



Town of Acton
Department of Public Health
 472 Main Street, Acton, MA 01720
 Phone: (978) 929-6632 Fax: (978) 929-6340
 www.acton-ma.gov

ANNUAL INSPECTION HAZARDOUS MATERIALS PERMIT HOLDER

Facility Name: Colonial Chevrolet Date 6/23/14
 Address: 171 Great Road
 Type of Business: Auto garage/body shop
 Telephone: 978-263-1000 Email: Scarlson@colonialchevrolet.com
 Contact Person: Steve Carlson Initial Inspection Re-Inspection

| Housekeeping: | Y | N | Comments |
|--|-------------------------------------|-------------------------------------|---------------|
| Area clean | <input checked="" type="checkbox"/> | | |
| Spills present | | <input checked="" type="checkbox"/> | |
| Appropriate material storage | <input checked="" type="checkbox"/> | | |
| Materials and wastes separate | <input checked="" type="checkbox"/> | | |
| Cleanup materials available | <input checked="" type="checkbox"/> | | |
| Materials have secondary containment | <input checked="" type="checkbox"/> | | |
| Materials and wastes are labeled | <input checked="" type="checkbox"/> | | |
| Safety: | | | |
| Are MSDS sheets available on site | <input checked="" type="checkbox"/> | | |
| Employee personal protective equipment on site | <input checked="" type="checkbox"/> | | |
| Employees trained in Haz Mat handling | <input checked="" type="checkbox"/> | | |
| Emergency procedures posted | <input checked="" type="checkbox"/> | | |
| Site Management: | | | |
| Waste removed by licensed hauler | <input checked="" type="checkbox"/> | | Clean harbors |
| Floor drains present in area of Haz Mat or waste | | <input checked="" type="checkbox"/> | |
| Sinks present in area of Haz Mat or waste | | <input checked="" type="checkbox"/> | |
| Testing of septic system necessary | | <input checked="" type="checkbox"/> | |
| Does site plan on file reflect current arrangement | <input checked="" type="checkbox"/> | | |
| Any UST (underground storage tank) present | | <input checked="" type="checkbox"/> | |
| If UST present, is it alarmed | | <input checked="" type="checkbox"/> | |

Action Items:

- _____ 4. _____
- All OK 5. _____
- _____ 6. _____

Re-inspection required? Yes No

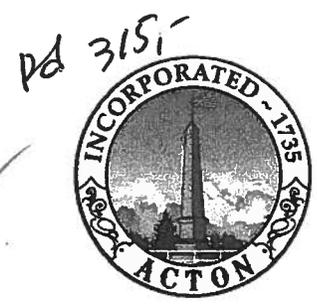
Re-inspection Date: _____

[Signature] _____
 Inspector Signature Date

[Signature] _____
 Facility Representative Signature Date

DH
 6/25/14

**TOWN OF ACTON
HAZARDOUS MATERIALS CONTROL
ANNUAL PERMIT APPLICATION**



| Site Address | Mailing Address |
|---|---|
| Colonial Chevrolet 33 Great Road Acton, MA 01720 | 171 Great Road Acton, MA 01720 |
| Category: 2, 4, 9, 12, | Fee: \$ 315 |

Hazardous Materials Permitting Categories (Renewal)

- | | |
|---|--|
| <ul style="list-style-type: none"> 1. Hazardous Waste Generator (\$65) 3. Hazardous Materials Generator (\$65) 5. Discharge Permit (\$140) 7. Hazardous Waste User (\$65) 9. Haz. Mat. Storer Small Industry (160) 11. Haz. Mat. Storer Small Retail (\$140) 13. Haz. Waste Storer Retail (\$45) | <ul style="list-style-type: none"> 2. Small Hazardous Waste Generator (\$45) 4. Hazardous Materials User (\$45) 6. Remediation Permit (\$140) 8. Haz. Mat. Storer Large Industry (\$235) 10. Haz. Mat. Storer Large Retail (\$170) 12. Haz. Waste Storer Industry (\$65) |
|---|--|

- 1. Are MSDS's readily available on-site? Yes No
- 2. Is employee personal protective equipment available on site? Yes No
- 3. Are emergency procedures posted? Yes No
- 4. Do all hazardous materials have 110% secondary containment? Yes No
- 5. Are all materials and wastes clearly labeled? Yes No
- 6. Are spill cleanup materials available? Yes No
- 7. Do you have a copy of the Hazardous Materials Control Bylaw on site? Yes No
- 8. Are you contracting with a DEP licensed waste hauler (if applicable)? Yes No

Name of hauler: CLEAN HARBORS

Address of hauler: P.O. BOX BOSTON, MA, 02241

- 9. Can you provide copies of waste shipping manifests if necessary? Yes No

10. Contact person for the site is STEPHEN CARLSON

I hereby certify on behalf of COLONIAL CHEVROLET, the applicant for a permit or permit renewal from the Acton Board of Health pursuant to Chapter I of the Town of Acton General By-laws (the "Permit Application") that (a) the information contained in the Permit Application is true, accurate and complete, and (b) the facility located/operating at the above noted site address, Acton, MA and that is the subject of the Permit Application complies with the requirements for Approval of Hazardous Material Waste and Special Waste Permits as defined in section 3.5 of Chapter I of the Town of Acton General By-laws, Hazardous Materials Control, as amended.

Authorized signature:

Date: 4-18-2014

Submitted 4/2/04

A. Hazardous Materials (non-waste) Inventory Information

| Class | Chemical/Common Name | Max. Qty | Container Size |
|-------|--|---|---|
| 3 | Dexos ① SYNTHETIC Motor oil 5W30 Weight | 300 gal. | 300 gallons |
| 3 | ATF DEXTRON II TRANS FLUID | 300 gal. ____ lbs. ____ cu. ft. | 300 gal. ____ lbs. ____ cu. ft. |
| 3 | 5W30W Engine motor oil CONVENTIONAL | 1,000 gal. ____ lbs. ____ cu. ft. | 1,000 gal. ____ lbs. ____ cu. ft. |
| 3 | ORANGE, Pre mixed 50/50% Engine Coolant | 125 gal. ____ lbs. ____ cu. ft. | 100 gal. ____ lbs. ____ cu. ft. |
| 3 | Green, Pre mixed 50/50% Engine Coolant | 125 gal. ____ lbs. ____ cu. ft. | 100 gal. ____ lbs. ____ cu. ft. |
| 3 | Automotive, Pre mixed 50/50% Washer Solvent | 250 gal. ____ lbs. ____ cu. ft. | 250 gal. ____ lbs. ____ cu. ft. |
| 8 | Wet Batteries, FLUID ACID (Per Battery) | ____ gal. ____ lbs. 50 cu. ft. | ____ gal. ____ lbs. 1 cu. ft. |

B. Hazardous Waste Inventory Information

| Class | Name of Hazardous Waste | Treatment/Disposal Method(s) (Definitions provided on bottom of page) | Max. Qty. (at any one time) | Monthly Qty. Generated |
|-------|-------------------------------------|---|--|--|
| 3 | ENGINE MOTOR OIL , WASTE HEATER | <input checked="" type="checkbox"/> Recycled on-site. <input type="checkbox"/> Treated on-site. <input type="checkbox"/> Shipped off-site for recycling/ treatment /disposal | 250 gal. ____ lbs. ____ cu. ft. | 100 gal. (approx) ____ lbs. ____ cu. ft. |
| 3 | RADIATOR COOLANT WASTE CONTAINER | <input type="checkbox"/> Recycled on-site. <input type="checkbox"/> Treated on-site. <input checked="" type="checkbox"/> Shipped off-site for recycling/treatment/disposal | 200 gal. ____ lbs. ____ cu. ft. | 75 gal. (approx) ____ lbs. ____ cu. ft. |
| 3 | LACQUER THINNER | <input type="checkbox"/> Recycled on-site. <input checked="" type="checkbox"/> Treated on-site. <input type="checkbox"/> Shipped off-site for recycling/treatment/disposal | 35 gal. ____ lbs. ____ cu. ft. | 10 gal. (approx) ____ lbs. ____ cu. ft. |
| | | <input type="checkbox"/> Recycled on-site. <input type="checkbox"/> Treated on-site. <input type="checkbox"/> Shipped off-site for recycling/treatment/disposal | ____ gal. ____ lbs. ____ cu. ft. | ____ gal. ____ lbs. ____ cu. ft. |
| | | <input type="checkbox"/> Recycled on-site. <input type="checkbox"/> Treated on-site. <input type="checkbox"/> Shipped off-site for recycling/treatment/disposal | ____ gal. ____ lbs. ____ cu. ft. | ____ gal. ____ lbs. ____ cu. ft. |

C. Facility Site Plan/Storage Map

Prepare and submit with this Registration Form a simple site map which shows the following information:

- North direction • Street(s) adjacent to facility • Electrical, water, and gas shutoff valves
- Basic floor plan for each building containing hazardous materials/wastes which indicates building entrance(s) and hazardous material/waste storage locations (use grid locations or assign a code - A, B, C, etc. - to clearly identify each storage location for use in the above inventories).

Site Address: 171 GREAT ROAD City: ACTON, MA, 01720
 Date Map Drawn: _____

| | A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q | R | S | T | U | V | W | X | Y | Z |
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| 28 | | | | | | | | | | | | | | | | | | | | | | | | | | |

D. Endorsement

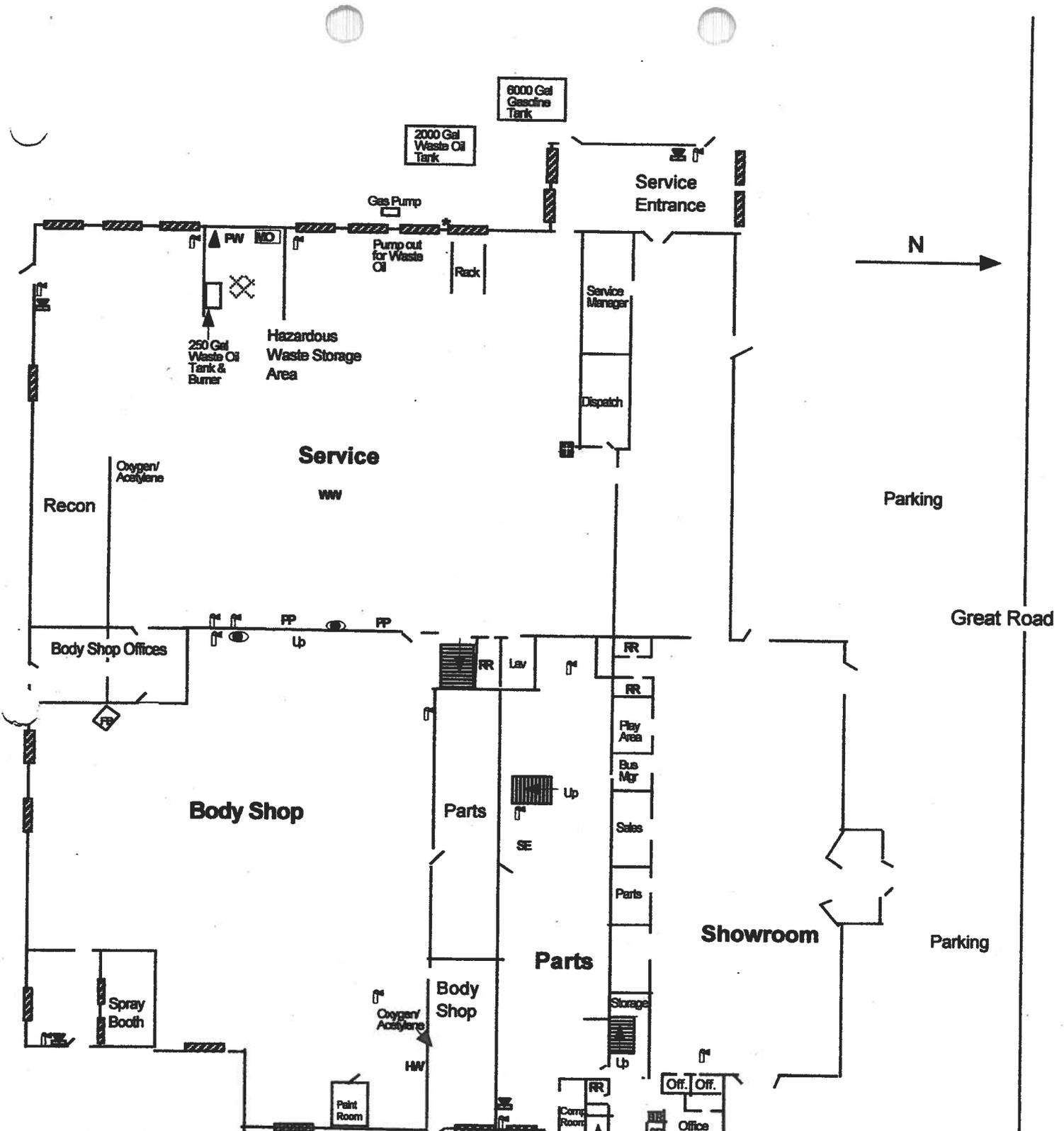
I declare that the above information is true and correct to the best of my knowledge. I agree to comply with all applicable regulations regarding storage, handling, and disposal of hazardous materials and hazardous wastes.

Stephen Carlson
 Owner/Operator's Name (Print)

[Signature]
 Owner/Operator's Signature

4-18-14
 Date

----- Do Not Complete below This Line -----



Legend

| | |
|-------------------|----------------------------|
| Overhead Door | FP Power Panel |
| PW Parts Washer | Eye Wash |
| Used Antifreeze | RR Restroom |
| Waste Oil | * Gas Main |
| Fire Extinguisher | MO Motor Oil |
| Spill Equipment | WW Windshield Washer Fluid |
| First Aid | Fire Blanket |
| Pull Station | HW Hazardous Waste |
| Drain | Second Floor Above |
| Underground Tank | ES Emergency Shut Off |
| SR Sprinkler Room | ER Break Room |

COLONIAL CHEVROLET
171 Great Road
Acton, MA 01720
978-263-1000

Evacuation
Location

5/1/2014

Expires 5/1/2015

Fee: **315.00**

**TOWN OF ACTON
PERMIT
HAZARDOUS MATERIALS CONTROL BYLAW**

Is hereby granted a permit to store and use Hazardous Materials at **Colonial Chevrolet, 171 Great Road, Acton, MA 01720**. This permit is granted with the conditions as noted on the attached list of conditions assigned to your facility.

Permit Categories: **2,4,9,12**

*See below explanation of permit categories

HAZARDOUS MATERIALS CONTROL PERMIT CATEGORIES AND FEES

| <u>Category</u> | <u>Initial</u> | <u>Renewal</u> |
|--|----------------|----------------|
| 1. Large Hazardous Waste Generator | \$160 | \$65 |
| 2. Small Hazardous Waste Generator | \$60 | \$45 |
| 3. Hazardous Materials Generator | \$160 | \$65 |
| 4. Hazardous Materials User | \$50 | \$45 |
| 5. Remediation Discharge Permit | \$575 | \$140 |
| 6. Remediation Permit | \$595 | \$140 |
| 7. Hazardous Waste User | \$160 | \$65 |
| 8. Hazardous Materials Storer Large Industry | \$510 | \$235 |
| 9. Hazardous Materials Storer Small Industry | \$360 | \$160 |
| 10. Hazardous Materials Storer Large Retail | \$430 | \$170 |
| 11. Hazardous Materials Storer Small Retail | \$305 | \$160 |
| 12. Hazardous Waste Storer Small Industry | \$160 | \$65 |
| 13. Hazardous Waste Storer Retail | \$60 | \$45 |
| 14. Hazardous Waste Storer Large Industry | \$160 | \$65 |

HAZARDOUS MATERIALS CONTROL PERMIT

List of Conditions: Colonial Chevrolet 171 Great Road Acton, MA 01720

Pursuant to the authority of Chapter I - Hazardous Materials Control Bylaw - of the Town of Acton's General Bylaws, the Board of Health has considered your application and plans submitted therewith, and has determined that the materials to be stored, used or generated, are within the scope of said bylaw. The Board of Health hereby orders that the following conditions are necessary and all storage, use or generation must be performed in strict conformance herewith:

1. All liquid Hazardous Materials and Wastes shall be stored in a containment area capable of containing 110% of the largest volume stored in the containment area.
2. All Materials Safety Data Sheets (MSDSs) for the Hazardous Materials shall be maintained on site. MSDSs shall be reviewed with employees at the time of their employment and on an annual basis thereafter. MSDS must be made available to all employees upon request.
3. A Contingency Plan, including emergency contact numbers (Telephone numbers of owner, operator, etc.) and a sketch showing clearly all Hazardous Material and Waste locations shall be submitted and updated annually, to the Board of Health, Fire Department, Police Department, and Civil Defense.
4. Emergency procedures and local Emergency Response Telephone Numbers (Health, Fire, Police, D.E.P., Civil Defense, etc.) should a spill occur, shall be posted in clear view of all employees where Hazardous Materials or Wastes are used or stored.
5. All Hazardous Wastes must be disposed of by a Licensed, D.E.P. approved, hauler or be recycled on site.
7. All Hazardous Materials Containers shall be labeled and dated when filling first began.
8. Speedy Dry, or its equivalent, shall be kept in the storage area, in case of a Hazardous Materials or Wastes spill.
10. All floor drains shall be sealed or discharged into a closed system, with the waste disposed of by a D.E.P. approved Hazardous Waste Hauler.
11. Protective equipment, including chemical resistant gloves, eye goggles and (rubber) boots, in addition to soap and water, shall be made available to all employees, at all times, in any Hazardous Materials or Waste storage or use area.
12. No Hazardous Materials or Wastes shall be discharged into a sink or toilet.
14. A fire extinguisher, containing an appropriate fire extinguishing agent, shall be placed in the Hazardous Materials Storage area.
15. No food or drink shall be stored or consumed in any area where Hazardous Materials are stored or used.
17. A leak detector monitor and an over flow alarm shall be installed in the underground storage tank and the tank shall be tested annually for tightness with the results submitted to the Board of Health.

18. D.E.P. Generator Registration shall be provided annually upon renewal of the Hazardous Materials Storage Permit.
21. Gas cylinders shall not be rolled, even for short distances. They shall be moved by a suitable hand truck, in accordance with an OSHA standard that applies.
25. Prior to any new chemical or processes being used, the Board of Health shall be notified.
26. The operation of this facility shall be in compliance with all present and future regulations of E.P.A. and D.E.P. at all times. Nothing in this permit allows or requires non-compliance with all present and future applicable laws or regulations of the Federal or State Governments.