

**RESOURCE RECOVERY INSPECTION CHECKLIST**

|                |  |              |           |       |
|----------------|--|--------------|-----------|-------|
| FACILITY NAME  |  |              | DATE      |       |
| STREET ADDRESS |  | CITY         |           | STATE |
| EPA ID NUMBER  |  | MO ID NUMBER | RR NUMBER |       |

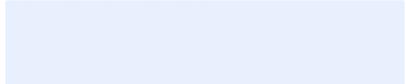
**U. EXEMPT RESOURCE RECOVERY FACILITIES (USES, REUSES AND LEGITIMATELY RECYCLES LESS THAN ONE THOUSAND KILOGRAMS (1,000 kg) OF HAZARDOUS WASTE FROM ON-SITE IN A CALENDAR MONTH)**

| C  | V                        | NA                       | COMMENTS                 |  |
|----|--------------------------|--------------------------|--------------------------|--|
| 1. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Exempt resource recovery facility has submitted notification to the department to identify the owner/operator, name and location of facility, identification of the waste(s) recovered, method(s) of recovery, and approximate annual quantity of waste recovered. 10 CSR 25-9.020(2)(B) |

**V. U, R1 AND R2 FACILITIES**

**U** — This classification applies to facilities that use, reuse, legitimately reclaim or recycle more than one thousand kilograms (1,000 kg) of hazardous waste on-site in a calendar month. 10 CSR 25-9.020(3)(A)1  
**R1** — This classification applies to owners and operators of mobile recycling processes that recycle hazardous waste for reuse at the site of generation and does not involve the recycling of hazardous waste to be reused off-site of generation. 10 CSR 25-9.020(3)(A)2  
**R2** — This classification applies to a facility which accepts hazardous waste from off-site. 10 CSR 25-9.020(3)(A)3

| C   | V                        | NA                       | COMMENTS                 |  |
|-----|--------------------------|--------------------------|--------------------------|--|
| 1.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The owner/operator of a facility which uses, reuses, legitimately recycles or reclaims hazardous waste shall apply for and operate in accordance with a resource recovery facility certification issued by the department except as provided otherwise in this rule. 10 CSR 25-9.020(1)(A)3  |
| 2.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Utilize for treatment, resource recovery, disposal or storage of all hazardous wastes, only a hazardous waste facility authorized to operate pursuant to sections 260.350 to 260.430 or the federal RCRA, or a state hazardous waste management program authorized pursuant to the federal RCRA, or any facility exempted from the permit required pursuant to section 260.395; Section 260.380.1(7) RSMo. |
| 3.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Transportation of hazardous waste to a resource recovery facility shall be in compliance with 10 CSR 25-6.10 CSR 25-9.020(1)(A)2.  |
| 4.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Facility complies with hazardous waste storage conditions prior to resource recovery as stipulated in 10 CSR 25-9.020(1)(A) and 10 CSR 9.020(3)(E)7A through C or obtains the required permit or interim status pursuant to 10 CSR 25-7.   |
| 5.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Facility ships/disposes still bottoms within 90 days. 10 CSR 9.020(3)(E)7B   |
| 6.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The owner/operator submits quarterly reports to the program as required. 10 CSR 25-9.020(3)(E)6 referencing 10 CSR 25-7.264(2)(E)2   |
| 7.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Facility is classified as U, R1 or R2 accurately. 10 CSR 25-9.020(3)(A)  |
| 8.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Facility has submitted an application to the department including all required information. 10 CSR 25-9.020(3)(B)  |
| 9.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Facility has submitted an application to the department for certification renewal within 90 days of the prior certification's expiration or prior to construction. 10 CSR 25-9.020(3)(D)   |
| 10. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Operation of the resource recovery facility did not occur prior to issuance of the resource recovery certification. 10 CSR 25-9.020(3)(D)  |

| V. U, R1 AND R2 FACILITIES (cont.)   |                          |                          | COMMENTS  |
|--|--------------------------|--------------------------|---|
| C  | V                        | NA                       |   |
| 11.  | <input type="checkbox"/> | <input type="checkbox"/> | Facility has submitted a written request prior to any major change for department approval at least 60 days prior to a major change (i.e., change in recovery process, addition of a new recovery process, 10 percent or greater increase in the monthly quantity of any hazardous waste recovered, change in ownership or operational control, or closure of a resource recovery unit, etc.). 10 CSR 25-9.020(3)(E)1 |
| 12.  | <input type="checkbox"/> | <input type="checkbox"/> | Facility has submitted plan addressing disposition of unit and hazardous waste if any reclamation unit is removed. Within 30 days after closure, the owner/operator must submit written notice to the department that the resource recovery unit has been closed and all hazardous waste or residue was disposed. 10 CSR 25-9.020(3)(E)1.A and B  |
| 13.  | <input type="checkbox"/> | <input type="checkbox"/> | Facility has submitted written request to the department for approval of a minor change (i.e., addition or deletion of recyclable waste stream, change in operational procedures of the recycling process, etc.) at least 30 days prior to the change. 10 CSR 25-9.020(3)(E)2   |
| 14.  | <input type="checkbox"/> | <input type="checkbox"/> | Facility maintains copy of certification and all approved modifications in an orderly manner at the facility. Facility has not modified the resource recovery facility without department approval. 10 CSR 25-9.020(3)(E)3  |
| 15.  | <input type="checkbox"/> | <input type="checkbox"/> | Facility maintains a written operating record. 10 CSR 25-9.020(3)(E)5 referencing 40 CFR 264.73(b)(1) and (2) as modified by 10 CSR 25-7.264(2)(E)2   |
| 16.  | <input type="checkbox"/> | <input type="checkbox"/> | Facility has notified the U.S. Environmental Protection Agency and the state that it qualifies for a small quantity on-site burner exemption or has interim status or a permit if it burns hazardous waste on-site. 10 CSR 25-7.266(1) incorporating 40 CFR 266.108 and 40 CFR 266.103  |
| 17.  | <input type="checkbox"/> | <input type="checkbox"/> | Owner/Operator complies with manifest system requirements. 10 CSR 25-9.020(3)(E)4 referencing 40 CFR 264.71 and 264.72 incorporating 10 CSR 25-7.264  |
| W. R2 FACILITIES ONLY  |                          |                          |   |
| C  | V                        | NA                       | COMMENTS  |
| 1.   | <input type="checkbox"/> | <input type="checkbox"/> | Facility has submitted a sampling and analysis plan for incoming shipments to assure the quality and type of wastes accepted are compatible with the successful operation of the facility. 10 CSR 25-9.020(3)(C)1   |
| 2.   | <input type="checkbox"/> | <input type="checkbox"/> | If receiving hazardous waste facility maintains a daily log which indicates the manifest number associated with each hazardous waste received and the immediate disposition of those wastes as part of its operating record in compliance with paragraph (3)(E)5. Analytical data obtained as a result of the sampling and analysis plan corresponds directly with the manifest. 10 CSR 25-9.020(3)(C)2               |
| 3.   | <input type="checkbox"/> | <input type="checkbox"/> | Facility has provided a closure plan and cost estimate for closure of the resource recovery activity at the facility prepared in accordance with 10 CSR 25-7.264(2)(G) – 10 CSR 25-9.020(3)(C)3.  |
| 4.   | <input type="checkbox"/> | <input type="checkbox"/> | Facility has provided a financial assurance mechanism to cover the closure cost estimate as specified in 10 CSR 25-7.264 – 10 CSR 25-9.020(3)(C)4.  |
| SIGNATURE OF INSPECTOR   |                          |                          | DATE  |
|  |                          |                          |   |