# **Contingency Plan**

### **Facility Name**

This plan is reviewed annually and amended whenever changes occur that will significantly affect the ability of this facility to respond to an emergency situation. This includes revision of the regulations, if the plan fails in an emergency, if this facility changes in a way that materially increases the potential for an emergency or changes in the response necessary in an emergency, if the list of emergency coordinators changes or if the list of emergency equipment changes. When warranted, revisions are made to the plan within 24 hours.

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#### 1. General Facility Information

Facility Name		
Facility Owner/Operator		
Physical Address		
County		
Mailing Address		
Facility Telephone Facility	FAX	
EPA Identification Number	SIC/NAICS Code	
Contingency Plan Development and Main	tenance Coordinator	Telephone

#### 2. Purpose and Scope of Plan

Although this facility is designed, constructed, maintained and operated in a manner that minimizes the possibility for emergency incidents such as fire, explosions and any unplanned sudden or non-sudden release of hazardous waste or hazardous waste constituents to air, soil or surface water, this plan is designed to minimize hazards to human health and the environment in the unlikely event of such incidents. This plan is designed to satisfy the requirements of the Colorado Hazardous Waste Regulations (6 CCR 1007-3 Sections 262.34(a)(4) and 265.50-265.56) and the following regulations:

#### 3. Overview of Facility Operations, Wastes, and Processes Generating Wastes

Briefly describe what operations occur at your facility, then list the processes you have and what hazardous wastes are generated from each (for example: Corrosion protection and painting of replacement aircraft parts; conversion coating on aluminum – F019 sludge, painting operations – F005 spent lacquer thinner).

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#### 4. Emergency Response Coordinator

At all times, there must be at least one employee either on the facility premises or on-call to respond to an emergency by coordinating all emergency response measures. The duties and responsibilities for emergency response are covered in **Section 8** of this plan.

The Emergency Response Coordinator (or alternate) has full authority to commit resources needed to respond to emergencies at this facility and to direct other trained employees to assist in the implementation of this contingency plan.

A list of emergency response coordinator(s), spill response team members (if designated) and first aid specialists (if designated) is included in **Appendix A**. A list of the available emergency equipment, its location and capabilities is included in **Appendix B**.

#### 5. Coordinated Emergency Services with Off-Site Emergency Responders

Name of Local Emergency Planning Committee (LEPC) <sup>1</sup>
This facility is not within an established fire protection district. We have developed our own fire protection and prevention plan based on the Uniform Fire Code, the National Fire Code, the Uniform Building Code and 29 CFR Chapter XVII, part 1910, subpart L, Fire Protection. This plan has been reviewed and approved by a registered professional engineer experienced in fire protection. The plan has also been approved by the Colorado Department of Public Health and Environment, Hazardous Materials and Waste Management Division and is included in <b>Appendix C</b> .
OR
☐ This facility is within an established fire protection district.
Name of Fire Protection District

**Briefly describe arrangements** with the local fire department, police department, hospitals, response contractors, and/or State and local emergency response teams, including how to obtain assistance, what assistance will be provided, and designation of the primary emergency response authority. The table in **Appendix D** may substitute for a written description.

A list of LEPCs can be found at <a href="http://www.cdphe.state.co.us/oeis/SARA/lepclist.html">http://www.cdphe.state.co.us/oeis/SARA/lepclist.html</a>.

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The roles and responsibilities of internal and external responders should be defined and clarified by these agreements. Written agreements, if obtained, are included in <b>Appendix E</b> . If any State or local authorities declined to provide emergency response assistance, this has been documented in the facility operating record and may also be included in <b>Appendix E</b> .
☐ This facility has contracted for the services of a spill response contractor.
Name of Spill Response Contractor
<b>Briefly describe arrangements</b> with the spill response contractor, including when to call for assistance, how to call for assistance and what response services will be provided. More detailed information may be provided in <b>Appendix F</b> .
Copies of this contingency plan and all revisions have been submitted to the response agencies referenced above and in Appendix D. A revision log is maintained in <b>Appendix D</b> .

#### 6. Evacuation Plans

Description of evacuation plans including signal(s) to be used, primary and secondary evacuation routes, and safe assembly areas (if designated). Facility diagrams with evacuation routes annotated may substitute for the written description and should be included in **Appendix G.** 

#### 7. Location of 90-day and Satellite Accumulation Areas

The location of all (permanent and temporary) 90-day container and/or tank storage areas and satellite accumulation areas must be designated in the contingency plan. Facility diagrams with accumulation/storage areas annotated may be included in **Appendix H** or you may include a list of storage areas below (for example: Building 10, Room 19 - 90-day storage area; Room 32A - 3 satellite accumulation areas; Lab 11 - 1 satellite accumulation area).

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#### 8. Emergency Procedures and Responsibilities

The Emergency Response Coordinator (or alternate) has full authority to commit resources needed to respond to emergencies at this facility and to direct other trained employees to assist in the implementation of this contingency plan.

Emergency Coordinator (or alternate):

- Be onsite or on-call at all times to coordinate emergency response activities;
- Be thoroughly familiar with this contingency plan, the operations and activities occurring at this facility, the physical layout of this facility, the location and characteristics of wastes generated, stored and/or managed onsite, and the location of all records necessary to implement this plan;
- In an imminent or actual emergency, immediately activate internal facility alarms or communications systems to alert facility personnel of the emergency;
- If appropriate, immediately notify spill response contractor with response roles as identified in Section 5 or Appendix F by calling \_\_\_\_\_\_;
- Immediately notify state and local emergency response agencies with response roles as identified in this plan;
- Immediately identify the biological, chemical and physical properties of any released material, the source of the release, the amount released, and the areal extent of the material;
- Immediately assess possible direct and indirect hazards to human health and the
  environment that may result from the incident and identify threatened resources and
  receptors;
- Determine if the incident could threaten human health or the environment outside the facility and if evacuation of local areas outside of the facility is required;
- Notify appropriate federal, state and local emergency reporting agencies:
  - o National Response Center (1-800-424-8802);
  - o Colorado 24-hour Incident Reporting Line (1-877-518-5608)

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- Reporting must include:
  - Name and telephone number of person reporting incident;
  - Name and address of facility;
  - Time and type of incident;
  - Name and quantity of material(s) involved, to the extent known;
  - Extent of injuries, if any;
  - Possible hazards to human health or environment outside the facility.
- Take all reasonable measures necessary to ensure that fires, explosions and releases do not occur, recur or spread:
  - o Establish the objectives and priorities for response to the incident:
    - Determine mitigation actions;
    - Identify resources required for response;
    - Mobilize those resources;

<sup>&</sup>lt;sup>2</sup> A list of LEPCs can be found at http://www.cdphe.state.co.us/oeis/SARA/lepclist.html

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Stop processes and operations as necessary using the following criteria and procedures:

- o Collect and contain released waste;
- o Remove or isolate waste containers.
- If facility operations cease, monitor for leaks, pressure buildup, gas generation, or ruptures in valves, pipes and other equipment;
- Immediately after an emergency, provide cleanup, treatment, storage and/or disposal of recovered waste, contaminated soil or surface water, and other material that results from the incident by:
- Ensure all wastes are managed and disposed of in accordance with federal, state and local requirements;
- Ensure that no waste incompatible with the released material is processed until cleanup procedures are completed;
- Ensure that all emergency equipment is cleaned and fit for its intended use before operations are resumed;
- Coordinate with federal, state and/or local regulatory agencies to determine that appropriate response actions have been successfully completed and terminate emergency response;
- Provide details of the incident to the Owner/Operator and notify them when emergency response has terminated and that all emergency equipment is ready for use;

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#### Owner/Operator Responsibilities:

- Notify the Colorado Department of Public Health and Environment, Hazardous Materials and Waste Management Division and appropriate local authorities that the facility has implemented the contingency plan and is in compliance with the requirements of the plan before operations are resumed;
- Record the time, date and details of the incident in the facility files;
- Submit a written report to the Colorado Department of Public Health and Environment, Hazardous Materials and Waste Management Division within 15 days of the incident that includes:
  - o Name, address, and telephone number of the owner/operator;
  - o Name, address, and telephone number of the facility;
  - o Date, time and type of incident;
  - Name and quantity of material(s) involved;
  - o Extent of injuries, if any;
  - Assessment of actual or potential hazards to human health or environment, if applicable;

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<ul> <li>Estimated quantity and disposition of recovered material that resulted from the incident.</li> </ul>
•
Procedures to conduct a follow-up investigation of the cause of the incident include:
9. Optional Components
If this facility has conducted a pre-assessment for each potential hazardous waste, detailed hazard analysis information and a list of recommended actions is provided in <b>Appendix I</b> .
<ul> <li>Spill Response Team Responsibilities:</li> <li>Be thoroughly familiar with the operations and activities occurring at this facility, the physical layout of this facility, the location and characteristics of wastes generated, stored and/or managed onsite, and the location, operation, capabilities and limitations of all spill response equipment;</li> <li>When instructed by the Emergency Response Coordinator or other designated authority, implement appropriate response actions to stop, contain and clean up spills and releases;</li> <li>Participate in periodic emergency response training;</li> </ul>
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#### First Aid Specialists Responsibilities:

- Be thoroughly familiar with the characteristics of wastes generated, stored and/or managed onsite;
- Apply appropriate first aid to injured personnel;
- Participate in periodic first aid training;
- •

Appendix	Revision	Date	

### **Appendix A - List of Emergency Response Team Members**

Note: contact in order listed.

Name	Address	Phone (wk)	Phone (hm or cell)
Primary Emergen	acy Response Coordinator (Requ	uired)	
Alternate Emerge	ency Response Coordinator 1		
Alternate Emerge	ency Response Coordinator 2		
Alternate Emerge	ency Response Coordinator 3		
Alternate Emerge	ency Response Coordinator 4		
(Designation of s	spill response teams and first a	aid specialists is opt	ional)
Name	Phone		
Spill Response To	eam Leader		
Alternate Spill Re	esponse Team Leader 1		
Alternate Spill Re	esponse Team Leader 2		
Spill Response To	eam Members		
Name	Phone		
First Aid Speciali	ist		
First Aid Speciali	ist		
First Aid Speciali	ist		
First Aid Speciali	ist		

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#### Appendix B - List and Location of Emergency Equipment

This is an up-to-date list of all emergency response equipment at the facility. All equipment is tested and maintained as necessary to assure its proper operation in time of emergency. An extra sheet is attached if necessary.

Equipment	Location	Description	Capabilities and Limitations
Internal communications			
or alarm system			
T			
External			
communications or alarm			
system			
Fire control equipment			
1 1 1 1 1 1 1 1 1			
Spill control equipment			
~ r · · · · · · · · · · · · · · · · · ·			
<b>D</b>			
Decontamination			
equipment			

Appendix Revision Date
Appendix C - Fire Protection and Prevention Plan
This facility is within an established fire protection district.
OR
This facility is not within an established fire protection district. A copy of our approved fire protection and prevention plan is included in this Appendix C.

# Appendix D – Description of Arrangements with Local Authorities

Primary Response Agency	Agency, Address, Plan Contact	Description of Assistance	How to Contact in an Emergency
Fire:			
Police:			
LEPC:			
Hospital:			
Hospital:			
	Spill Response Contractor:		
	EPA Region 8		
	Colorado State Patrol HazMat		
Other:			
Other:			
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Date	e Description		

Appendix	Revision	Date		

#### Appendix E - Written Agreements with Local Responders

This Appendix E may include written agreements with local emergency responders and documentation of any state or local authorities that declined to enter into such arrangements, if any.

Appendix	Revision	Date		

#### Appendix F – Spill Response Contractor Responsibilities

This Appendix F may contain a copy of the signed contract or other written agreement detailing the duties and responsibilities of the spill response contractor, how and when they should be contacted, how cleanup wastes will be managed and disposed, etc.

Appendix	Revision	Date	

### **Appendix G – Evacuation Diagrams**

This Appendix G may contain copies of facility floor plans with evacuation routes annotated.

Appendix	Revision	Date	

### Appendix H –Accumulation/Storage Area Diagrams

This Appendix H may contain copies of facility floor plans with all 90-day and satellite accumulation areas annotated.

Appendix	Revision I	Date		

#### **Appendix I - Hazard Analysis**

This Appendix I may contain detailed hazard analysis information for each potential hazardous waste that could be generated during a spill or release incident along with a list of recommended actions and appropriate types of personal protective equipment (PPE).

#### Attachments - Samples, Forms and Checklists

These examples can be modified to suit your specific needs. You may also prefer to develop your own site-specific call-down lists, forms or checklists.

- Example Letters Describing Arrangements with Local Authorities
- Emergency Coordinator Telephone Posting
- Emergency Coordinator Checklist
- 90-day Area Container Inspection Checklist
- 90-day Area Tank Inspection Checklist
- Satellite Accumulation Area Inspection Checklist

# Example Letters Describing Arrangements with Local Authorities 6 CCR 1007-3, section 265.52 (c), 265.37(a), 265.53(b) and 264.37(a) &265.37(a)

You are required to document that you have made agreements with the agencies that will respond to your facility in the event of an emergency. This includes hospitals, fire, police or sheriff, and other agencies that would be involved in a response. The Hazardous Materials and Waste Management Division (the Division) has found during inspections that many facilities do not have adequate arrangements or agreements with local emergency agencies as required by 6 CCR 1007-3, section 265.52(c). The following example letters are for your use. These letters must be customized to meet your particular facility's needs.

#### **Sample Emergency Agreement Letters**

- A. Hospital
- B. Fire Department
- C. Police
- D. Local Health Department
- E. Emergency Authority to the Facility

#### A. LQG EXAMPLE – HOSPITAL

Hospital	Ĺ
Street	
City, State, zip	

Dear Sir or Madam:

This letter is written as a requirement of the Hazardous Waste Regulations adopted by the State Colorado. The purpose of this letter is to familiarize your hospital and staff with the properties of hazardous waste handled at the facility and the types of injuries or illnesses which could result from fires, explosions, or releases at the facility. *Name of Facility* is located at *Address of Facility*. As a result of the manufacturing process, hazardous waste is generated and stored at this facility. In accordance with 6 CCR 1007-3, section 265.52(c), this facility is providing your hospital with a copy of our Emergency Contingency Plan that describes:

- The actions our personnel will take in response to emergencies (e.g. fires, explosions, spills of hazardous waste, etc.).
- Arrangements <u>Name of Facility</u> would like your hospital to agree to in the event of an emergency.

In accordance with the requirements of 6 CCR 1007-3, section 265.37, the following information is also enclosed:

- A description of the properties of the hazardous waste handled at the facility. <u>Attach information or describe below</u>
- A description of the types of injuries or illnesses which could result from fires, explosions, or releases at the facility. *Attach information or describe below*

Finally, in accordance with the requirements of 6 CCR 1007-3, section 265.52(g), the Local Emergency Planning Committee is identified as: *identify the LEPC\**.

Please review the enclosed Emergency Contingency Plan. If you agree to the arrangements, complete and return the enclosed form letter. If you do not agree with the arrangements or have questions, please call me at (XXX) XXXXXXX.

Sincerely, XXXXXXXX

\* A list of LEPCs can be found at <a href="http://www.cdphe.state.co.us/oeis/SARA/lepclist.html">http://www.cdphe.state.co.us/oeis/SARA/lepclist.html</a>.

#### B. LQG EXAMPLE - Fire Dept.

	Fire Dept
Street	
City, State, zi	p

Dear Sir or Madam:

This letter is written as a requirement of the Hazardous Waste Regulations adopted by the State of Colorado. The purpose of this letter is to make arrangements to familiarize the fire department with the layout of the facility, properties and associated of hazardous waste handled at the facility, places where facility personnel would normally be working, entrances to roads inside the facility and possible evacuation routes. *Name of Facility* is located at *Address of Facility*. As a result of the manufacturing process, hazardous waste is generated and stored at this facility. In accordance with 6 CCR 1007-3, section 265.52(c), this facility is providing your agency with a copy of our Emergency Contingency Plan that describes:

- The actions our personnel will take in response to emergencies (e.g. fires, explosions, spills of hazardous waste, etc.).
- Arrangements (Name of Facility) would like your agency to agree to in the event of an emergency.
- A layout of the facility showing hazardous waste generation and storage areas, safety equipment, entrances to roads inside the facility and possible evacuation routes.
- A description of the properties and associated hazards of the hazardous wastes handled at our plant.

We are requesting that your agency provide the following services in the event of an emergency regarding hazardous waste storage at the facility:

• Describe the requested Fire Fighting Services. If more than one fire department might respond to an emergency, please include any agreements designating primary emergency authority to a specific fire department and agreements with any others to provide support to the primary emergency authority.

Finally, in accordance with the requirements of 6 CCR 1007-3, section 265.52(g), the Local Emergency Planning Committee is identified as: <u>identify the LEPC</u>\*.

Please review the enclosed Emergency Contingency Plan. If you agree to the arrangements, complete and return the enclosed form letter. If you do not agree with the arrangements or have questions, please call me at (XXX) XXXXXXX.

Sincerely, XXXXXXXX

\* A list of LEPCs can be found at <a href="http://www.cdphe.state.co.us/oeis/SARA/lepclist.html">http://www.cdphe.state.co.us/oeis/SARA/lepclist.html</a>.

#### C. LQG EXAMPLE – Police

Police Dept.
Street
City, State, zip

Dear Sir or Madam:

This letter is written as a requirement of the Hazardous Waste Regulations adopted by the State of Colorado. The purpose of this letter is to make arrangements to familiarize the police department with the layout of the facility, properties of hazardous waste handled at the facility and associated hazards, places where facility personnel would normally be working, entrances to roads inside the facility and possible evacuation routes. *Name of Facility* is located at *Address of Facility*. As a result of the manufacturing process, hazardous waste is generated and stored at this facility. In accordance with 6 CCR 1007-3, section 265.52(c), this facility is providing your agency with a copy of our Emergency Contingency Plan that describes:

- The actions our personnel will take in response to emergencies (e.g. fires, explosions, spills of hazardous waste, etc.).
- Arrangements (Name of Facility) would like your agency to agree to in the event of an emergency.
- A layout of the facility showing hazardous waste generation and storage areas, safety equipment, entrances to roads inside the facility and possible evacuation routes.
- A description of the properties and associated hazards of the hazardous wastes handled at our plant.

We are requesting that your agency provide the following services in the event of an emergency regarding hazardous waste storage at the facility:

• Describe the requested Law Enforcement Services. (If more than one police department might respond to an emergency, please include any agreements designating primary emergency authority to a specific police department and agreements with any others to provide support to the primary emergency authority).

Finally, in accordance with the requirements of 6 CCR 1007-3, section 265.52(g), the Local Emergency Planning Committee is identified as: <u>identify the LEPC</u>\*.

Please review the enclosed Emergency Contingency Plan. If you agree to the arrangements, complete and return the enclosed form letter. If you do not agree with the arrangements or have questions, please call me at (XXX) XXXXXXX.

Sincerely, XXXXXXXX

\* A list of LEPCs can be found at http://www.cdphe.state.co.us/oeis/SARA/lepclist.html.

#### D. LQG EXAMPLE – Local Health Department

Local Health Department Street City, State, zip

Dear Sir or Madam:

This letter is written as a requirement of the Hazardous Waste Regulations adopted by the State Colorado. The purpose of this letter is to make arrangements to familiarize the local health department with the layout of the facility, properties of hazardous waste handled at the facility and associated hazards, places where facility personnel would normally be working, entrances to roads inside the facility and possible evacuation routes. *Name of Facility* is located at *Address of Facility*. As a result of the manufacturing process, hazardous waste is generated and stored at this facility. In accordance with 6 CCR 1007-3, section 265.52(c), this facility is providing your agency with a copy of our Emergency Contingency Plan that describes:

- The actions our personnel will take in response to emergencies (e.g. fires, explosions, spills of hazardous waste, etc.).
- Arrangements our facility has made with the local hospital, fire department and police department in which they will agree to perform in the event of an emergency.
- A layout of the facility showing hazardous waste generation and storage areas, safety equipment, entrances and roads inside the facility and evacuation routes.
- A description of the properties and associated hazards of the hazardous wastes handled at our plant.

Finally, in accordance with the requirements of 6 CCR 1007-3, section 265.52(g), the Local Emergency Planning Committee is identified as: <u>identify the LEPC\*</u>.

Please review the enclosed Emergency Contingency Plan. If you agree to the arrangements, complete and return the enclosed form letter. If you do not agree with the arrangements or have questions, please call me at (XXX) XXXXXXX.

Sincerely, XXXXXXXX

\* A list of LEPCs can be found at http://www.cdphe.state.co.us/oeis/SARA/lepclist.html.

#### E. LQG EXAMPLE – Response Letter from Emergency Authority to Facility

Facility Street City, State, zip

Attention: XXXX, Primary Emergency Coordinator

Subject: Arrangements Response and Contingency Plan

#### Dear XXXX:

I have received the Emergency Contingency Plan submitted by <u>Name of Facility</u> to this office concerning hazardous waste generated and stored at your facility. Our agency agrees to, and is ready to provide services indicated in this plan. I am also aware of the types of hazardous wastes generated and stored at the facility and the possible hazards associated with such materials, as described in the contingency plan.

Sincerely,

<u>Your name</u>

Your agency or authority

### EMERGENCY COORDINATORS LIST AND TELEPHONE POSTING

(Supersedes all previously-dated lists)

\ I	1	J	,	Date:
			<del></del>	
work				Comments
ed):				
COLORA	DO 24-HOUR II	NCIDENT R	REPORTING LIN	TE: 1-877-518-5608
NATIONA	AL RESPONSE	CENTER: _	1-800-424	-8802
SPILL RE	SPONSE CONT	RACTOR:		
E EQUIPMENT:				
	ed):  COLORA! NATIONA SPILL RE BE EQUIPMENT:	work home of the color of the c	Telephones  work home or cell  ed):  COLORADO 24-HOUR INCIDENT F  NATIONAL RESPONSE CENTER:  SPILL RESPONSE CONTRACTOR:  E EQUIPMENT:	work home or cell/pager  ed):  COLORADO 24-HOUR INCIDENT REPORTING LIN  NATIONAL RESPONSE CENTER: 1-800-424  SPILL RESPONSE CONTRACTOR:

# **Emergency Coordinator Checklist** (Large Quantity Generators)

 Are you thoroughly familiar with the operations and activities at your facility, the locations and characteristics of wastes handled at your facility, the physical layout of your facility, your Contingency Plan and the location of all records necessary to implement your Contingency Plan?

#### In the event of an emergency:

- o Did you activate the internal alarm or communication system to notify facility personnel?
- o Did you notify appropriate emergency response agencies?
- o Have you identified the character, exact source, amount and areal extent of released material?
- o Have you assessed the possible direct and indirect hazards to human health or the environment that may result from the release, fire or explosion and actions taken to contain the event?
- o Have you determined if evacuation of local areas outside your facility is required? If so, have you notified either the local response agency on-scene coordinator and/or the National Response Center (1-800-424-8802)?
- o Have you taken all reasonable measures to ensure that fires, explosions, and releases do not occur, recur or spread to other hazardous waste at your facility?
- o If facility operations were stopped, did you monitor for leaks, pressure buildups, gas generation or ruptures in valves, pipes or other equipment?

#### • Immediately after the emergency was under control:

o Did you provide for the treatment, storage and disposal of any contaminated material that resulted from the release, fire or explosion?

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- o Did you make sure that wastes that may be incompatible with materials released during the emergency haven't been treated, stored or disposed of until your facility was completely cleaned up?
- o Did you make sure that all emergency equipment was cleaned and ready for use before resuming facility operations?
- Have you informed the owner or operator of your facility that the facility has been cleaned up and all emergency equipment is ready for use so that they can notify the Colorado Department of Public Health and Environment and other local authorities that the facility is back in compliance and normal operations have resumed?
- Have you provided appropriate information to the owner or operator of your facility so that they can note the time, date and details of the incident in the operating record and send a written report on the incident to the Colorado Department of Public Health and Environment?

# 90 Day Area Container Checklist (Large Quantity Generators of Hazardous Waste)

- Are all accumulation/storage containers marked with the words "Hazardous Waste"?
- Is each container clearly marked with the accumulation start date – the date waste was first placed in the container?
  - o Are all of the container accumulation start dates less than 90 days ago?
- Have you conducted weekly inspections of the waste accumulation containers looking for leaks or deterioration? (complete the weekly inspection log)
  - o Are all containers in good condition and not leaking?
  - o Are all containers kept closed except when waste is being added or removed?
  - o Are all containers stored in a manner to prevent rupture or leakage?
  - o Is the waste compatible with the type of container it is store in and won't cause it to rupture, leak or corrode?
  - o Are wastes that could react together kept separated by a dike, berm, or wall?
  - o Do you have adequate aisle space around the containers to allow unobstructed movement of emergency response personnel and equipment?
- If any containers hold more than 26 gallons of wastes with organic concentrations greater than 500 parts per million by weight, are you meeting the requirements of 6 CCR 1007-3 Part 265 Subpart CC? Note: Subpart CC requirements only apply to containers in the 90-day area, not those in a satellite accumulation area.

Month \_\_\_\_\_ Year \_\_\_\_

Record any problems noted; document how they were corrected and the date of correction. Attach extra sheet if necessary.

Week	1	2	3	4	Comments
Labeled "Hazardous Waste"					
Accumulation Start Date Marked					
Start Date <90 Days Ago					
Good Condition/Not Leaking					
Kept Closed					
Stored to Prevent Rupture/Leakage					
Waste Compatible With Container					
Incompatible Wastes Separated					
Adequate Aisle Space					
Comply With Subpart CC, if applicable					
Your Initials					

# 90 Day Waste Tank Checklist (Large Quantity Generators)

- Is the tank marked with the words "Hazardous Waste"?
- Is the accumulation start date clearly marked on or attached to the tank, or recorded on a tank log sheet maintained at your facility?
- Has the tank held waste for < 90 days since the last time it was emptied?</li>
  - Have you clearly marked the accumulation start date on the tank or on a log sheet that is available for inspection?
- Do the tank and piping have secondary containment?
- Have you conducted daily inspections of the tank looking for leaks or deterioration? Note: "Daily inspection" means any day that waste is in the tank, not just days the facility is in operation.
  - o Is the tank in good condition and not leaking?
  - o Is the tank maintained in a manner to prevent rupture or leakage?
  - Is the waste compatible with the type of tank it is stored in and won't cause it to rupture, leak or corrode?
  - Are incompatible wastes kept separated by a dike, berm, or wall?
  - Do you have adequate aisle space around the tank to allow unobstructed movement of emergency response personnel and equipment?
- Have you conducted daily inspections of the level of waste in the tank and data gathered from tank monitoring equipment, and made sure that overflow prevention control equipment is working?
  - If waste is continuously fed into the tank, is the waste feed cutoff or bypass system working?
- Are you meeting the requirements of 6 CCR 1007-3 Part 265 Subpart BB?
   Note: Applies only if the waste in the tank contains greater than 10 weight percent organics and contacts equipment for greater than 300 hours.
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- Are you meeting the requirements of 6 CCR 1007-3 Part 265 Subpart CC? Note: Applies only if the tank holds wastes with organic concentrations greater than 500 parts per million by weight.
- Have you conducted a tank integrity assessment on new tanks installed after September 30, 1988?
- Have you conducted an annual inspection of the cathodic protection system, if present?
- Have you documented your inspection? (complete the daily inspection log sheet or other required records)

	"Daily inspection" means any day that waste is in the tank, not just days the facility is in operation.										_																			
Day	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Labeled "Hazardous Waste"																														
Start Date <90 Days Ago																														
Accumulation Start Date Marked on Tank or Log Sheet																														
Secondary Containment																														
Good Condition/Not Leaking																														
Stored to Prevent Rupture/Leakage																														ſ
Waste Compatible With Tank																														
Incompatible Wastes Separated																														
Adequate Aisle Space																														
Cutoff or Bypass System Working																														
Comply With Subpart BB and CC, if applicable																														
Your Initials																														

	Inspection Log Sheet (LQG)		Month	_ Year
Record any pro	blems noted; document how they were correc		ction. Attach extra sheet if	necessary.
		Comments		
Labeled "Hazardous Waste"				
Start Date <90 Days Ago				
Accumulation Start Date Marked on Tank or Log Sheet				
Secondary Containment				
Good Condition/Not Leaking				
Stored to Prevent Rupture/Leakage				
Waste Compatible With Tank				
Incompatible Wastes Separated				
Adequate Aisle Space				
Cutoff or Bypass System Working				
Comply With Subpart BB and CC, if applicable				

# Satellite Accumulation Area Inspection Checklist (Large Quantity Generators)

- Is the total amount of waste stored in this area less than 55 gallons of hazardous waste or one quart of acutely hazardous waste?
- Is the satellite accumulation area at or near the point of generation with nothing that might interfere with the transportation of waste to the satellite area?
- Is the area under the control of the operator of the process generating the waste, either visually or under lock and key?
- Is the satellite accumulation container marked with the words "Hazardous Waste" or other words to identify the contents of the container?
- Have you conducted weekly inspections of the waste accumulation container looking for leaks or deterioration? (complete the weekly inspection log)
  - o Is the container in good condition and not leaking?
  - o Is the container kept closed except when waste is being added or removed?
  - o Is the container stored in a manner to prevent rupture or leakage?
  - o Is the waste compatible with the type of container it is stored in and won't cause it to rupture, leak or corrode?
  - o Are wastes that could react together kept separated by a dike, berm, or wall?
  - o If the container holds ignitable or reactive waste, is it located at least 50 feet from the facility property line?
  - o Is there adequate aisle space around the container to allow unobstructed movement of emergency response personnel and equipment?
- Is the container clearly marked with the accumulation start date as soon as (within minutes) the level of 55 gallons of hazardous waste or one quart of acutely hazardous waste is met?
  - o Ensure the dated container is moved to the 90 day accumulation storage area within 24 hours.
- Is the current location of the satellite accumulation area recorded in the facility contingency plan?

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<b>Weekly SAA Container Inspection L</b>	og Sheet (LQG)	Month	Year
Record any problems noted; document how they we	ere corrected and the dat	e of correction. Attach ext	ra sheet if necessary.

Week	1	2	3	4	Comments
<55 Gallons in Satellite Accumulation Area					
Contents of Container Labeled					
Good Condition/Not Leaking					
Kept Closed					
Stored to Prevent Rupture/Leakage					
Waste Compatible With Container					
Incompatible Wastes Separated					
Ignitable/Reactive Wastes Stored >50' From Property Line					
Adequate Aisle Space					
Accumulation Start Date Marked and Container Moved to 90-day Area When Full – Check Daily					
Your Initials					