



REQUEST FOR DISCUSSION

To: Peoria City/County Landfill Committee Members

From: Simon Alwan, PE, Environmental Engineer, Foth

AGENDA DATE REQUESTED: November 16, 2011

ACTION REQUESTED: Special Waste Permit Approvals

BACKGROUND: Memorandum attached. Two new profiles requiring Committee approval. Action is required.

FINANCIAL IMPACT: N/A



MEMORANDUM

TO: Joint City of Peoria - County of Peoria
Solid Waste Disposal Facility Board

DATE: November 9, 2011

FROM: Simon Alwan, P.E.

NUMBER: 011P001.00

SUBJECT: Special Waste Permits

Waste Management has presented the following waste streams and requests Board approval.

New Profiles for Approval (Action is Necessary):

1.

Nees Harley-Davidson 131 S. Soangetaha Road Galesburg, IL 61401	Oil Filters
<u>Application</u> Dated: 10/28/11 Received: 11/3/11	Oil filter's removed from motorcycles during services. Excluded wastes under 40 CFR 261.4
Source: Knox Type: Non-Special Profile # 111549IL	<u>Expected</u> Quantity = 1 Drum Frequency = Quarterly
Subject to County Fee = yes Last Tested = NA	

Comments: This waste stream is certified by the generator as non-special based on generator knowledge. This waste is excluded from the hazardous waste list per 40 CFR 261.4(b)(13) and 35 IAC 721.104(b)(13). The oil filters are properly drained of any used oil prior to disposal. We have no technical objections to this waste stream. Action is required.

2.

Peoria City/County Landfill 11501 Cottonwood Road Brimfield, IL 61571	RCRA Empty Drums/Containers (less than or equal to 110 gallons)
<u>Application</u> Dated: 08/25/11 Received: 11/9/11	See 40CFR 261.7 for additional information
Source: Peoria Type: Non-Special Profile # 113233IL	<u>Expected</u> Quantity = 4 Cubic Yards Frequency = One Time
Subject to County Fee = yes Last Tested = NA	

Comments: This profile is for the waste abandoned by RTC. For disposal purposes, the waste stream has been profiled by the City/County Committee. Per our contract for engineering services, we are notifying you that we the consultants regarding the profiling, as well. We've inspected the waste and information prepared by WM and recommended to Mr. Barber that he sign the necessary certifications. We have no technical objections to the acceptance of this waste stream. Action is required.

Notes:

- Committee approval does not relieve the Generator and Landfill Operator from complying with all applicable laws and regulations

Requested Disposal Facility: PCC2

Profile Number: _____

☐ Renewal for Profile Number: _____

Waste Approval Expiration Date: _____

☐ Check here if there are multiple generating locations for this waste. Attach additional locations.

A. Waste Generator Facility Information (must reflect location of waste generation/origin)

1. Generator Name: Nees Harley-Davidson
2. Site Address: 131 S. Sangehaha Road
3. City/ZIP: Colesburg
4. State: IA 64401
5. County: _____
6. Contact Name/Title: Shelly Miller General Manager
7. Email Address: Smiller@neesharley-davidson.com
8. Phone: 309-342-3910 9. FAX: 309-342-3451
10. NAICS Code: _____
11. Generator USEPA ID #: _____
12. State ID# (if applicable): _____

B. Customer Information ☒ same as above

P. O. Number: _____

1. Customer Name: _____ 6. Phone: _____ FAX: _____
2. Billing Address: _____ 7. Transporter Name: _____
3. City, State and ZIP: _____ 8. Transporter ID # (if appl.): _____
4. Contact Name: _____ 9. Transporter Address: _____
5. Contact Email: _____ 10. City, State and ZIP: _____

C. Waste Stream Information

1. DESCRIPTION

a. Common Waste Name: oil filter

State Waste Code(s): _____

b. Describe Process Generating Waste or Source of Contamination:

oil filters removed from motorcycles during services. Excluded wastes under 40 CFR 261.4

c. Typical Color(s): Any & All

d. Strong Odor? ☐ Yes ☒ No Describe: _____

e. Physical State at 70°F: ☒ Solid ☐ Liquid ☐ Powder ☐ Semi-Solid or Sludge ☐ Other: _____

f. Layers? ☐ Single layer ☐ Multi-layer ☒ NA

g. Water Reactive? ☐ Yes ☒ No If Yes, Describe: _____

h. Free Liquid Range (%): _____ to _____ ☒ NA(solid)

i. pH Range: _____ to _____ ☒ NA(solid)

j. Liquid Flash Point: ☐ < 140°F ☐ 140°- 199°F ☐ ≥ 200°F ☒ NA(solid)

k. Flammable Solid: ☐ Yes ☒ No

l. Physical Constituents: List all constituents of waste stream - (e.g. Soil 0-80%, Wood 0-20%): ☐ (See Attached)

Constituents (Total Composition Must be ≥ 100%)	Lower Range	Unit of Measure	Upper Range	Unit of Measure
1. <u>Oil filters 100%</u>				
2. _____				
3. _____				
4. _____				
5. _____				
6. _____				

2. ESTIMATED QUANTITY OF WASTE AND SHIPPING INFORMATION

a. ☐ One Time Event ☐ Base ☒ Repeat Event

b. Estimated Annual Quantity: 1 ☐ Tons ☐ Cubic Yards ☒ Drums ☐ Gallons ☒ Other (specify): 1

c. Shipping Frequency: 1 per Month ☒ Quarter ☐ Year ☐ One Time ☐ Other

d. Is this a U.S. Department of Transportation (USDOT) Hazardous Material? (If yes, answer e.) ☐ Yes ☒ No

e. USDOT Shipping Description (if applicable): _____

3. SAFETY REQUIREMENTS (Handling, PPE, etc.): _____

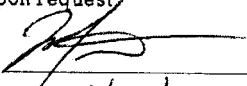
**Generator's Non-hazardous Waste Profile Sheet****D. Regulatory Status (Please check appropriate responses)**

1. Waste Identification:
- a. Does the waste meet the definition of a USEPA listed or characteristic hazardous waste as defined by 40 CFR Part 261? ☐ Yes ☒ No
1. If yes, please complete a hazardous waste profile.
- b. Does the waste meet the definition of a state hazardous waste other than identified in D.1.a? ☐ Yes ☒ No
1. If yes, please complete a hazardous waste profile.
2. Is this waste included in one or more of categories below (Check all that apply)? If yes, attach supporting documentation. ☒ Yes ☐ No
- ☐ Delisted Hazardous Waste ☒ Excluded Wastes Under 40CFR 261.4
☐ Treated Hazardous Waste Debris ☐ Treated Characteristic Hazardous Waste
3. Is the waste from a Federal (40 CFR 300, Appendix B) or state mandated clean-up? If yes, see instructions. ☐ Yes ☒ No
4. Does the waste represented by this waste profile sheet contain radioactive material? ☐ Yes ☒ No
- a. If yes, is disposal regulated by the Nuclear Regulatory Commission? ☐ Yes ☐ No
- b. If yes, is disposal regulated by a State Agency for radioactive waste/NORM? ☐ Yes ☐ No
5. Does the waste represented by this waste profile sheet contain Polychlorinated Biphenyls (PCBs)? (If yes, list in Chemical Composition - C.1.1) ☐ Yes ☒ No
- a. If yes, are the PCBs regulated by 40 CFR 761? ☐ Yes ☒ No
- b. If yes, is it remediation waste from a project being performed under the Self-Implementing option provided in 40 CFR 761.61(a)? ☐ Yes ☐ No
- c. If yes, were the PCBs imported into the US? ☐ Yes ☐ No
6. Does the waste contain untreated, regulated medical or infectious waste? ☐ Yes ☒ No
7. Does the waste contain asbestos? ☐ Yes ☒ No
- a. If Yes, ☐ Friable ☐ Non Friable
8. Is this profile for remediation waste from a facility that is a major source of Hazardous Air Pollutants (Site Remediation NESHAP, 40 CFR 63 subpart GGGGG)? ☐ Yes ☒ No
- a. If yes, does the waste contain <500 ppmw VOHAPs at the point of determination? ☐ Yes ☐ No

E. Generator Certification (Please read and certify by signature below)

By signing this Generator's Waste Profile Sheet, I hereby certify that all:

- Information submitted in this profile and all attached documents contain true and accurate descriptions of the waste material;
- Relevant information within the possession of the Generator regarding known or suspected hazards pertaining to this waste has been disclosed to WM/the Contractor;
- Analytical data attached pertaining to the profiled waste was derived from testing a representative sample in accordance with 40 CFR 261.20(c) or equivalent rules; and
- Changes that occur in the character of the waste (i.e. changes in the process or new analytical) will be identified by the Generator and disclosed to WM (and the Contractor if applicable) prior to providing the waste to WM (and the contractor if applicable).
- Check all that apply:
 - ☐ Attached analytical pertains to the waste. Identify laboratory & sample ID #'s and parameters tested: _____ # Pages: _____
 - ☐ Only the analysis identified on the attachment pertain to the waste (identify by laboratory & sample ID #'s and parameters tested). Attachment #: _____
 - ☐ Additional information necessary to characterize the profiled waste has been attached (other than analytical, such as MSDS). Indicate the number of attached pages: _____
 - ☒ I am an agent signing on behalf of the Generator, and the delegation of authority to me from the Generator for this signature is available upon request.

Certification Signature: Title: OwnerCompany Name: Nees Harley-DavidsonName (Print): Michael NeesDate: 10-28-11



Profile Addendum: State of Illinois GENERATOR'S NON-SPECIAL WASTE CERTIFICATION

F. Additional Waste Stream Information

Profile Number: _____

Generators Name: Nees Harley-DavidsonGenerators SITE Address: 131 S. Saungetaha Rd, Calesburg, IL 61401

(The location where the waste is generated)

Waste Name: OIL filters, holes punched in filter & Drained.

The Illinois Environmental Protection Act allows a Generator to certify that their pollution control waste or industrial process waste, is not an Illinois Special Waste (Section 3.45). By completing the following questionnaire, you may certify that the waste stream represented by the Waste Management Profile referenced above is not an Illinois Special Waste as defined in the Act.

Is the waste referenced above any of the following:

- | | | |
|--|------------------------------|--|
| 1. A Potentially Infectious Medical Waste (PIMW)? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 2. A Hazardous Waste as defined in 40 CFR 261 or in 35 IAC 722.111? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 3. A Liquid Waste (fails the paint filter test as defined in 35 IAC 811.107)? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 4. A regulated PCB waste as defined in 40 CFR 761? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 5. A NESHAP regulated asbestos waste other than waste from renovation or demolition? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 6. A waste resulting from the shredding recyclable metals (auto fluff)? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 7. A delisted Hazardous Waste or Treated Characteristic Hazardous Waste, subject to LDR requirements under 35 IAC 728.107? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

In determining that this waste is not a liquid, I have used knowledge of the processes generating the waste and the attached supporting documentation: ☐ MSDS ☐ Analytical ☒ Other (explain below):

Generator Knowledge

In determining that this waste is not RCRA hazardous, I have used knowledge of the processes generating the waste and the attached supporting documentation: ☐ MSDS ☐ Analytical ☒ Other (explain below):

Generator Knowledge

8. Is the waste represented by this profile sheet subject to the Illinois Solid Waste Management Act fee? ☒ Yes ☐ No

By signing below, I certify my waste is NOT an Illinois Special Waste, and that I understand that a person who knowingly and falsely certifies that a waste is not special waste is subject to the penalties set forth in subdivision (6) of subsection (h) of section 44 of the Illinois Environmental Protection Act.

Name: (Print) Michael NeesTitle: OwnerSignature: [Signature]Date: 10-28-11



RCRA Empty Drums/Containers (<110 Gallons) Express Profile

Requested Disposal Facility: Peoria City - County #2 LandfillProfile Number: 113233IL☐ Renewal for Profile Number: _____

Waste Approval Expiration Date: _____

☐ Check here if there are multiple generating locations for this waste. Attach additional locations.**A. Waste Generator Facility Information (must reflect location of waste generation/origin)**

1. Generator Name: Peoria City/County Landfill

2. Site Address: 11501 Cottonwood Road

3. City/ZIP: Brimfield, 61571

4. State: IL

5. County: Peoria

6. Contact Name/Title: Dave Barber/Public Works Director

7. Email Address: DBarber@ci.peoria.il.us

8. Phone: 309-494-494-8800 9. FAX: 309-494.8658

10. NAICS Code: _____

11. Generator USEPA ID #: N/A

12. State ID# (if applicable): N/A

B. Customer Information ☐ same as above

P. O. Number: _____

1. Customer Name: WM of Peoria

2. Billing Address: 3552 E. Washington Street

3. City, State and ZIP: East Peoria, IL, 61611

4. Contact Name: Steve Fedash

5. Contact Email: SFedash@wm.com

6. Phone: 309-694-6246 FAX: 309-694-6436

7. Transporter Name: Waste Management

8. Transporter ID # (if appl.): _____

9. Transporter Address: 3552 E. Washington Street

10. City, State and ZIP: East Peoria, IL, 61611

C. Waste Stream Information

1. DESCRIPTION

a. Common Waste Name: RCRA Empty Drums/Containers less than or equal to 110 gallons

State Waste Code(s): None

b. Describe Process Generating Waste or Source of Contamination:

See 40CFR 261.7 for additional information.

c. Typical Color(s): Any and alld. Strong Odor? ☐ Yes ☒ No Describe: _____e. Physical State at 70°F: ☒ Solid ☐ Liquid ☐ Powder ☐ Semi-Solid or Sludge ☐ Other: _____f. Layers? ☐ Single layer ☐ Multi-layer ☒ NAg. Water Reactive? ☐ Yes ☒ No If Yes, Describe: _____h. Free Liquid Range (%): _____ to _____ ☒ NA(solid)i. pH Range: _____ to _____ ☒ NA(solid)j. Liquid Flash Point: ☐ < 140°F ☐ 140°- 199°F ☐ ≥ 200°F ☒ NA(solid)k. Flammable Solid: ☐ Yes ☒ Nol. Physical Constituents: List all constituents of waste stream - (e.g. Soil 0-80%, Wood 0-20%): ☐ (See Attached)

Constituents (Total Composition Must be ≥ 100%)		Lower Range	Unit of Measure	Upper Range	Unit of Measure
1.	<u>RCRA empty containers less than or equal to 110 gallons</u>	<u>100</u>	<u>%</u>	<u>100</u>	<u>%</u>
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____
6.	_____	_____	_____	_____	_____

2. ESTIMATED QUANTITY OF WASTE AND SHIPPING INFORMATION

a. ☒ One Time Event ☐ Base ☐ Repeat Eventb. Estimated Annual Quantity: 4 ☐ Tons ☒ Cubic Yards ☐ Drums ☐ Gallons ☐ Other (specify): _____c. Shipping Frequency: One time Units per ☐ Month ☐ Quarter ☐ Year ☒ One Time ☐ Otherd. Is this a U.S. Department of Transportation (USDOT) Hazardous Material? (If yes, answer e.) ☐ Yes ☒ No

e. USDOT Shipping Description (if applicable): _____

3. SAFETY REQUIREMENTS (Handling, PPE, etc.): Normal landfill site personal protective equipment



RCRA Empty Drums/Containers (<110 Gallons) Express Profile

113233IL

D. Regulatory Status (Please check appropriate responses)

1. Waste Identification:
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- | | |
|---|---|
| <input type="checkbox"/> Delisted Hazardous Waste | <input type="checkbox"/> Excluded Wastes Under 40CFR 261.4 |
| <input type="checkbox"/> Treated Hazardous Waste Debris | <input type="checkbox"/> Treated Characteristic Hazardous Waste |
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- If yes, is disposal regulated by the Nuclear Regulatory Commission? ☐ Yes ☐ No
 - If yes, is disposal regulated by a State Agency for radioactive waste/NORM? ☐ Yes ☐ No
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- If yes, are the PCBs regulated by 40 CFR 761? ☐ Yes ☐ No
 - If yes, is it remediation waste from a project being performed under the Self-Implementing option provided in 40 CFR 761.61(a)? ☐ Yes ☐ No
 - If yes, were the PCBs imported into the US? ☐ Yes ☐ No
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7. Does the waste contain asbestos? ☐ Yes ☒ No
- If Yes, ☐ Friable ☐ Non Friable
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 - I am an agent signing on behalf of the Generator, and the delegation of authority to me from the Generator for this signature is available upon request.

Certification Signature:

Title: Public Works Director

Company Name: Peoria City/County Landfill

Name (Print): Dave Barber

Date: August 25, 2011

**Profile Addendum: State of Illinois
EMPTY CONTAINER CERTIFICATION****F. Additional Waste Stream Information**

In completing this certification Dave Barber, on behalf of Peoria City/County Landfill,
is certifying to the best of his/her knowledge the containers represented under Waste Profile Sheet Number 113233IL
were used to store Hydraulic Oil and meet the following definition of empty:

1. All containers have a rated capacity of < 110 gallons only.
2. All containers meet all the definitions of empty listed below:
 - Contain less than 2.5 centimeters (one inch) of residue.
 - No more than 3% of weight of the total capacity of the container remains in the container
 - All wastes have been removed that can be removed using the practices commonly employed to remove material from the type of container.
3. All containers do not contain a liquid.
4. Further, at no time were hazardous wastes identified as acutely toxic or TSCA regulated quantities of PCB's stored in these containers pursuant to 40 CFR parts 261 and 761 respectively.

Name: (Print) Dave Barber Title: Public Works Director

Signature:  Date: August 25, 2011