Strawberry Lane (City) Louisville (Zip) 40214
County: Jefferson Business Phone: 368-2538 (Area Code) 502
Person Completing Form: W. W. Jones Title: Plant Manager

HAULERS AND/OR COLLECTORS USED BY GENERATOR:

A. Business Name: Industrial Disposal Company
Business Address: 958 Logan Street (City) Louisville (State) Ky.
(County) Jefferson (Zip) 40204 (Business Phone) 582-3329 (Area Code) 50
B. Business Name: _____
Business Address: _____ (City) _____ (State) _____
(County) _____ (Zip) _____ (Business Phone) _____ (Area Code) _____
C. List any additional haulers or collectors on separate sheet and attach.
D. YES ____ NO X Generator hauls all, or part of their own wastes.

DISPOSAL AND/OR PROCESSING FACILITIES USED FOR DISPOSAL OF GENERATORS WASTE:

A. Business Name: _____
Business Address: _____ (City) _____ (State) _____
(County) _____ (Zip) _____ (Business Phone) _____ (Area Code) _____
_____ Land Disposal _____ Liquid Waste Treatment
_____ Incinerator _____ Other (specify)
B. Business Name: _____
Business Address: _____ (City) _____ (State) _____
(County) _____ (Zip) _____ (Business Phone) _____ (Area Code) _____
_____ Land Disposal _____ Liquid Waste Treatment
_____ Incinerator _____ Other (Specify)
C. List any additional disposal and/or treatment facilities on separate sheet and attach.

TREATMENT AND/OR DISPOSAL FACILITIES OWNED BY GENERATOR OF WASTE:

A. YES ____ NO X Lagoons or ponds. Capacity (total combined) _____
Location: _____
B. YES ____ NO X Recovery and/or regeneration systems (describe on separate sheet)
C. YES ____ NO X Biological and/or chemical treatment (describe on separate sheet)
D. YES ____ NO ____ Other (describe on separate sheet)

STORAGE FACILITIES OWNED OR USED BY GENERATOR:

A. YES ____ NO X Storage facilities on site. (If yes, describe waste & type storage)
B. Maximum quantity stored _____ (tons or gals.)
C. Frequency of transfer to storage area: _____
D. Frequency of transfer from storage area: _____
E. Method of transfer from storage area: _____

ADDITIONAL INFORMATION:

A. YES X NO ____ Would you like to see regional waste treatment and/or disposal facilities established in Kentucky?
B. YES X NO ____ Is confidential status required?
C. YES X NO ____ My company has waste types included in Part VII. If yes, complete VII.
D. YES X NO ____ My company is willing to respond to the questions in this survey.
E. YES X NO ____ The information given represents 1975 data (if no, state method or year
F. To the best of my knowledge, the information given in this survey report is true, correct and complete.

W. W. Jones — SIGNATURE
Plant Manager — TITLE
11-4-76 — DATE

MARDEP000460

VII. WASTE CATEGORIES

		GENERATED		STATE				WITH OTHER WASTES		BY GENERATOR							DISPOSAL SYSTEMS AND QUANTITIES						
		YES	NO	GAS	LIQUID	SLUDGE	SOLID	YES	NO	Chemical Oxid.-Red.	Chemical Neutralization	Recovery-Regeneration	Chemical Precipitation	Concentration	Biological Oxidation		LIQUID/SEMI-LIQUID WASTE PROCESSING PLANT (gal/yr.)	DISCHARGE TO WASTE WATER TREATMENT SYSTEMS (gal/yr.)	LAGOONS OR PONDS (gal/yr.)	LANDFILLING (tons/yr.)	INCINERATION (tons/yr.)	LAND SPREAD ING (tons/yr.)	MARINE DISPOSAL
1. Acids:	H_2SO_4																						
	HCl																						
	HNO_3																						
Pl. I.,	Other (Specify)	X			X			X			X							25					
2. Alkalis:	KOH																						
	NaOH																						
	Other (Specify)																						
3. Inorganic Chemicals:	Mercury Compounds																						
	Phosphorous "																						
	Other (Specify)																						
4. Organic Chemicals:	Plastics PVC																						
	Solvents																						
	Resins																						
	Paints																			50			
Pl. I.,	Other (Specify)																1,000						
5. Petroleum Products:	(Specify)																1,000						
6. Pesticides:	(Specify)																						
7. Poisonous Compounds:	(Specify)																						
8. Chlorinated Compounds:	Solvents																						
	PCB																						
	Other (Specify)																						
9. Toxic Metals:	Pb																						
	Hg																						
	Other (Specify)																						
10. Gases:	H_2S																						
	Other (Specify)																						
11. Radioactive (low level)	Iodine-131																						
	Other (Specify)																						
12. Biological/ Pathogenic	(Specify)																						