

Re: Hazardous Waste Notification Requirement (40 CFR 403.12(p))

Dear Industrial User:

The enclosed form describes federal requirements for hazardous waste generators and transporters which may apply to your operations. In summary, any industrial user shall notify authorities of any discharge into the POTW of a substance, which, if otherwise disposed of, would be a hazardous waste listed under 40 CFR part 261. Discharge of more than fifteen kilograms of non-acute hazardous wastes in a calendar month or any quantity of acute hazardous wastes as specified in 40 CFR 261.30(d) and 261.33(e) requires a one-time notification to the wastewater treatment facility, SCDHEC, and EPA. If the industrial user discharges more than 100 kilograms of such waste per calendar month to the wastewater facility, the notification also shall contain certain concentration and mass estimates, and a certification of programs in place to reduce the volume and toxicity of hazardous wastes generated to the degree it has determined to be economically feasible.

Please return the completed Hazardous Waste Notification form for your industry (which should fulfill your notification responsibility to the wastewater facility). If additional forms are needed for full disclosure, please duplicate the form. Should your industry begin using a hazardous waste or the hazardous list be expanded to include constituents already being used at your facility, you are required to send notification to the Commission (and State and Federal regulators). Please feel free to duplicate this notice for your future needs

Sincerely,

Clint Dickey  
Environmental Analyst

**HAZARDOUS WASTE NOTIFICATION  
PICKENS COUNTY PUBLIC SERVICE COMMISSION**

Company \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Contact Person \_\_\_\_\_ Phone \_\_\_\_\_

**DISCHARGE TO WASTEWATER SYSTEM OF MORE THAN FIFTEEN KILOGRAMS OF NON-ACUTE, OR ANY AMOUNT OF ACUTE, HAZARDOUS WASTE AS SPECIFIED IN 40 CFR 261.30(d) AND 261.33(e) REQUIRES A ONE-TIME NOTIFICATION.**

Name of Waste	EPA Hazardous Waste No.	Type of Discharge (Continuous or Batch)

**IF MORE THAN 100 KILOGRAMS OF ANY HAZARDOUS WASTE PER CALENDAR MONTH IS DISCHARGED TO WASTEWATER SYSTEM, PLEASE INCLUDE THE FOLLOWING ITEMS OF INFORMATION FOR EACH HAZARDOUS WASTE, TO THE EXTENT SUCH INFORMATION IS KNOWN AND READILY AVAILABLE.**

Name of Consituent	Conc. In Wastestream (Current month)	Mass in Wastestream (Current month)	Mass in Wastestream (Next 12 Months)

*I CERTIFY THAT I HAVE A PROGRAM IN PLACE TO REDUCE THE VOLUME AND TOXICITY OF HAZARDOUS WASTES GENERATED TO THE DEGREE I HAVE DETERMINED TO BE ECONOMICALLY FEASIBLE.*

\_\_\_\_\_  
 Signature of Authorized Company Representative

\_\_\_\_\_  
 Date