

FILE FOLDER

DESCRIPTION ON TAB:

2nd LAV. Bn.

Outside/inside of actual folder did not contain hand written information

Outside/inside of actual folder did contain hand written information

***Scanned as next image**

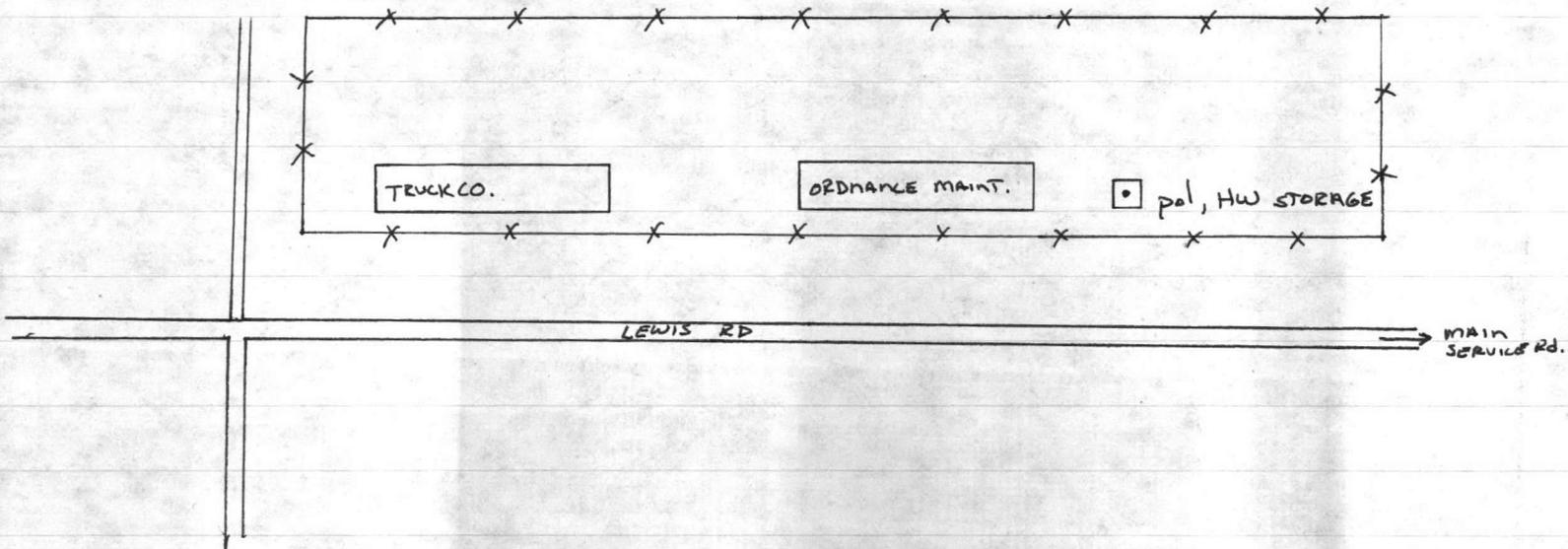
IF FOUND PLEASE RETURN TO NREAD
BLDG 1103 CAMP LEJEUNE, NC
PHONE 2083/2195

POC's

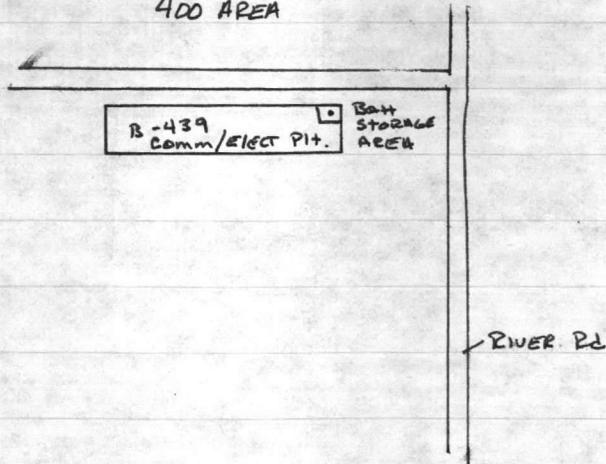
HmDO Lt. Smith, maint. OFFICER

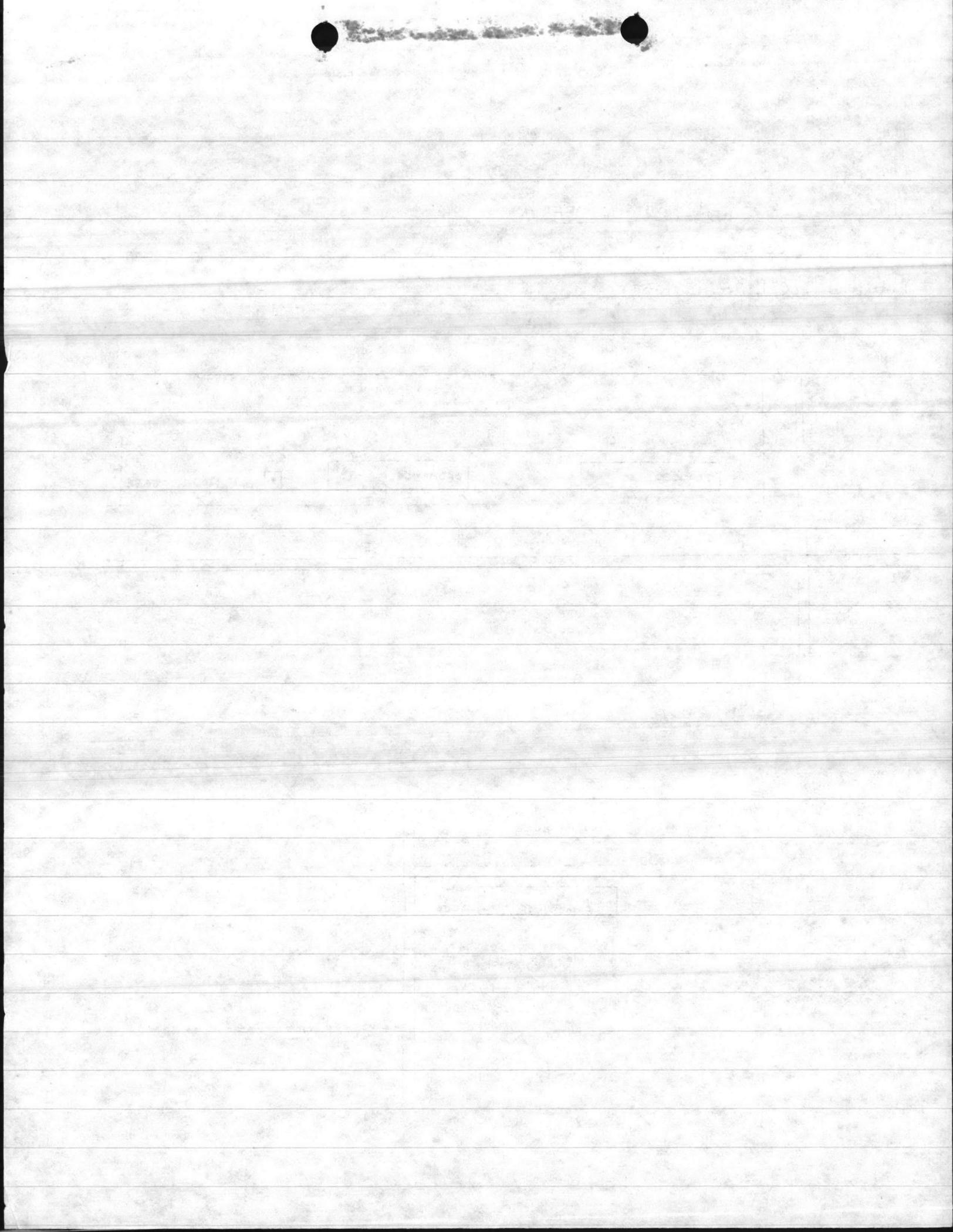
RADIO CHIEF SSGT. WRIGHT

BATT. NCO LCPL. WHISNANT



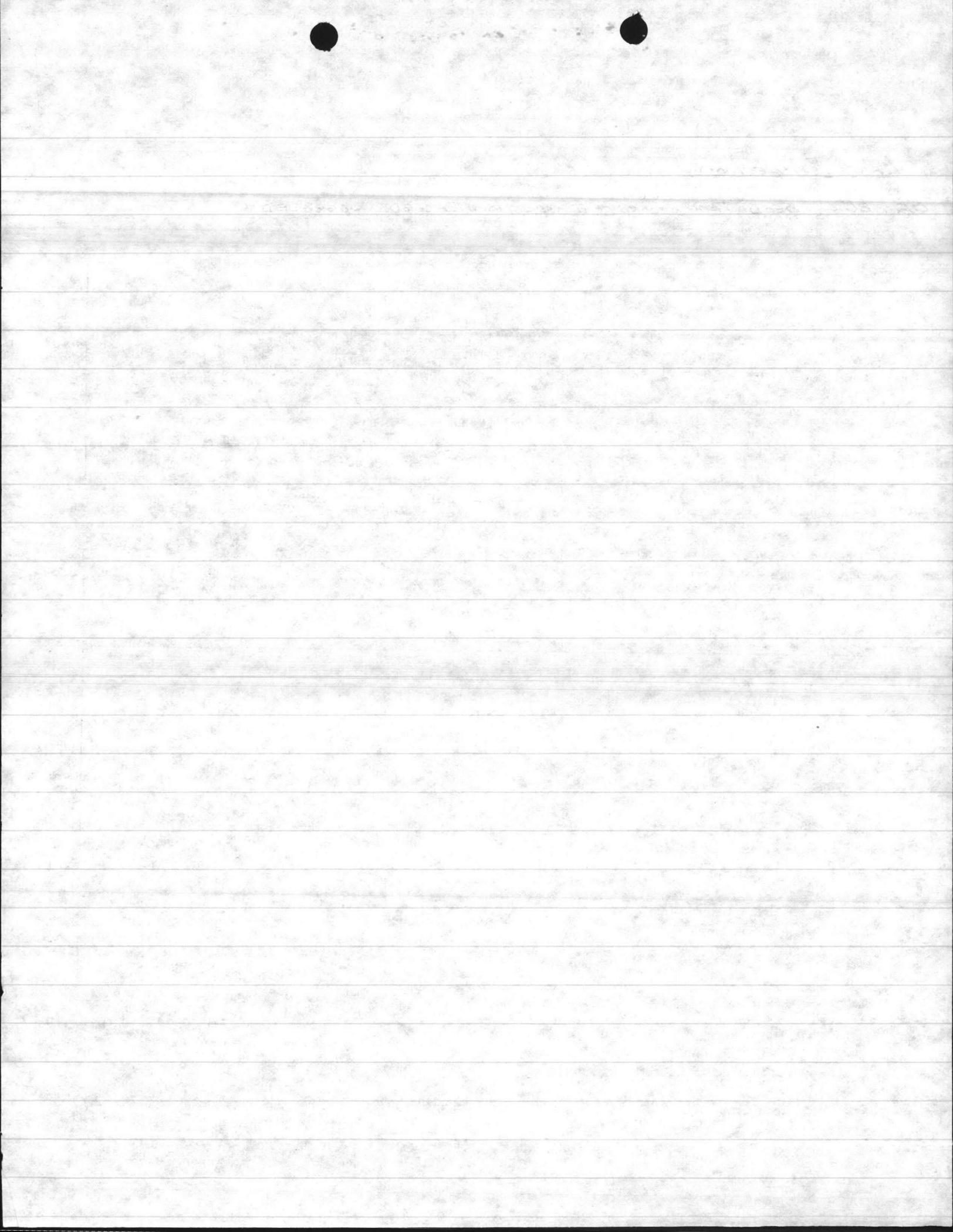
400 AREA





LAST INSPECTION

6 FEB 86 NEED TRNG RECORD + INSPECTION RECORDS UPGRADED



Pink NREAD

6240
NREAD
MAR 30 1987

From: Commanding General, Marine Corps Base, Camp Lejeune
To: Commanding General, 2d Marine Division, Camp Lejeune

Subj: HAZARDOUS WASTE MANAGEMENT COMPLIANCE INSPECTION OF
2D LAV BN DTD 9 DEC 86; FOLLOW UP ON

Ref: (a) CG MCB ltr dtd 7 Jan 87
(b) CG MCB 2916252 Oct 86
(c) BO 6240.5A

Encl: (1) Hazardous Waste Management Compliance Re-Inspection
Report for 2d LAV BN, 2d MARDIV of 11 Mar 87

208

1. On 11 March 87, a re-inspection was conducted by Base Environmental personnel to determine the adequacy of action taken to correct discrepancies identified during the subject inspection and documented in reference (a). The subject inspection was conducted in accordance with reference (b) to determine compliance with hazardous waste regulations described in reference (c). The enclosure provides findings during the re-inspection.

2. Based on the enclosure and observations made during the re-inspection, the following comment is provided. All discrepancies cited on previous inspections have been corrected and significant improvements in the Hazardous Waste Program were evident at all sites.

3. Point of contact for this matter is Mr. Danny Sharpe, extensions 2083/1690.

T. J. DALZELL
By direction

1987 0-2 2AM

ORGANIZATION:

2D Marine Division
2D LAV BN

INSPECTION DATE: 11 Mar 87

INSPECTOR'S NAME Sammy Gwynn

NO.	SPECIFIC LOCATION	DISCREPANCY	REF	RECOMMENDED CORRECTIVE ACTION
1		COMMUNICATION SHOP - BLDG 429		
2		MAINTENANCE SHOP - BLDG 1750		
		MOTOR TRANSPORT - BLDG 1755		
<p>COMMENT: All discrepancies cited on previous compliance inspections have been corrected. For the purpose of this inspection, the above facilities will be considered in compliance with hazardous waste regulations.</p>				

1211



HAZARDOUS WASTE (HW) MANAGEMENT INSPECTION FORM

Date: 11 MAR 87

1. Facility being Inspected: 21 LAUBN Comm SHOP Bldg # 429
2. Organization in Charge: 2d MAR DIV
3. Inspection Participants/Phone Number: Lt Sgt Rogue (prim)
LCPL BOCKISH (alt) LCPL CHANDLER phone # 5153
4. Description of HW Streams: Lithium Batteries

5. Are records of HW generation consistent with HW streams? yes

6. HW Training

a. Are job descriptions available for all personnel actively involved in HW management? yes

b. Are training records adequate/current? yes

c. Are alternate personnel assigned to key positions? yes
(If not, explain how unit deals with absence of key personnel)

d. Do contacted personnel demonstrate adequate knowledge of:

- (1) Regulatory Requirements yes
- (2) Applicable Base Orders yes
- (3) Types of HW Handled yes
- (4) Proper Containers yes
- (5) Proper Labeling yes
- (6) Weekly HW Inspections yes
- (7) HW Turn-in Procedures yes
- (8) Health and Safety yes
- (9) Spill Reporting Procedures yes
- (10) Spill Response Duties yes

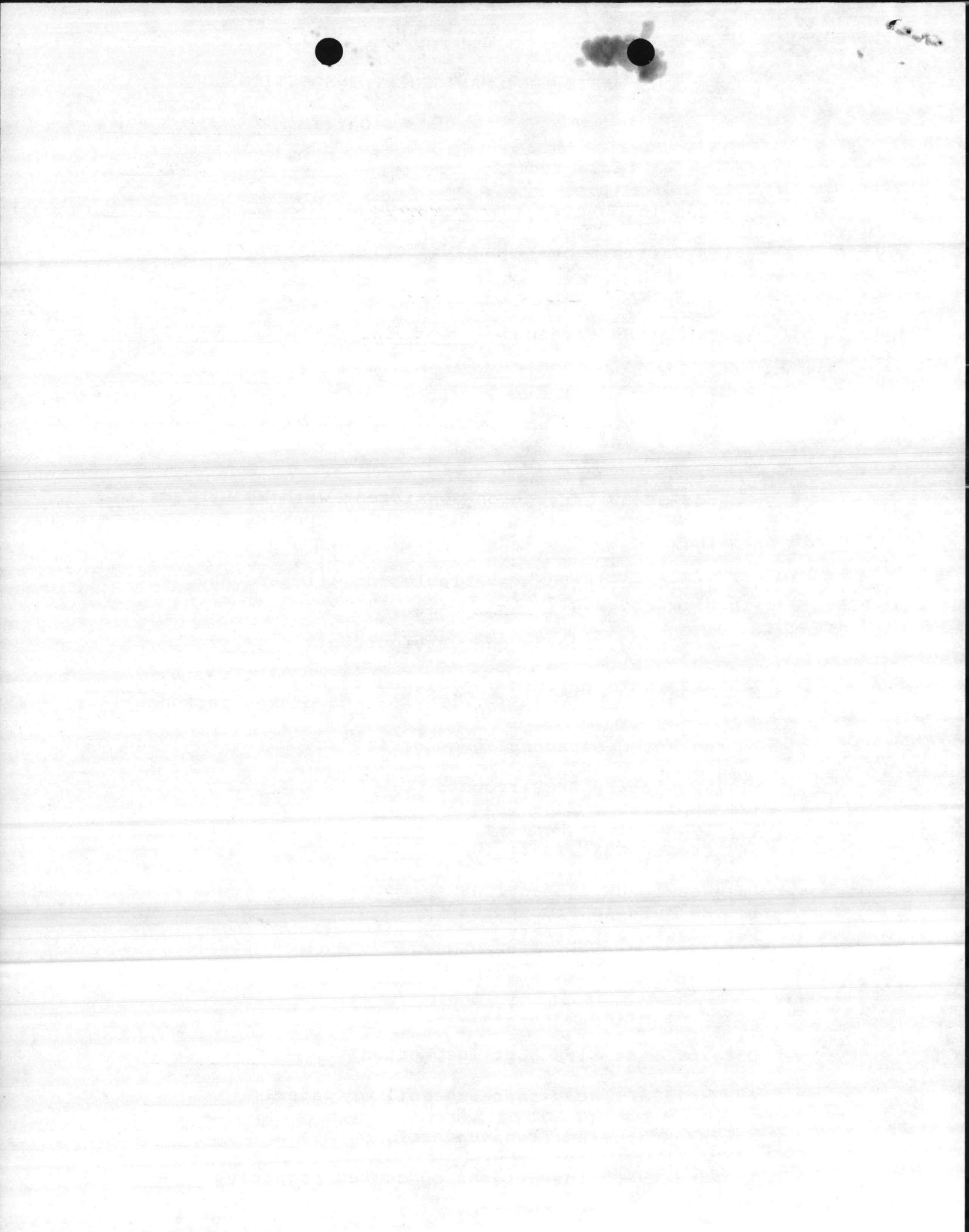
7. Condition of Storage Facilities

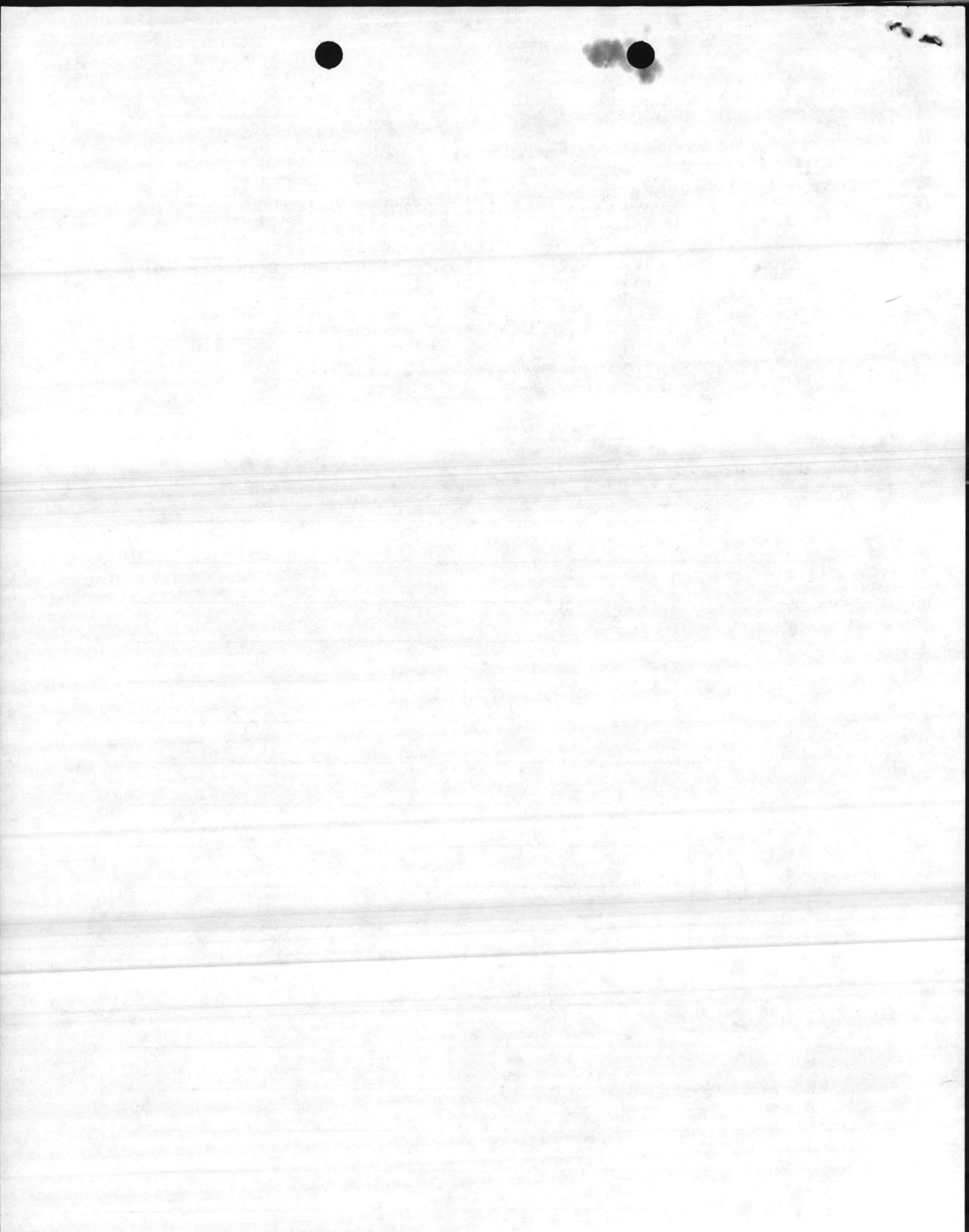
a. Date of last Fire Dept Inspection? _____

b. Are spills likely to reach soil or water? NO

c. Are HW protected from weather? yes

d. Are weekly HW inspections conducted properly? yes





HAZARDOUS WASTE (HW) MANAGEMENT INSPECTION FORM

Date: 11 MARCH 87

- 1. Facility being Inspected: 2d LAV BN Maintenance Shop Bldg 1750
- 2. Organization in Charge: 2d MARO
- 3. Inspection Participants/Phone Number: SySGT WILCOX (primary)
Lcpl Bussitt (alternate) Phone # 1477
- 4. Description of HW Streams: Dry Cleaning Solvent;
Electrolyte

5. Are records of HW generation consistent with HW streams? yes

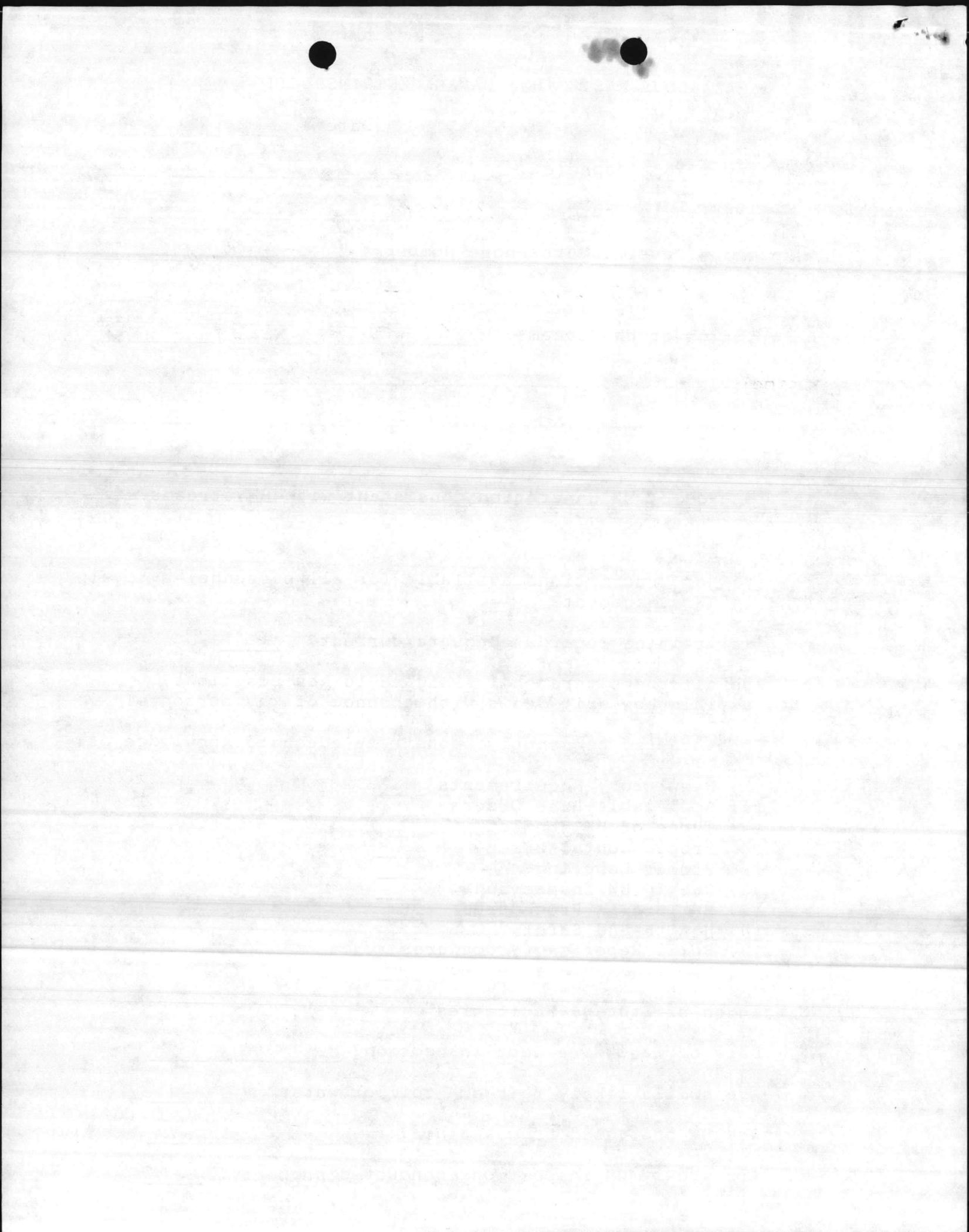
6. HW Training

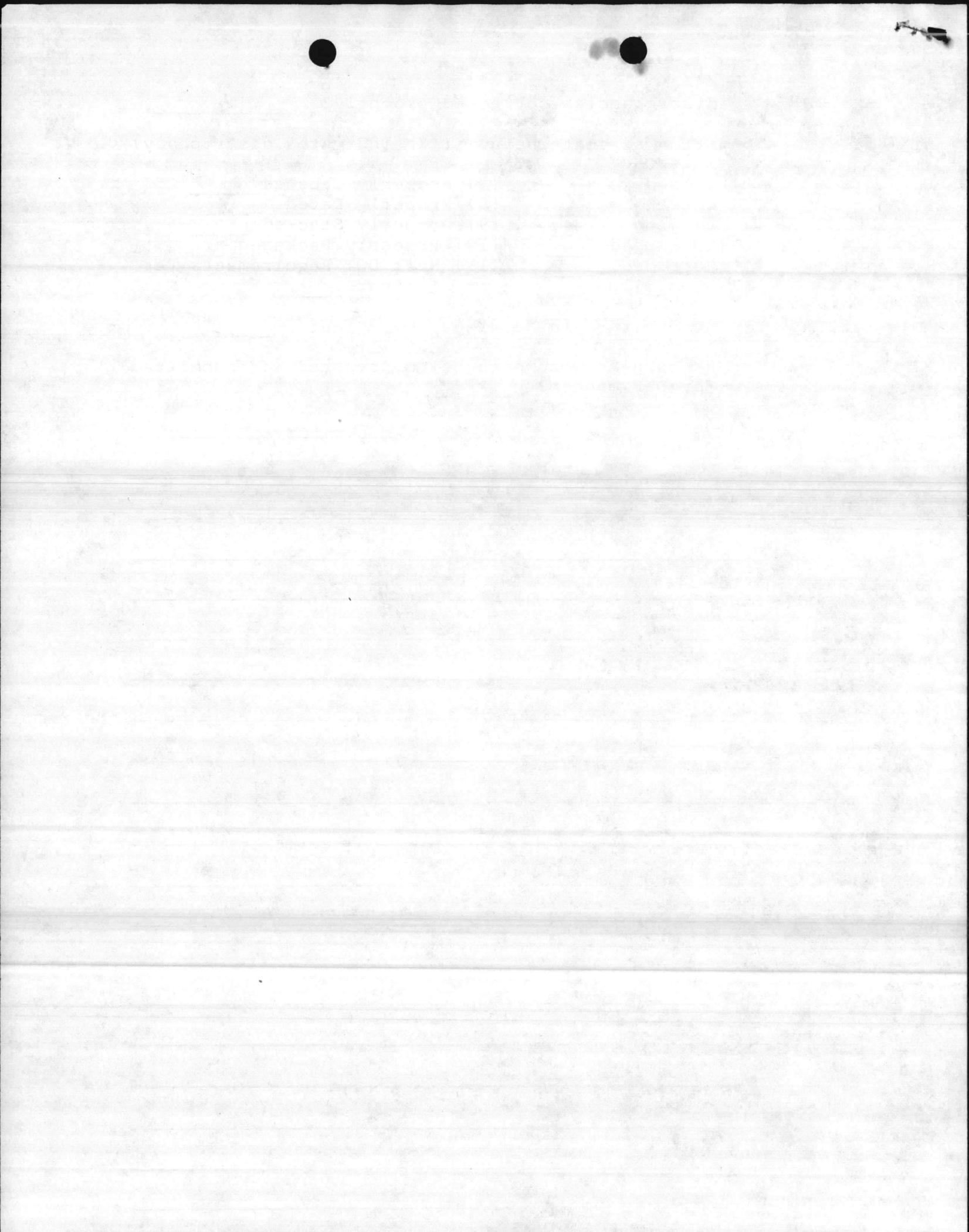
- a. Are job descriptions available for all personnel actively involved in HW management? yes
- b. Are training records adequate/current? yes
- c. Are alternate personnel assigned to key positions? yes
(If not, explain how unit deals with absence of key personnel)
- d. Do contacted personnel demonstrate adequate knowledge of:

- (1) Regulatory Requirements yes
- (2) Applicable Base Orders yes
- (3) Types of HW Handled yes
- (4) Proper Containers yes
- (5) Proper Labeling yes
- (6) Weekly HW Inspections yes
- (7) HW Turn-in Procedures yes
- (8) Health and Safety yes
- (9) Spill Reporting Procedures yes
- (10) Spill Response Duties yes

7. Condition of Storage Facilities

- a. Date of last Fire Dept Inspection? _____
- b. Are spills likely to reach soil or water? yes
- c. Are HW protected from weather? partially
- d. Are weekly HW inspections conducted properly? _____





HAZARDOUS WASTE (HW) MANAGEMENT INSPECTION FORM

Date: 11 MAR 87

1. Facility being Inspected: 2d LAV BN MOTOR TRANSPORT. Bldg #1755
2. Organization in Charge: 2d MAR DIV
3. Inspection Participants/Phone Number: SSGT La Fountain
(primary) CPL TOBY (alternate) phone #3305
4. Description of HW Streams: Dry Cleaning Solvent,
Electrolyte + POL

5. Are records of HW generation consistent with HW streams? yes

6. HW Training

a. Are job descriptions available for all personnel actively involved in HW management? yes

b. Are training records adequate/current? yes

c. Are alternate personnel assigned to key positions? yes
(If not, explain how unit deals with absence of key personnel)

d. Do contacted personnel demonstrate adequate knowledge of:

- | | |
|--------------------------------|------------|
| (1) Regulatory Requirements | <u>yes</u> |
| (2) Applicable Base Orders | <u>yes</u> |
| (3) Types of HW Handled | <u>yes</u> |
| (4) Proper Containers | <u>yes</u> |
| (5) Proper Labeling | <u>yes</u> |
| (6) Weekly HW Inspections | <u>yes</u> |
| (7) HW Turn-in Procedures | <u>yes</u> |
| (8) Health and Safety | <u>yes</u> |
| (9) Spill Reporting Procedures | <u>yes</u> |
| (10) Spill Response Duties | <u>yes</u> |

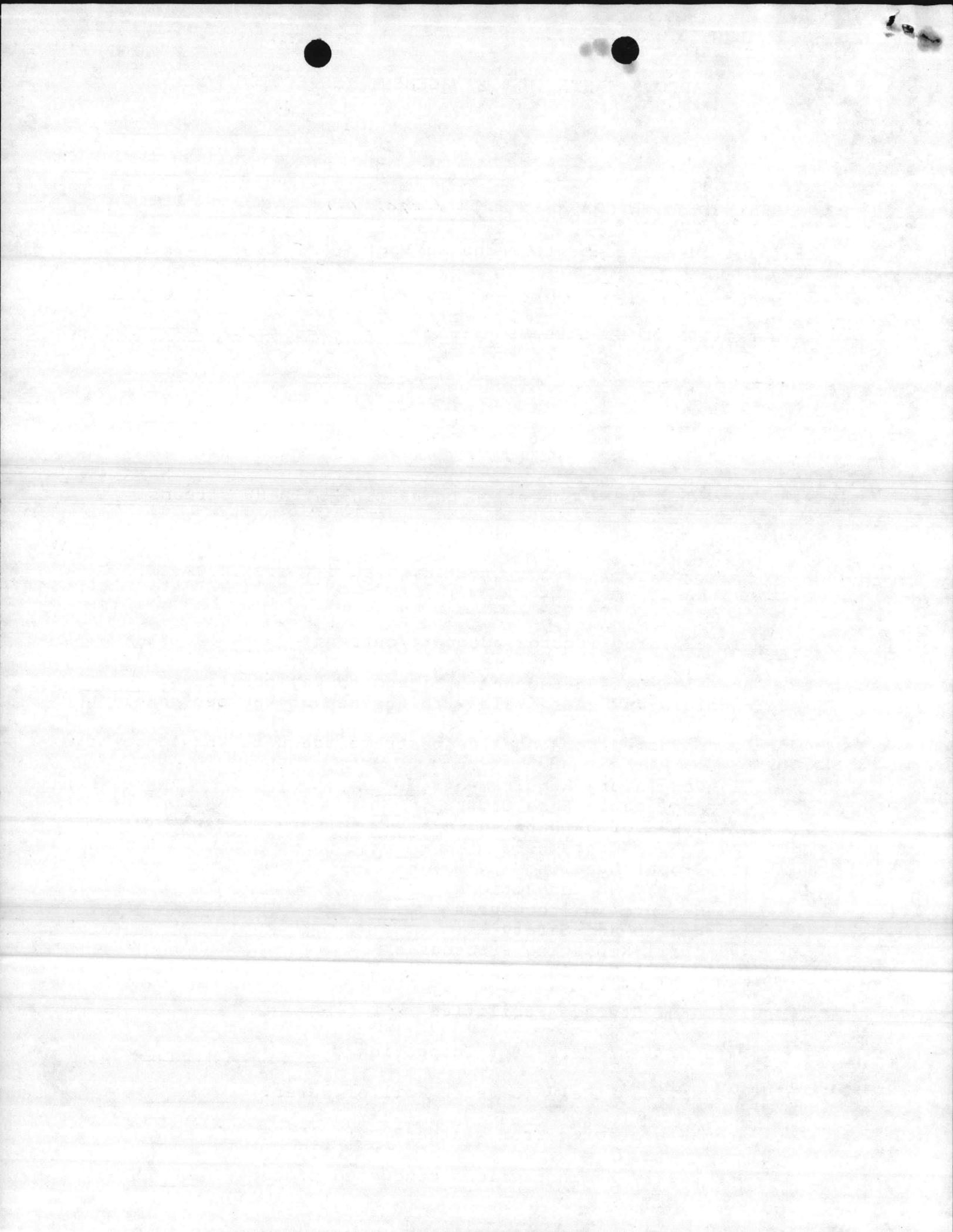
7. Condition of Storage Facilities

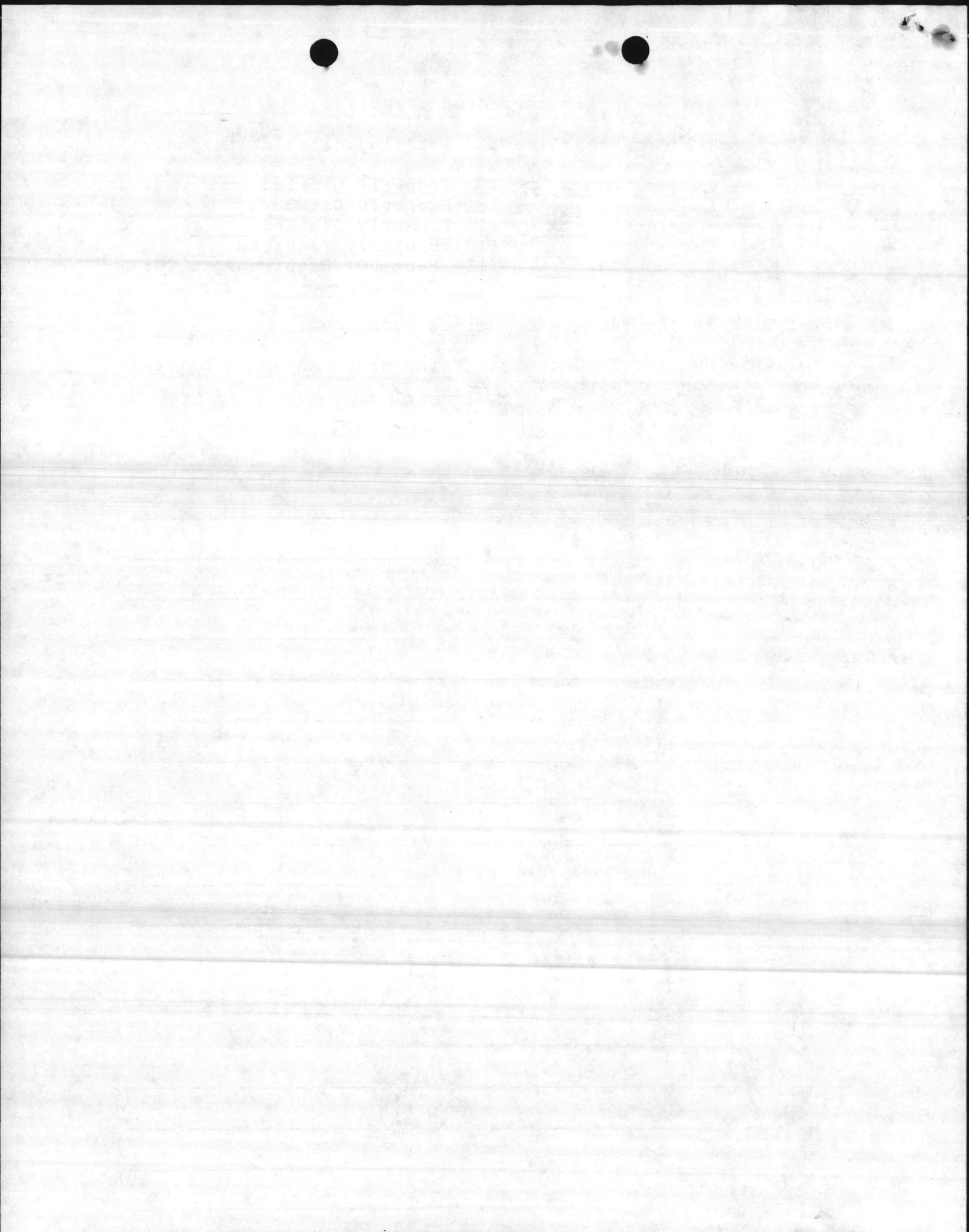
a. Date of last Fire Dept Inspection? _____

b. Are spills likely to reach soil or water? yes

c. Are HW protected from weather? partially

d. Are weekly HW inspections conducted properly? yes





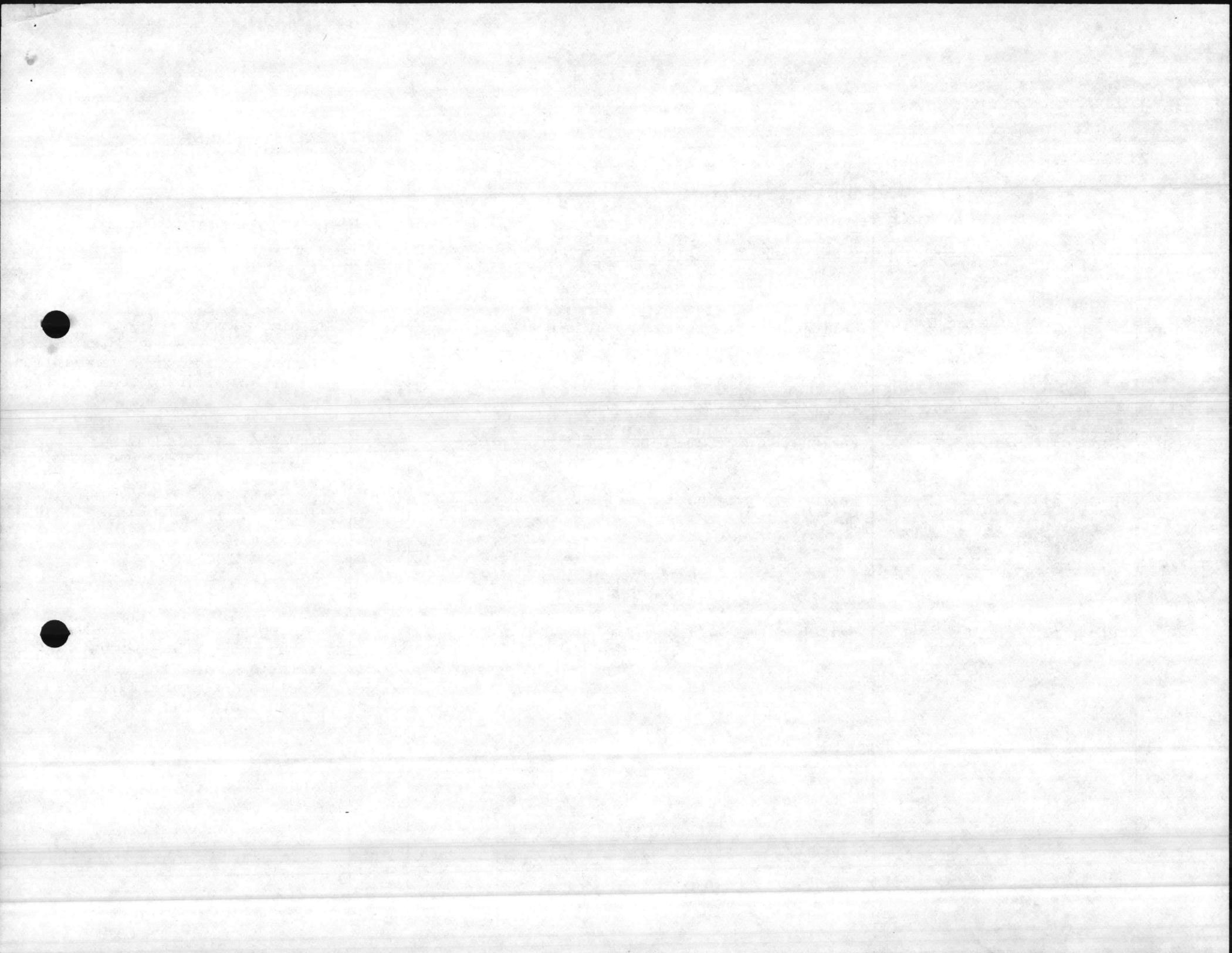
ORGANIZATION:

2d MARDIV
2d LAV BN

INSPECTION DATE: 9 December 1986

INSPECTOR'S NAME Sammy Gwynn

NO.	SPECIFIC LOCATION	DISCREPANCY	REF	RECOMMENDED CORRECTIVE ACTION
1.		<u>MAINTENANCE SHOP</u>		
a.	Bldg. #1755	Failure to establish and maintain training records for all personnel involved in hazardous waste	1	Training records shall be maintained for hazardous waste handlers & alternate to include a description of duties & training received for personnel at each site.
b.	Bldg. #1755	Failure to post emergency spill response information.	2	Purchase/fabricate and post emergency spill response signs.
c.	Bldg. #1755	Failure to post hazardous waste spill contingency plan.	3	Post spill contingency plan at all hazardous waste sites.
2.		<u>MOTOR TRANSPORT</u>		
a.	Bldg. #1750	Failure to establish and maintain training records for all personnel involved in hazardous waste management.	1	Training records shall be maintained for hazardous waste handlers & alternate to include description of duties & training received for personnel at each site.



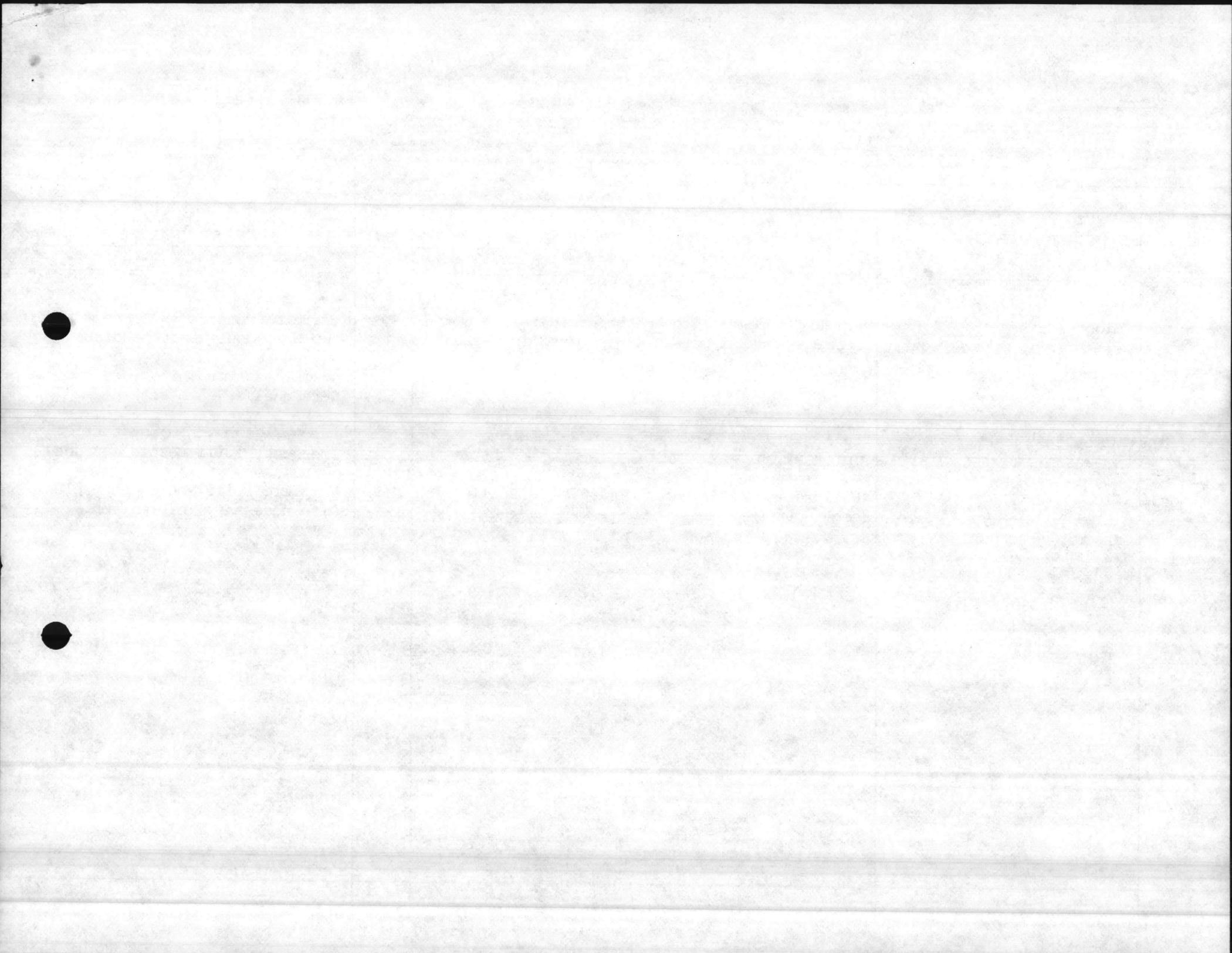
ORGANIZATION:

2d MARDIV
2d LAV BN

INSPECTION DATE: 9 December 1986

INSPECTOR'S NAME Sammy Gwynn

NO.	SPECIFIC LOCATION	DISCREPANCY	REF.	RECOMMENDED CORRECTIVE ACTION
3.		<u>COMMUNICATIONS SHOP</u>		
a.	Bldg. #429	Failure to establish and maintain training records for all personnel involved in hazardous waste management at each site.	1	Training records shall be maintained for hazardous waste handlers & alternate to include a description of duties & training received for personnel at each site.
b.	Bldg. #429	Failure to post emergency spill response information.	2	Purchase/fabricate and post emergency spill response signs.
c.	Bldg. #429	Failure to complete hazardous waste spill contingency plan	3	Complete spill contingency plan with necessary information.

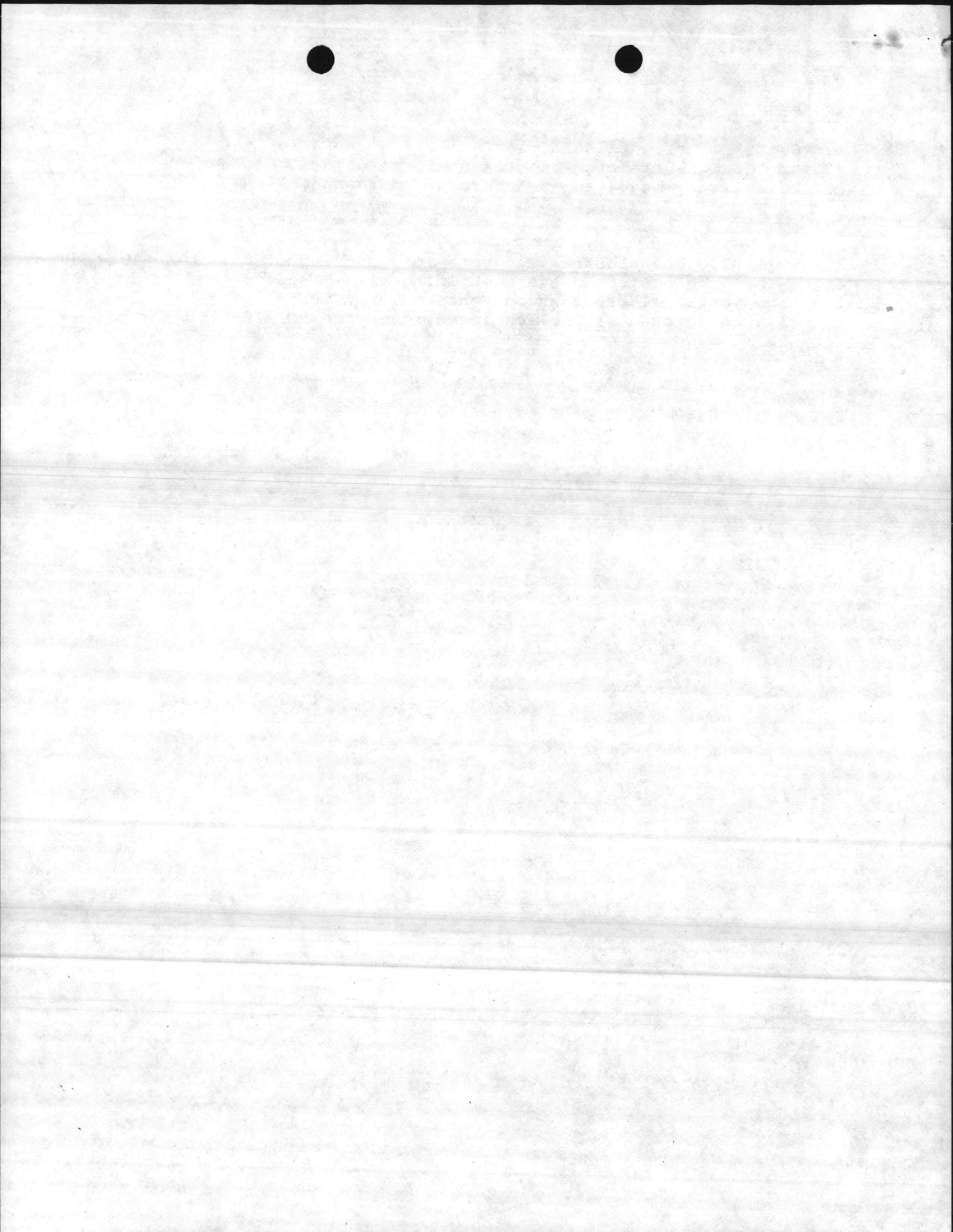


REFERENCES:

1. Section 1 of enclosure (1) CG ltr 6240 NREAD of 9 Sep 85
"Clear, concise training records shall be maintained on each person actively involved in Hazardous Waste Management."

2. BO 11090.1B enclosure (2), para 1c - posting of Oil Spill Procedures Signs shall be posted in every building, tank location and field service location where oil or hazardous materials are used. The sign shall have a yellow background with black lettering. See BO 11090.1B for proper wording of sign.

3. CG ltr 6240 NREAD of 10 Nov 86 provided by 6240 NREAD 20 Nov 86 requires the posting and development of sites specific hazardous waste spill responsibilities prevention and relative guidance.



2d MARDIV

AUTHORIZED HW GENERATION AND STORAGE SITES FOR 2d LAV BN

SITE NO. 1
GENERATION/ACCUMULATION

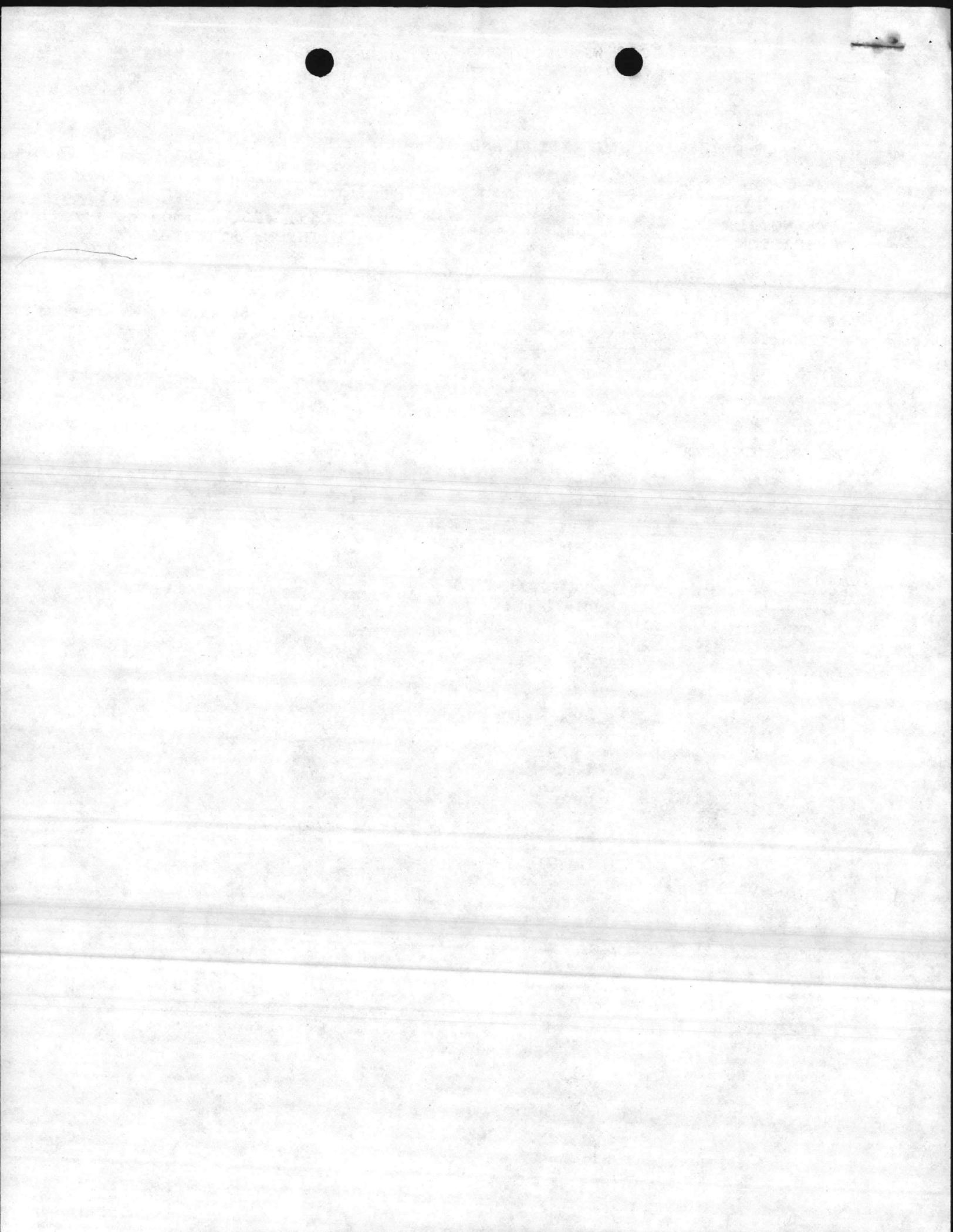
Bldg. 429, Communication Shop
LITHIUM BATTERIES

SITE. NO. 2
GENERATION/ACCUMULAITON

Bldg. 1750, Motor Transport
SOLVENTS, ELECTROLYTE & WASTE
OIL

SITE NO. 3
GENERATION/ACCUMULATION

Bldg. 1755, Maintenance Shop
SOLVENTS, ELECTROLYTE & WASTE
OIL



HAZARDOUS WASTE (HW) MANAGEMENT INSPECTION FORM

Date: 9 Dec 86

1. Facility being Inspected: Bldg 1755

2. Organization in Charge: 2d MARSH 201AV BW

3. Inspection Participants/Phone Number: St Longoria Phone No 1412, 3305
SSgt Zoufartain + [unclear]

4. Description of HW Streams: Solvents, Electrolyte, waste oil

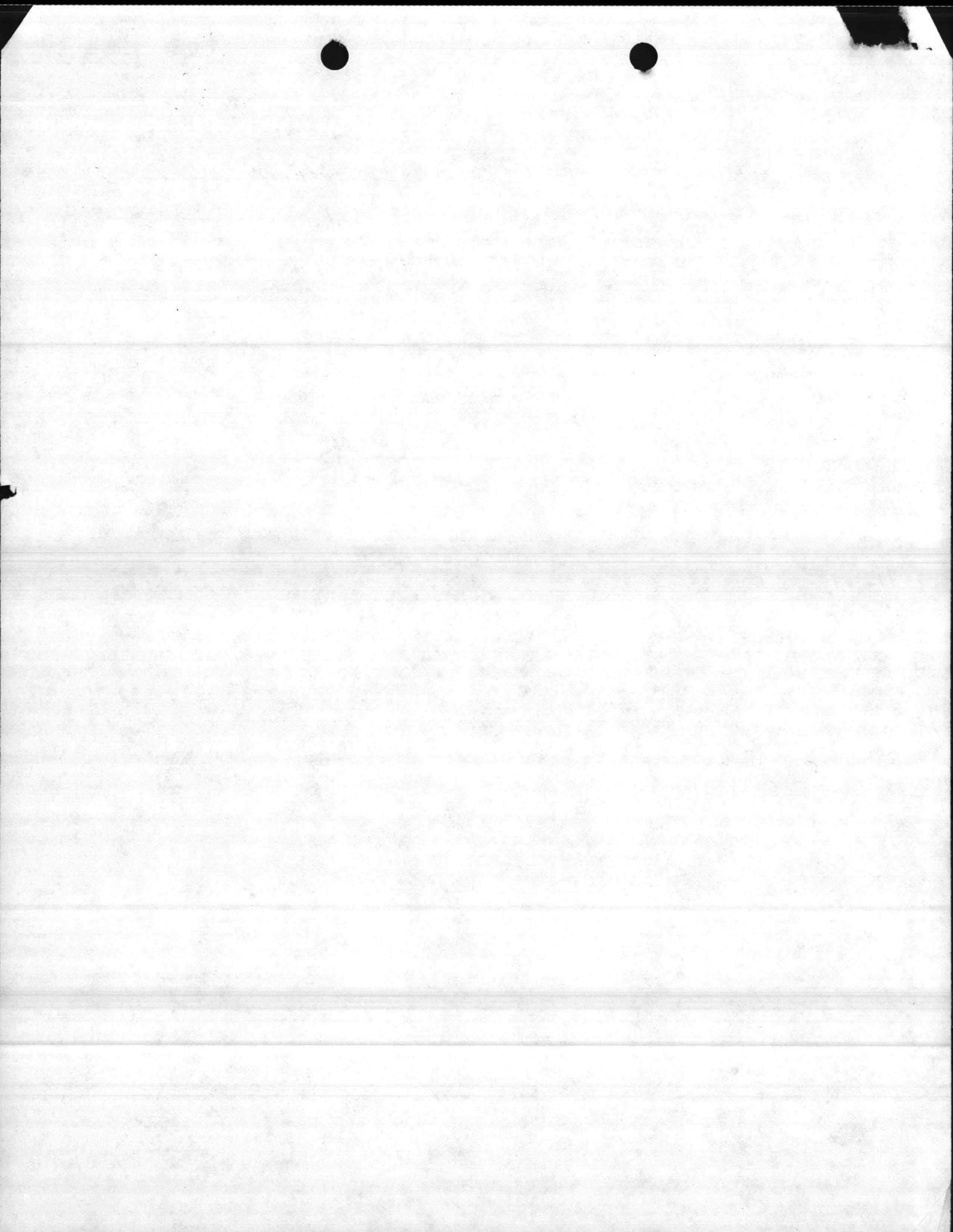
5. Are records of HW generation consistent with HW streams? NO

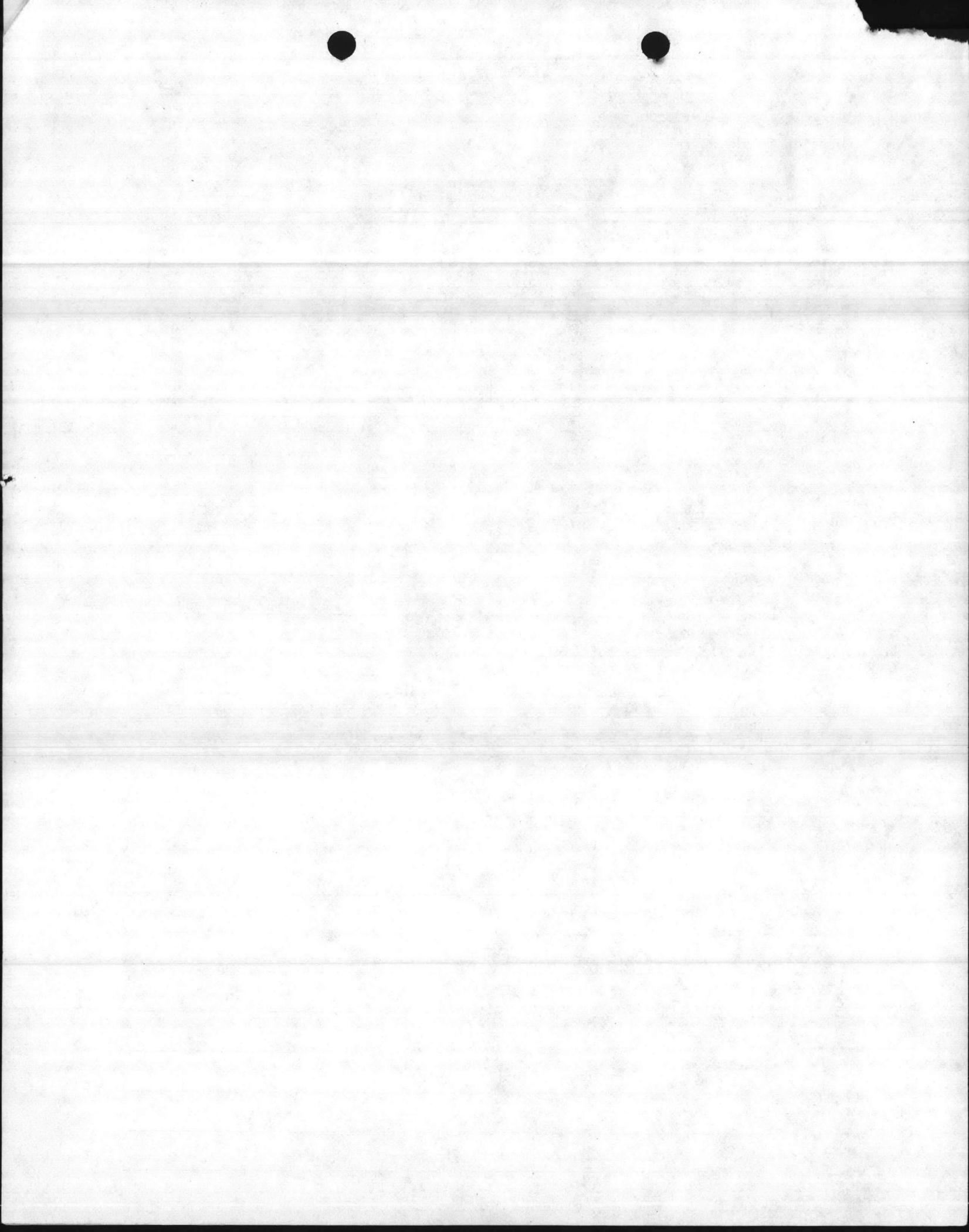
6. HW Training
- a. Are job descriptions available for all personnel actively involved in HW management? NO
 - b. Are training records adequate/current? NO
 - c. Are alternate personnel assigned to key positions? NO
 (If not, explain how unit deals with absence of key personnel)
 - d. Do contacted personnel demonstrate adequate knowledge of:

- (1) Regulatory Requirements NO
- (2) Applicable Base Orders NO
- (3) Types of HW Handled yes
- (4) Proper Containers yes
- (5) Proper Labeling yes
- (6) Weekly HW Inspections yes
- (7) HW Turn-in Procedures yes
- (8) Health and Safety yes
- (9) Spill Reporting Procedures yes
- (10) Spill Response Duties NO

7. Condition of Storage Facilities

- a. Date of last Fire Dept Inspection? _____
- b. Are spills likely to reach soil or water? yes
- c. Are HW protected from weather? NO
- d. Are weekly HW inspections conducted properly? yes





INSPECTION FORM FOR HAZARDOUS WASTE HANDLING AND STORAGE AREAS

Name of Facility: Bldg 1755 MOTOR TRANSPORT 20240 BN
 Name/Title OIC: JOE HONZALES = SSgt JAMES ANTON

AREA OF CONCERN <u>Bldg 1755</u>	YES	NO	CORRECTIVE ACTION NEEDED (use back of page to log action taken)
<p><u>A. CONDITION OF CONTAINERS</u></p> <p>1. Are containers closed</p> <p>2. Are containers leaking</p> <p>3. Are containers bulging</p> <p>4. Are containers collapsed</p> <p>5. Are containers corroded</p> <p>6. Are containers over-filled</p> <p>7. Other problems present</p>		<p><input checked="" type="checkbox"/></p> <p><input type="checkbox"/></p>	
<p><u>B. LABELING AND MARKING</u></p> <p>1. Are HW labels in place</p> <p>2. Are HW labels filled out</p> <p>3. Are hazards (i.e., flammable, corrosive, etc.) labels or markings adequate</p>	<p><input checked="" type="checkbox"/></p> <p><input checked="" type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>	<p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>	
<p><u>C. Are HWs being disposed of by deadlines</u></p>	<p><input checked="" type="checkbox"/></p> <p><input type="checkbox"/></p>	<p><input type="checkbox"/></p> <p><input type="checkbox"/></p>	
<p><u>D. SECURITY AND EMERGENCIES</u></p> <p>1. Is access limited to authorized personnel only</p> <p>2. Is emergency response information posted</p> <p>3. Supplies and equipment readily available</p>	<p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>	<p><input type="checkbox"/></p> <p><input checked="" type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>	

DATE: _____

SIGNATURE: _____

e. Corrective Action Recommended:

f. Sketch showing location of Facility:

~~BLDG~~
= 1755

NO TRNG RECORDS
NO EMERGENCY SIGN

~~1750~~
1755

NO CONTINGENCY PLAN

BLDG 1755 - MAINT 2D LAU MAINT

NO TRNG RECORDS

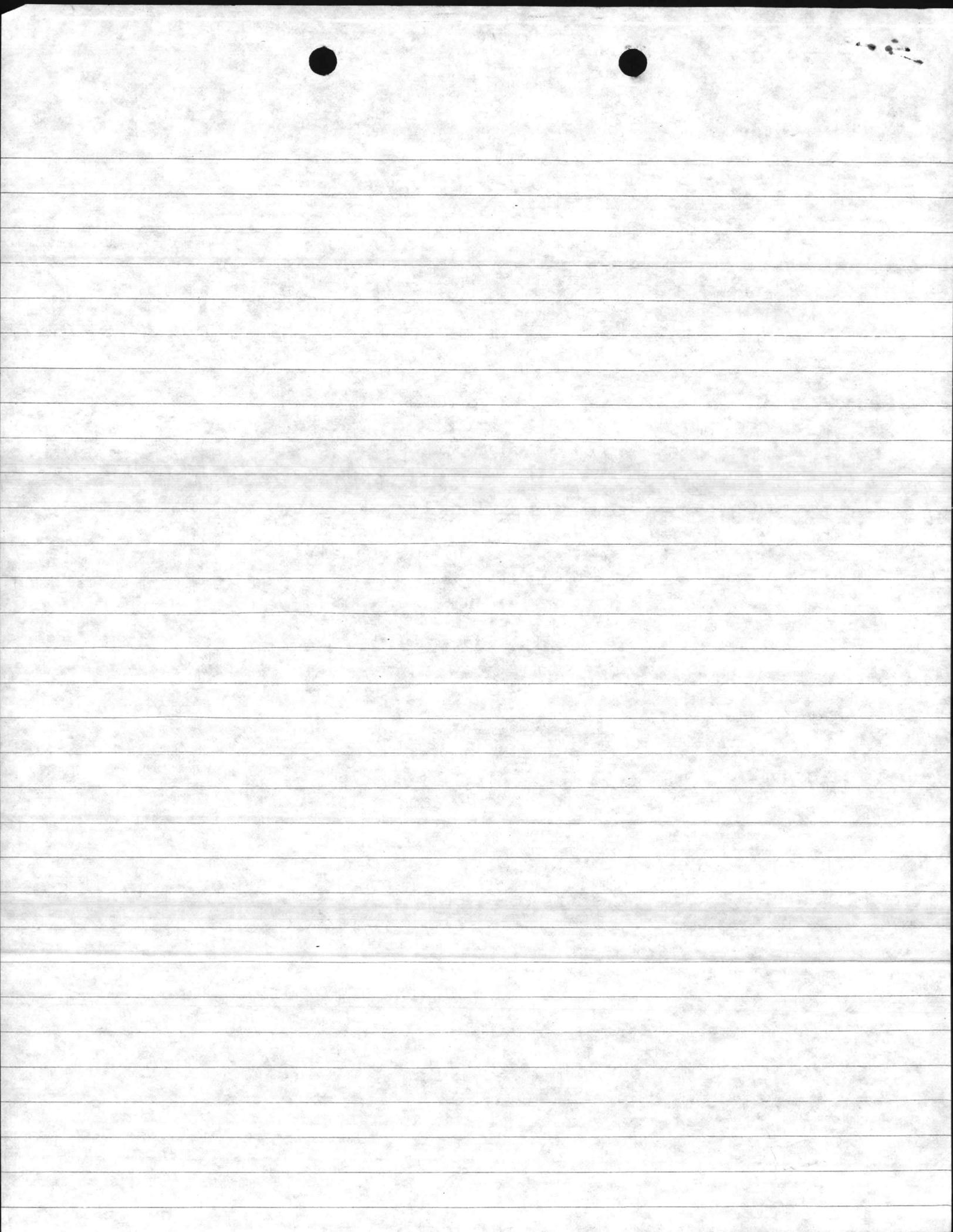
NO CONTINGENCY PLAN

BLDG 1750

- IN 2D LAU MTR TRANSPORT

NO TRNG RECORDS ✓✓

~~NO TRNG RECORDS~~



HAZARDOUS WASTE (HW) MANAGEMENT INSPECTION FORM

41346 - ^{0th. 20 Oct} Blk 429 - NO RESPONSE

Date: 9 Dec 86

1. Facility being Inspected: COM Bldg 429

2. Organization in Charge: 2d MARSIU

3. Inspection Participants/Phone Number: _____

LAD-1750

4. Description of HW Streams: _____

5. Are records of HW generation consistent with HW streams? yes

6. HW Training

a. Are job descriptions available for all personnel actively involved in HW management? NO

b. Are training records adequate/current? NO

c. Are alternate personnel assigned to key positions? NO
(If not, explain how unit deals with absence of key personnel)

d. Do contacted personnel demonstrate adequate knowledge of:

- (1) Regulatory Requirements NO
- (2) Applicable Base Orders yes
- (3) Types of HW Handled yes
- (4) Proper Containers yes
- (5) Proper Labeling yes
- (6) Weekly HW Inspections yes
- (7) HW Turn-in Procedures yes
- (8) Health and Safety _____
- (9) Spill Reporting Procedures yes
- (10) Spill Response Duties NO

CONTINGENCY PLAN
POSTED BUT NOT
FILLED OUT
NO TRNG RECORDS
ON HAND

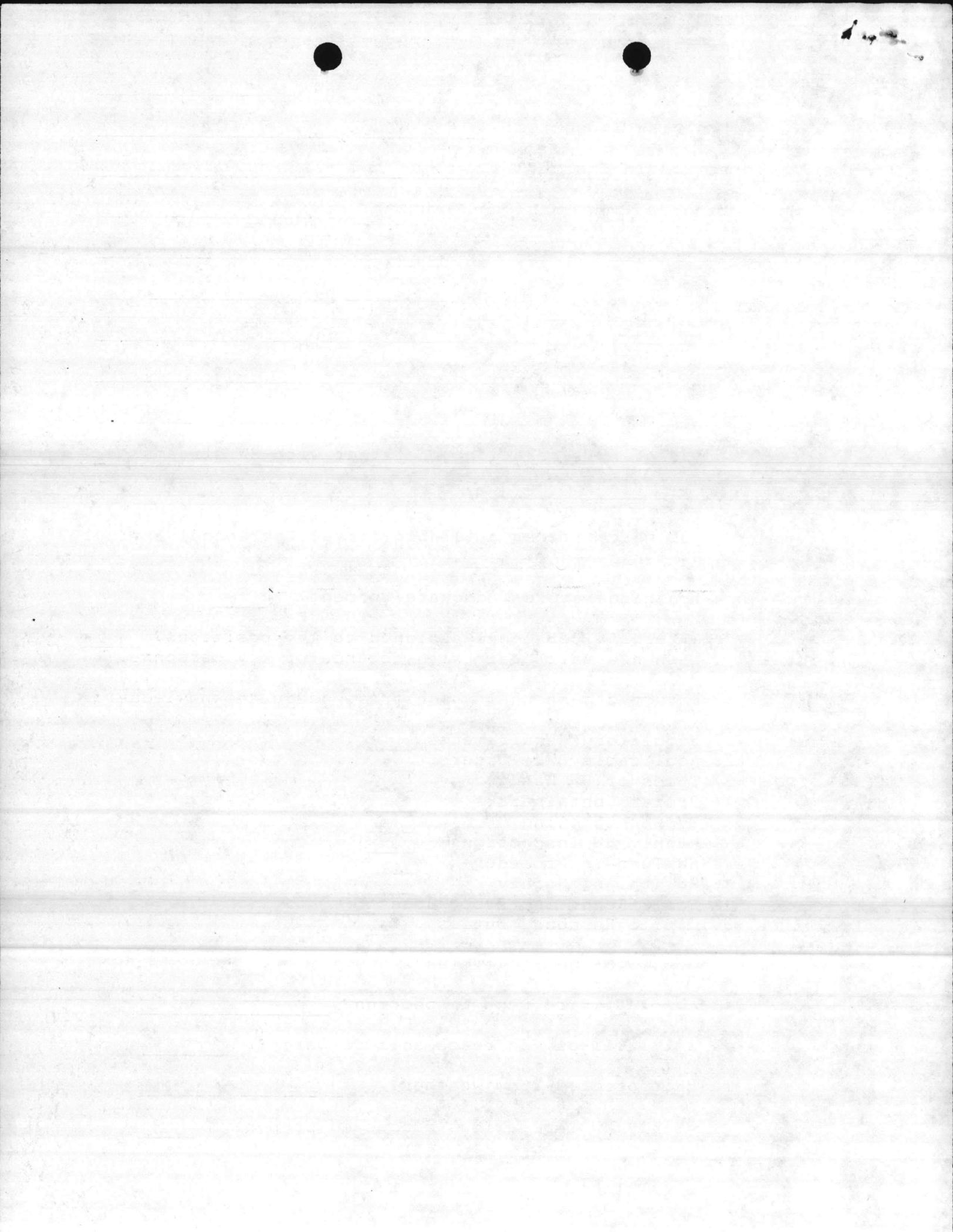
7. Condition of Storage Facilities

a. Date of last Fire Dept Inspection? 10-23-86

b. Are spills likely to reach soil or water? NO

c. Are HW protected from weather? yes

d. Are weekly HW inspections conducted properly? yes



11



MEMORANDUM
TO: [Illegible]
FROM: [Illegible]

[The remainder of the page contains extremely faint and illegible text, likely bleed-through from the reverse side of the document.]

INSPECTION FORM FOR HAZARDOUS WASTE HANDLING AND STORAGE AREAS

Name of Facility: COM Bldg 429
 Name/Title OIC: 1st Sgt Rogan, CPL BOCKISH

AREA OF CONCERN	CORRECTIVE ACTION NEEDED (use back of page to log action taken)	
	YES	NO
A. <u>CONDITION OF CONTAINERS</u> 1. Are containers closed 2. Are containers leaking 3. Are containers bulging 4. Are containers collapsed 5. Are containers corroded 6. Are containers over-filled 7. Other problems present		✓ ✓ ✓ ✓ ✓ ✓ ✓
B. <u>LABELING AND MARKING</u> 1. Are HW labels in place 2. Are HW labels filled out 3. Are hazards (i.e., flammable, corrosive, etc.) labels or markings adequate		✓ ✓ ✓
C. Are HWs being disposed of by deadlines	?	
D. <u>SECURITY AND EMERGENCIES</u> 1. Is access limited to authorized personnel only 2. Is emergency response information posted 3. Supplies and equipment readily available		✓

Lithium Batteries

DATE: 9 Dec 80

SIGNATURE: *Anthony J. Rogan*

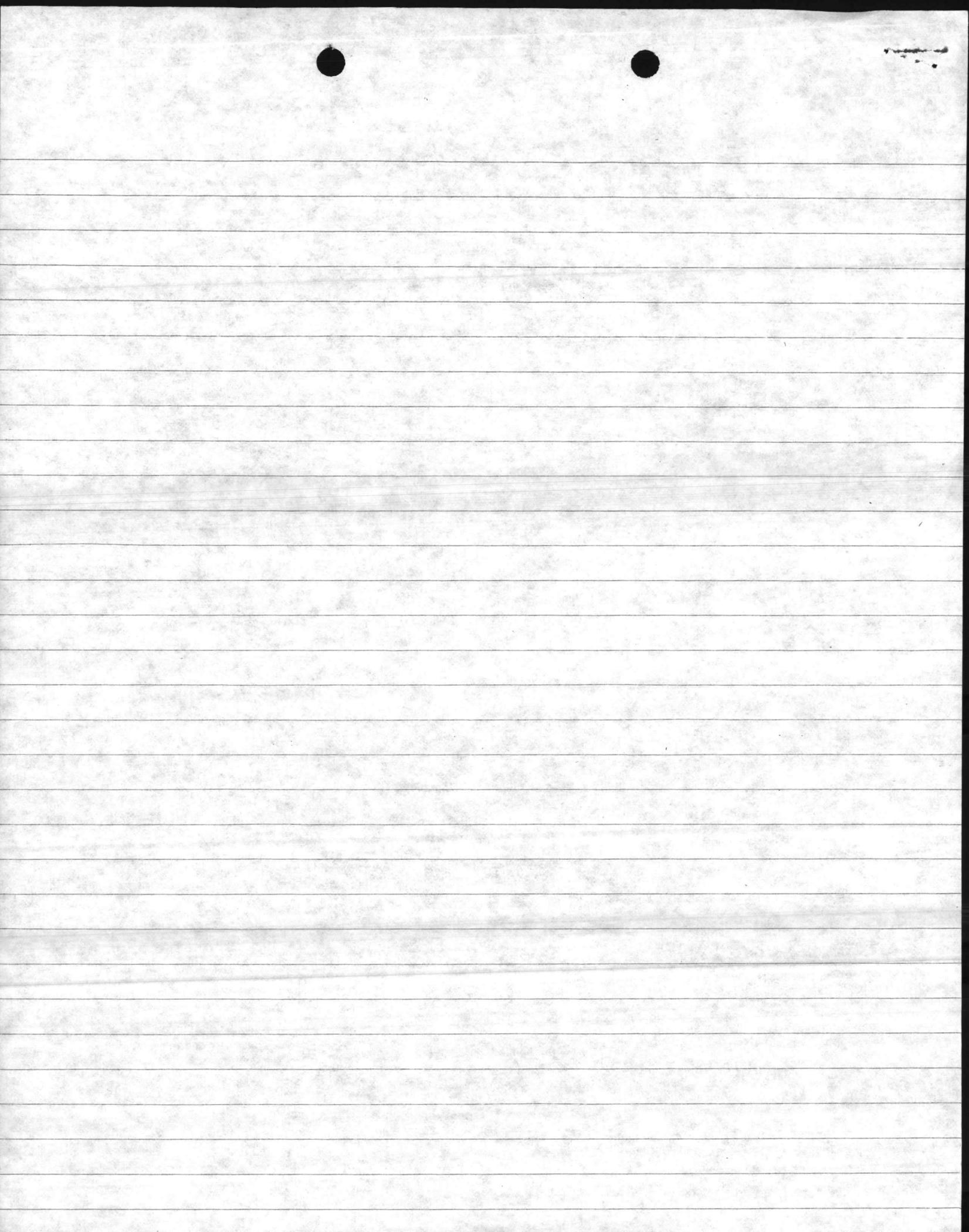
e. Corrective Action Recommended:

f. Sketch showing location of Facility:

Bldg 429 = NO TRNG RECORDS

= HAZARDOUS LABELS NOT IN PLACE ON BATTERIES
TO BE TURNED IN

= EMERGENCY PLAN NOT POSTED



HAZARDOUS WASTE MANAGEMENT INSPECTION

1. Organization Inspected: 2nd LAV Bn, 2nd MAR. DIV.

2. Name and title of persons conducting inspection:

a. NREAD Representative: BECKER

b. Organizational Commander Representative: Lt. SMITH

c. Other (Specify) : MSGT KAUP

Cpl COLEMAN

MSGT WRIGHT, AC LCPL WHISMANT (BATT NCO)
(RADIO CHIEF)

3. Brief Description of HW Activity: GENERATION OF WASTE SOLVENT

at LAV MAINT. GENERATION OF WASTE LITHIUM BATT.

4. Summary of Findings (See Attachment A- B)

a. Assignment of HW management responsibilities and related personnel training and record keeping: Assignment of HW Mgt Responsibilities

HAS BEEN DONE. RECORD KEEPING NEEDS UPGRADING IN COMM. PIT.

Lt. Smith NEEDS TRAINING RECORD FOR HIMSELF

b. Adequacy of HW handling, storage and related internal controls and inspection: GOOD on all accounts

INSPECTION REPORT FOR HAZARDOUS WASTE HANDLING AND STORAGE AREAS

Name of Facility: LAV MAINT.

Name/Title OIC: LT SMITH

AREA OF CONCERN	YES	NO	CORRECTIVE ACTION NEEDED (use back of page to list action taken)
<p><u>A. CONDITION OF CONTAINERS</u></p> <p>1. Are containers closed</p> <p>2. Are containers leaking</p> <p>3. Are containers bulging</p> <p>4. Are containers collapsed</p> <p>5. Are containers corroded</p> <p>6. Are containers over-filled</p> <p>7. Other problems present</p>	<p>✓</p>	<p>✓</p> <p>✓</p> <p>✓</p> <p>✓</p> <p>✓</p> <p>✓</p>	
<p><u>B. LABELING AND MARKING</u></p> <p>1. Are HW labels in place</p> <p>2. Are HW labels filled out</p> <p>3. Are hazards (i.e., flammable, corrosive, etc.) labels or markings adequate</p>	<p>✓</p> <p>✓</p> <p>✓</p>		<p>1. ADD "FLAMMABLE" TO HW DRAIN</p>
<p><u>C. Are HWs being disposed of by deadlines</u></p>	<p>✓</p>		<p>2. HAVE NOT YET DISPOSED OF ALL AT THIS TIME</p>
<p><u>D. SECURITY AND EMERGENCIES</u></p> <p>1. Is access limited to authorized personnel only</p> <p>2. Is emergency response information posted</p> <p>3. Supplies and equipment readily available</p>	<p>✓</p> <p>✓</p> <p>✓</p>		

DATE: 6 FEB 86

SIGNATURE: Walter B. Smith



e. Corrective Action Recommended:

1. ADD WORD "FLAMMABLE" TO HW DRUM
2. Fill out TENG. RECORD on Lt. Smith + HIS ALTERNATE

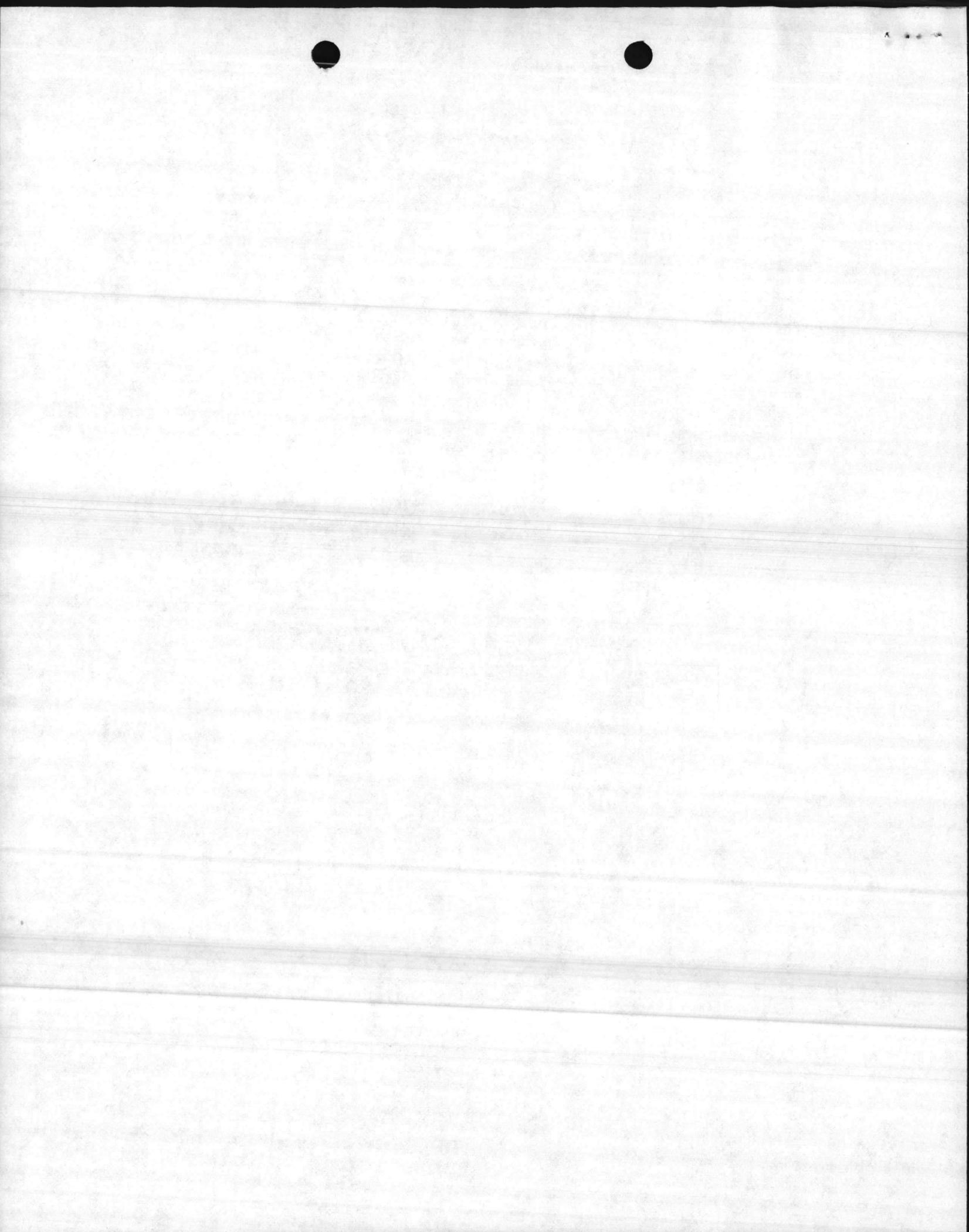
f. Sketch showing location of Facility:

TEULK
CO.



STORAGE
LOCATION





INSPECTION REPORT FOR HAZARDOUS WASTE HANDLING AND STORAGE AREAS

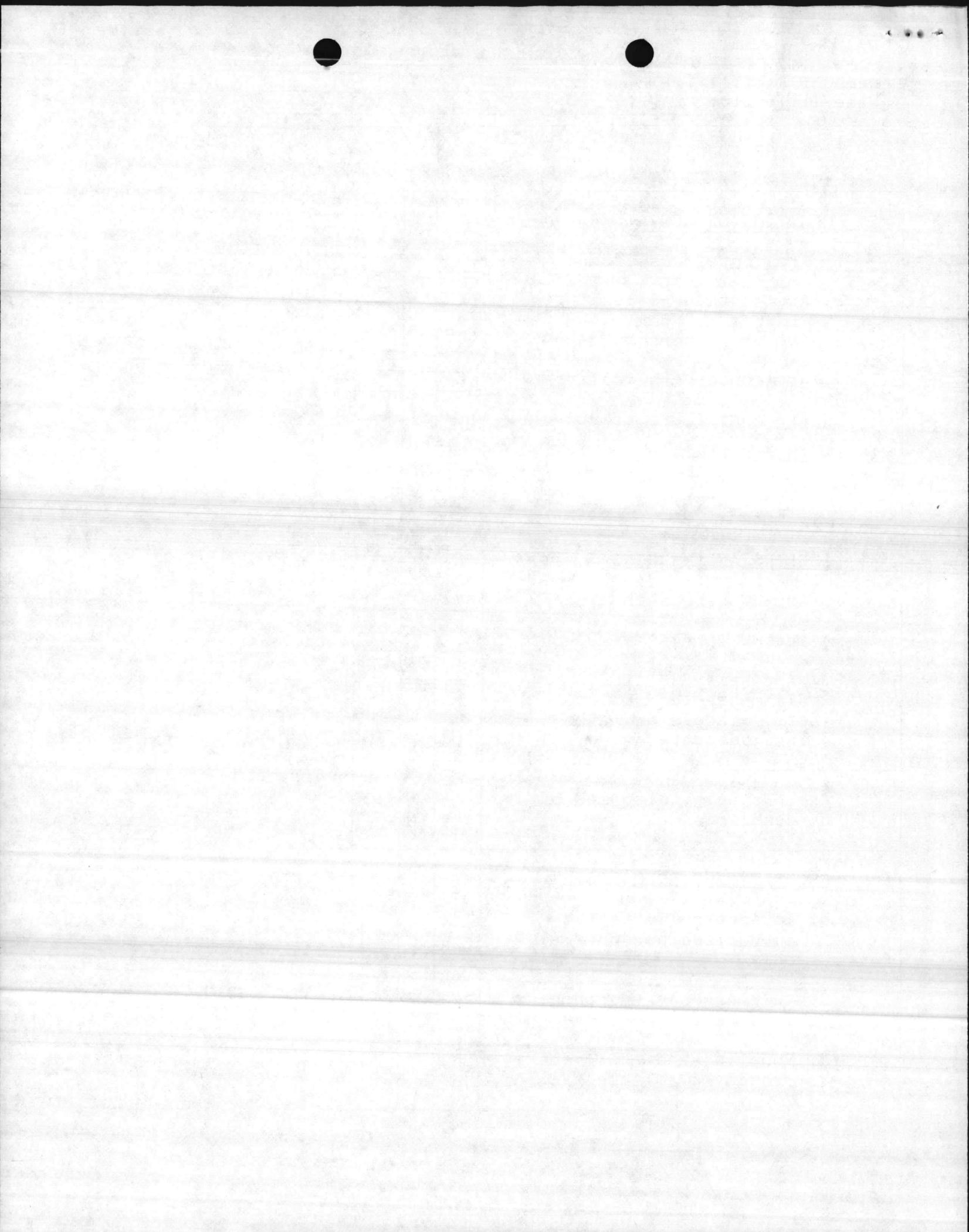
Name of Facility: Comm / ELBCT Co-PLT.

Name/Title OIC: Lt. Quinn COMM OFFICER

AREA OF CONCERN	YES	NO	CORRECTIVE ACTION NEEDED (use back of page to list action taken)
<u>A. CONDITION OF CONTAINERS</u>			
1. Are containers closed	<input checked="" type="checkbox"/>		
2. Are containers leaking	<input checked="" type="checkbox"/>		
3. Are containers bulging	<input checked="" type="checkbox"/>		
4. Are containers collapsed	<input checked="" type="checkbox"/>		
5. Are containers corroded		<input checked="" type="checkbox"/>	
6. Are containers over-filled			
7. Other problems present		<input checked="" type="checkbox"/>	
<u>B. LABELING AND MARKING</u>			
1. Are HW labels in place	<input checked="" type="checkbox"/>		
2. Are HW labels filled out	<input checked="" type="checkbox"/>		
3. Are hazards (i.e., flammable, corrosive, etc.) labels or markings adequate	<input checked="" type="checkbox"/>		
<u>C. Are HWs being disposed of by deadlines</u>	<input checked="" type="checkbox"/>		1. NO SAHS. READY FOR DISPOSAL AT THIS TIME 2. HAVE GOOD TURN IN RECORDS + INVENTORY
<u>D. SECURITY AND EMERGENCIES</u>			
1. Is access limited to authorized personnel only	<input checked="" type="checkbox"/>		
2. Is emergency response information posted		<input checked="" type="checkbox"/>	
3. Supplies and equipment readily available	N/A	N/A	

DATE: 6 FEB 86

SIGNATURE: Philip C. List SSGT



e. Corrective Action Recommended:

1. Post Sign on Door for Emergency Response
2. TRNG RECORDS NEED TO BE MAINTAINED
3. INSPECTION RECORDS NEED TO BE MAINTAINED

f. Sketch showing location of Facility:

