

952072

PRELIMINARY INVESTIGATION OF THE
FLINTKOTE SITE
CITY OF LOCKPORT, NIAGARA COUNTY, NEW YORK

PHASE I. SUMMARY REPORT

ECOLOGICAL ANALYSTS, INC.

PRELIMINARY INVESTIGATION OF THE
FLINTKOTE SITE
CITY OF LOCKPORT, NIAGARA COUNTY, NEW YORK

PHASE I. SUMMARY REPORT

Prepared for

New York State Department of Environmental Conservation
50 Wolf Road
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Prepared by

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December 1983

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EXECUTIVE SUMMARY

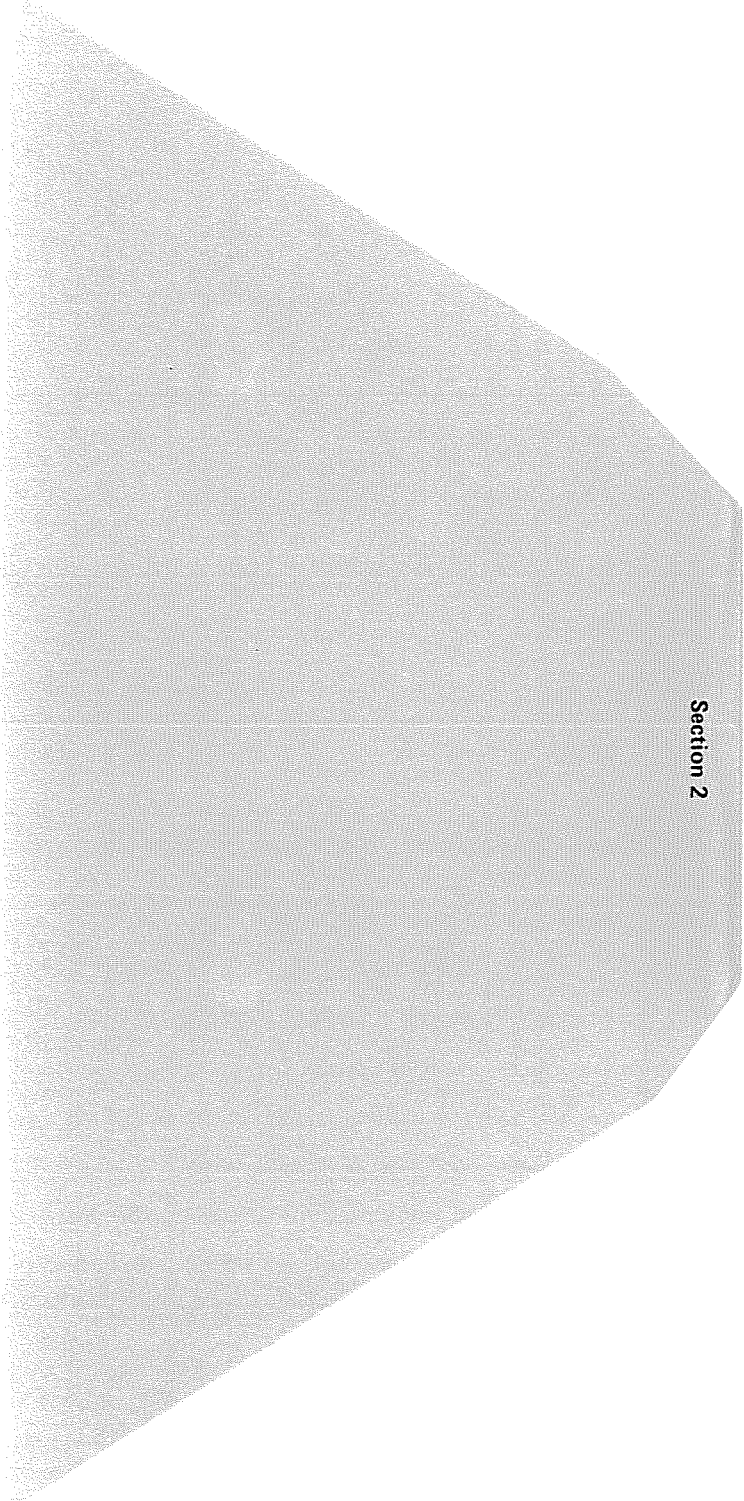
The former Flintkote site (New York ID No. 932072, EPA No. NYD 039107107) is a building located on Mill Street in Lockport, Niagara County, New York. The building, which is owned by Thomas Carter Trucking, Lockport, N.Y., is presently a machine shop, the basement of which houses seven drums of waste oil. The drums are stored in accordance with federal regulations, for the storage of PCBs. Recent analyses (March 1983) of the waste oil from each of the drums indicate PCB concentrations below the detection limit of 2.0 ppm.

The preliminary HRS scores for the site are as follows: Migration Score (S_M) = 0; Direct Contact Score (S_{DC}) = 0. The available data are adequate to prepare a final HRS. On the basis of the available data, no additional investigation of the Flintkote site is necessary under Phase II of this program.

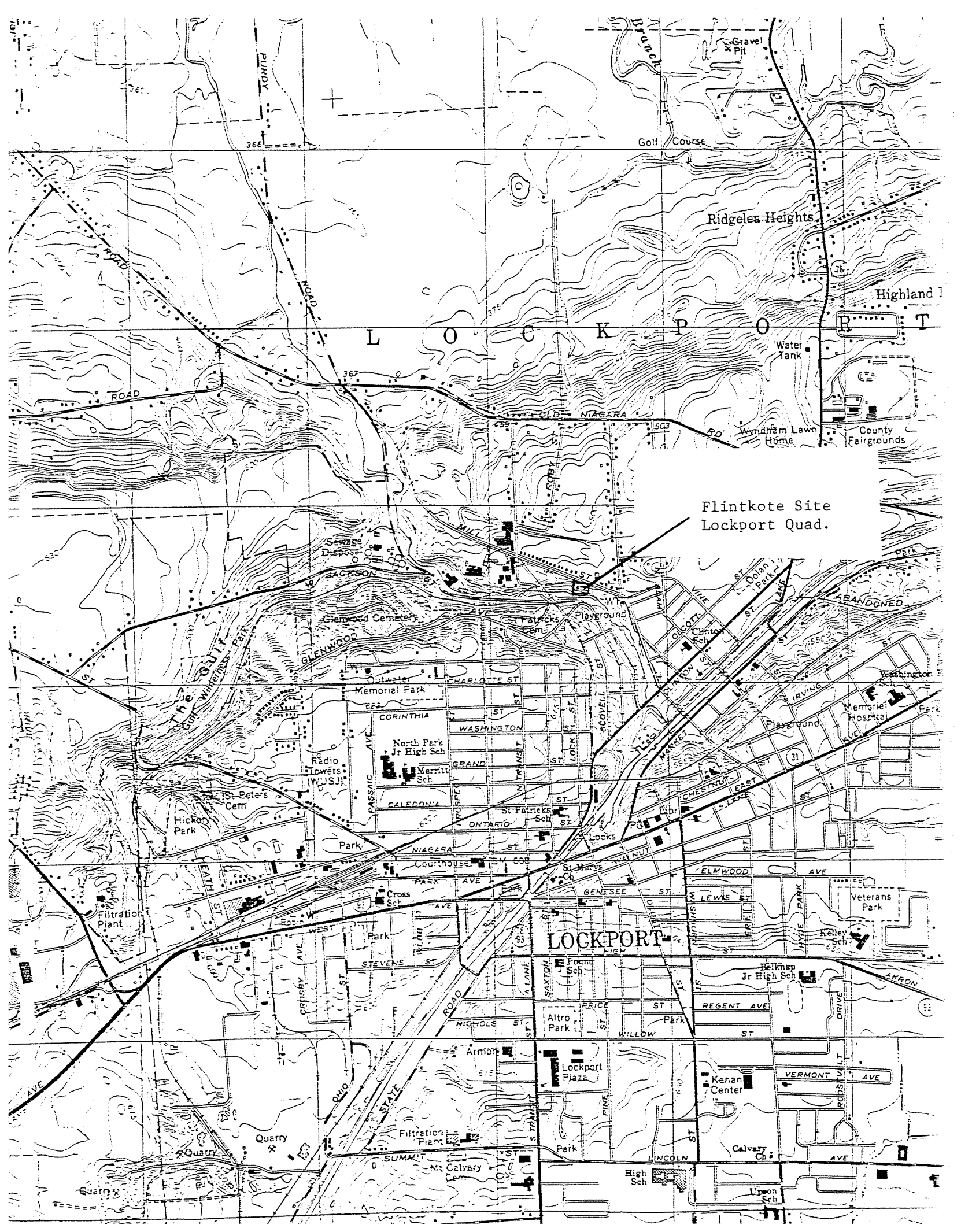
Section 1

FLINTKOTE SITE

The former Flintkote site (New York ID No. 932072, EPA No. NYD 039107107) is a building located on Mill Street in Lockport, Niagara County, New York. The building, which is owned by Thomas Carter Trucking, Lockport, N.Y., is presently a machine shop, the basement of which houses seven drums of waste oil. The drums are stored in accordance with federal regulations, for the storage of PCBs. Recent analyses (March 1983) of the waste oil from each of the drums indicate PCB concentrations below the detection limit of 2.0 ppm.



Section 2



Flintkote Site
Lockport Quad.

Federal Register

Friday
July 16, 1982

Flintkote

Part V

Environmental Protection Agency

National Oil and Hazardous Substances
Contingency Plan

Facility name: Flintkote Property
 Location: Lockport N.Y.
 EPA Region: II
 Person(s) in charge of the facility: Thomas Carter Truckman
Lockport N.Y.
 Name of Reviewer: Ecological Analysts Date: 6 June 1983
 General description of the facility:
 (For example: landfill, surface impoundment, pile, container; types of hazardous substances; location of the facility; contamination route of major concern; types of information needed for rating; agency action, etc.)
Locked Basement containing
7 drums of transformer oil
 Scores: $S_M = 0$ ($S_{gw} = 0$ $S_{sw} = 0$ $S_a = 0$)
 $S_{FE} = 0$
 $S_{DC} = 0$

FIGURE 1
 HRS COVER SHEET

Ground Water Route Work Sheet						
Rating Factor	Assigned Value (Circle One)	Multi-plier	Score	Max. Score	Ref. (Section)	
1 Observed Release	(0) 45	1	0	45	3.1	
If observed release is given a score of 45, proceed to line 4 . If observed release is given a score of 0, proceed to line 2 .						
2 Route Characteristics					3.2	
Depth to Aquifer of Concern	(0) 1 2 3	2	0	6		
Net Precipitation	0 1 (2) 3	1	2	3		
Permeability of the Unsaturated Zone	(0) 1 2 3	1	0	3		
Physical State	0 1 2 (3)	1	3	3		
Total Route Characteristics Score			5	15		
3 Containment	(0) 1 2 3	1	0	3	3.3	
4 Waste Characteristics					3.4	
Toxicity/Persistence	0 3 6 9 12 15 (18)	1	18	18		
Hazardous Waste Quantity	0 (1) 2 3 4 5 6 7 8	1	1	8		
Total Waste Characteristics Score			19	26		
5 Targets					3.5	
Ground Water Use	(0) 1 2 3	3	0	9		
Distance to Nearest Well/Population Served	(0) 4 6 8 10 12 16 18 20 24 30 32 35 40	1	0	40		
Total Targets Score			0	49		
6 If line 1 is 45, multiply 1 x 4 x 5						
If line 1 is 0, multiply 2 x 3 x 4 x 5			0	57,330		
7 Divide line 6 by 57,330 and multiply by 100			S _{gw} = 0			

**FIGURE 2
GROUND WATER ROUTE WORK SHEET**

Surface Water Route Work Sheet						
Rating Factor	Assigned Value (Circle One)	Multi-plier	Score	Max. Score	Ref. (Section)	
1 Observed Release	0 45	1	0	45	4.1	
If observed release is given a value of 45, proceed to line 4 . If observed release is given a value of 0, proceed to line 2 .						
2 Route Characteristics					4.2	
Facility Slope and Intervening Terrain	0 1 2 3	1	3	3		
1-yr. 24-hr. Rainfall	0 1 2 3	1	1	3		
Distance to Nearest Surface Water	0 1 2 3	2	6	6		
Physical State	0 1 2 3	1	3	3		
Total Route Characteristics Score			13	15		
3 Containment	0 1 2 3	1	0	3	4.3	
4 Waste Characteristics					4.4	
Toxicity/Persistence	0 3 6 9 12 15 18	1	18	18		
Hazardous Waste Quantity	0 1 2 3 4 5 6 7 8	1	1	8		
Total Waste Characteristics Score			19	26		
5 Targets					4.5	
Surface Water Use	0 1 2 3	3	0	9		
Distance to a Sensitive Environment	0 1 2 3	2	0	6		
Population Served/Distance to Water Intake Downstream	0 4 6 8 10 12 16 18 20 24 30 32 35 40	1	0	40		
Total Targets Score			0	55		
6 If line 1 is 45, multiply 1 x 4 x 5 If line 1 is 0, multiply 2 x 3 x 4 x 5			0	64,350		
7 Divide line 6 by 64,350 and multiply by 100			S _{sw} = 0			

**FIGURE 7
SURFACE WATER ROUTE WORK SHEET**

Air Route Work Sheet						
Rating Factor	Assigned Value (Circle One)	Multi-plier	Score	Max. Score	Ref. (Section)	
1 Observed Release	0 45	1	0	45	5.1	
Date and Location:						
Sampling Protocol:						
If line 1 is 0, the $S_a = 0$. Enter on line 5						
If line 1 is 45, then proceed to line 2						
2 Waste Characteristics					5.2	
Reactivity and Incompatibility	0 1 2 3	1		3		
Toxicity	0 1 2 3	3		9		
Hazardous Waste Quantity	0 1 2 3 4 5 6 7 8	1		8		
Total Waste Characteristics Score				20		
3 Targets					5.3	
Population Within 4-Mile Radius	0 9 12 15 18 21 24 27 30	1		30		
Distance to Sensitive Environment	0 1 2 3	2		6		
Land Use	0 1 2 3	1		3		
Total Targets Score				39		
4 Multiply 1 x 2 x 3				35,100		
5 Divide line 4 by 35,100 and multiply by 100					$S_a = 0$	

**FIGURE 9
AIR ROUTE WORK SHEET**

four-mile radius as well as transients such as workers in factories, offices, restaurants, motels, or students. It excludes travelers passing through the area. If aerial photography is used in making the count, assume 3.8 individuals per dwelling unit. Select the highest value for this rating factor as follows:

DISTANCE TO POPULATION FROM HAZARDOUS SUBSTANCE

Population	0-1/4 mile	1/4-1/2 mile	1/2-3/4 mile	3/4-1 mile
0	0	0	0	0
1 to 100	9	12	15	18
101 to 1,000	12	15	18	21
1,001 to 3,000	15	18	21	24
3,001 to 10,000	18	21	24	27
More than 10,000	21	24	27	30

Distance to sensitive environment is an indicator of the likelihood that a region that contains important biological resources or that is a fragile natural setting would suffer serious damage if hazardous substances were to be released from the facility. Assign a value from Table 10.

Land use indicates the nature and level of human activity in the vicinity of a facility. Assign highest applicable value from Table 13.

6.0 Computing the Migration Hazard Mode Score, S_M

To compute S_M , complete the work sheet (Figure 10) using the values of S_{gw} , S_{sw} and S_a obtained from the previous sections.

7.0 Fire and Explosion

Compute a score for the fire and explosion hazard mode, S_{FE} , when either a state or local fire marshal has certified that the facility presents a significant fire or explosion threat to the public or to sensitive environments or there is a demonstrated fire and explosion threat based on field observations (e.g., combustible gas indicator readings). Document the threat.

7.1 Containment. Containment is an indicator of the measures that have been taken to minimize or prevent hazardous substances at the facility from catching fire or exploding. Normally it will be given a value of 3 on the work sheet (Figure 11). If no hazardous substances that are individually ignitable or explosive are present and those that may be hazardous in combination are segregated and isolated so that they cannot come together to form incompatible mixtures, assign this factor a value of 1.

7.2 Waste Characteristics. Direct evidence of ignitability or explosion potential may exist in the form of measurements with appropriate instruments. If so, assign this factor a value of 3; if not, assign a value of 0.

TABLE 13.—VALUES FOR LAND USE (AIR ROUTE)

Assigned value =	0	1	2	3
Distance to Commercial-Industrial	> 1 mile	1/2 to 1 mile	1/4 to 1/2 mile	< 1/4 mile
Distance to National/State Parks, Forests, Wildlife Reserves, and Residential Areas	> 2 miles	1 to 2 miles	1/2 to 1 mile	< 1/2 mile
Distance to Agricultural Lands (in Production within 5 years):				
Ag land	> 1 mile	1/2 to 1 mile	1/4 to 1/2 mile	< 1/4 mile
Prime Ag Land ¹	> 2 miles	1 to 2 miles	1/2 to 1 mile	< 1/2 mile
Distance to Historic/Landmark Sites (National Register of Historic Places and National Natural Landmarks)				Within view of site or if site is subject to significant impacts.

¹ Defined in the Code of Federal Regulations, 7 CFR 657.5, 1981.

	S	S ²
Groundwater Route Score (S_{gw})	0	0
Surface Water Route Score (S_{sw})	0	0
Air Route Score (S_a)	0	0
$S_{gw}^2 + S_{sw}^2 + S_a^2$		0
$\sqrt{S_{gw}^2 + S_{sw}^2 + S_a^2}$		0
$\sqrt{S_{gw}^2 + S_{sw}^2 + S_a^2} / 1.73 = S_M =$		0

FIGURE 10
WORKSHEET FOR COMPUTING S_M

Direct Contact Work Sheet						
Rating Factor	Assigned Value (Circle One)	Multi-plier	Score	Max. Score	Ref. (Section)	
<input type="checkbox"/> 1 Observed Incident	<input checked="" type="radio"/> 0 45	1	<input type="radio"/>	45	8.1	
If line <input type="checkbox"/> 1 is 45, proceed to line <input type="checkbox"/> 4 If line <input type="checkbox"/> 1 is 0, proceed to line <input type="checkbox"/> 2						
<input type="checkbox"/> 2 Accessibility	<input checked="" type="radio"/> 0 1 2 3	1	<input type="radio"/>	3	8.2	
<input type="checkbox"/> 3 Containment	<input checked="" type="radio"/> 0 15	1	<input type="radio"/>	15	8.3	
<input type="checkbox"/> 4 Waste Characteristics Toxicity	0 1 2 3	5		15	8.4	
<input type="checkbox"/> 5 Targets					8.5	
Population Within a 1-Mile Radius	0 1 2 3 4 5	4		20		
Distance to a Critical Habitat	0 1 2 3	4		12		
Total Targets Score				32		
<input type="checkbox"/> 6 If line <input type="checkbox"/> 1 is 45, multiply <input type="checkbox"/> 1 x <input type="checkbox"/> 4 x <input type="checkbox"/> 5				21,600		
If line <input type="checkbox"/> 1 is 0, multiply <input type="checkbox"/> 2 x <input type="checkbox"/> 3 x <input type="checkbox"/> 4 x <input type="checkbox"/> 5			<input type="radio"/>			
<input type="checkbox"/> 7 Divide line <input type="checkbox"/> 6 by 21,600 and multiply by 100			SDC = <input type="radio"/>			

**FIGURE 12
DIRECT CONTACT WORK SHEET**

Section 4

June 28, 1982

DOCUMENTATION RECORDS
FOR
HAZARD RANKING SYSTEM

INSTRUCTIONS: The purpose of these records is to provide a convenient way to prepare an auditable record of the data and documentation used to apply the Hazard Ranking System to a given facility. As briefly as possible summarize the information you used to assign the score for each factor (e.g., "Waste quantity = 4,230 drums plus 800 cubic yards of sludges"). The source of information should be provided for each entry and should be a bibliographic-type reference that will make the document used for a given data point easier to find. Include the location of the document and consider appending a copy of the relevant page(s) for ease in review.

FACILITY NAME:

Flint Kote

LOCATION:

Lockport, N.Y.

GROUND WATER ROUTE

1 OBSERVED RELEASE

Contaminants detected (5 maximum):

None

Observed

No data

Rationale for attributing the contaminants to the facility:

* * *

2 ROUTE CHARACTERISTICS

Depth to Aquifer of Concern

Name/description of aquifer(s) of concern:

unknown

Depth(s) from the ground surface to the highest seasonal level of the saturated zone [water table(s)] of the aquifer of concern:

unknown

Depth from the ground surface to the lowest point of waste disposal/storage:

not applicable

Net Precipitation

Mean annual or seasonal precipitation (list months for seasonal):

35"

Mean annual lake or seasonal evaporation (list months for seasonal):

26"

Net precipitation (subtract the above figures):

9"

Permeability of Unsaturated Zone

Soil type in unsaturated zone:

unknown

Permeability associated with soil type:

unknown

Physical State

Physical state of substances at time of disposal (or at present time for generated gases):

liquid & solid (Attachment 6-1)

* * *

3 CONTAINMENT

Containment

Method(s) of waste or leachate containment evaluated:

containers

Method with highest score:

containers adequate

4 WASTE CHARACTERISTICS

Toxicity and Persistence

Compound(s) evaluated:

PCB

(Attachment 6-1, 6-2)

Compound with highest score:

PCB

Hazardous Waste Quantity

Total quantity of hazardous substances at the facility, excluding those with a containment score of 0 (Give a reasonable estimate even if quantity is above maximum):

*< Seven drums of material, however
containment is adequate*

Basis of estimating and/or computing waste quantity:

(Attachment 6-1)

* * *

5 TARGETS

Ground Water Use

Use(s) of aquifer(s) of concern within a 3-mile radius of the facility:

Not used, surrounding areas on public water supplies (N.Y.S. DOH Atlas of Community Water Supply Sources, 1982)

Distance to Nearest Well

Location of nearest well drawing from aquifer of concern or occupied building not served by a public water supply:

Distance to above well or building:

Population Served by Ground Water Wells Within a 3-Mile Radius

Identified water-supply well(s) drawing from aquifer(s) of concern within a 3-mile radius and populations served by each:

None

Computation of land area irrigated by supply well(s) drawing from aquifer(s) of concern within a 3-mile radius, and conversion to population (1.5 people per acre):

Total population served by ground water within a 3-mile radius:

None

SURFACE WATER ROUTE

1 OBSERVED RELEASE

Contaminants detected in surface water at the facility or downhill from it (5 maximum):

None observed
No data

Rationale for attributing the contaminants to the facility:

* * *

2 ROUTE CHARACTERISTICS

Facility Slope and Intervening Terrain

Average slope of facility in percent:

>15%

Name/description of nearest downslope surface water:

unnamed tributary to Eighteen Mile Creek

Average slope of terrain between facility and above-cited surface water body in percent:

>15%

Is the facility located either totally or partially in surface water?

No

Is the facility completely surrounded by areas of higher elevation?

no

1-Year 24-Hour Rainfall in Inches

2.0"

Distance to Nearest Downslope Surface Water

< 1/4 mi.

Physical State of Waste

liquid

3 CONTAINMENT

Containment

Method(s) of waste or leachate containment evaluated:

containers

Method with highest score:

containers (0)
adequate

4 WASTE CHARACTERISTICS

Toxicity and Persistence

Compound(s) evaluated

PCB (Attachment 6-1, 6-2)

Compound with highest score:

PCB

Hazardous Waste Quantity

Total quantity of hazardous substances at the facility, excluding those with a containment score of 0 (Give a reasonable estimate even if quantity is above maximum):

2 seven drums, however containment is adequate.

Basis of estimating and/or computing waste quantity:

(Attachment 6-1)

* * *

5 TARGETS

Surface Water Use

Use(s) of surface water within 3 miles downstream of the hazardous substance:

None

Is there tidal influence?

no

Distance to a Sensitive Environment

not applicable

Distance to 5-acre (minimum) coastal wetland, if 2 miles or less:

Distance to 5-acre (minimum) fresh-water wetland, if 1 mile or less:

None

Distance to critical habitat of an endangered species or national wildlife refuge, if 1 mile or less:

Population Served by Surface Water

Location(s) of water-supply intake(s) within 3 miles (free-flowing bodies) or 1 mile (static water bodies) downstream of the hazardous substance and population served by each intake:

*None (WYS DOH Atlas of
Community Water Supply Sources, 1982)*

Computation of land area irrigated by above-cited intake(s) and conversion to population (1.5 people per acre):

Total population served:

None

Name/description of nearest of above water bodies:

Distance to above-cited intakes, measured in stream miles.

AIR ROUTE

1 OBSERVED RELEASE

None observed

Contaminants detected:

Date and location of detection of contaminants

Methods used to detect the contaminants:

Rationale for attributing the contaminants to the site:

* * *

2 WASTE CHARACTERISTICS

Reactivity and Incompatibility

Most reactive compound:

Most incompatible pair of compounds:

Toxicity

Most toxic compound:

Hazardous Waste Quantity

Total quantity of hazardous waste:

Basis of estimating and/or computing waste quantity:

* * *

3 TARGETS

Population Within 4-Mile Radius

Circle radius used, give population, and indicate how determined:

0 to 4 mi 0 to 1 mi 0 to 1/2 mi 0 to 1/4 mi

Distance to a Sensitive Environment

Distance to 5-acre (minimum) coastal wetland, if 2 miles or less:

Distance to 5-acre (minimum) fresh-water wetland, if 1 mile or less:

Distance to critical habitat of an endangered species, if 1 mile or less:

Land Use

Distance to commercial/industrial area, if 1 mile or less:

Distance to national or state park, forest, or wildlife reserve, if 2 miles or less:

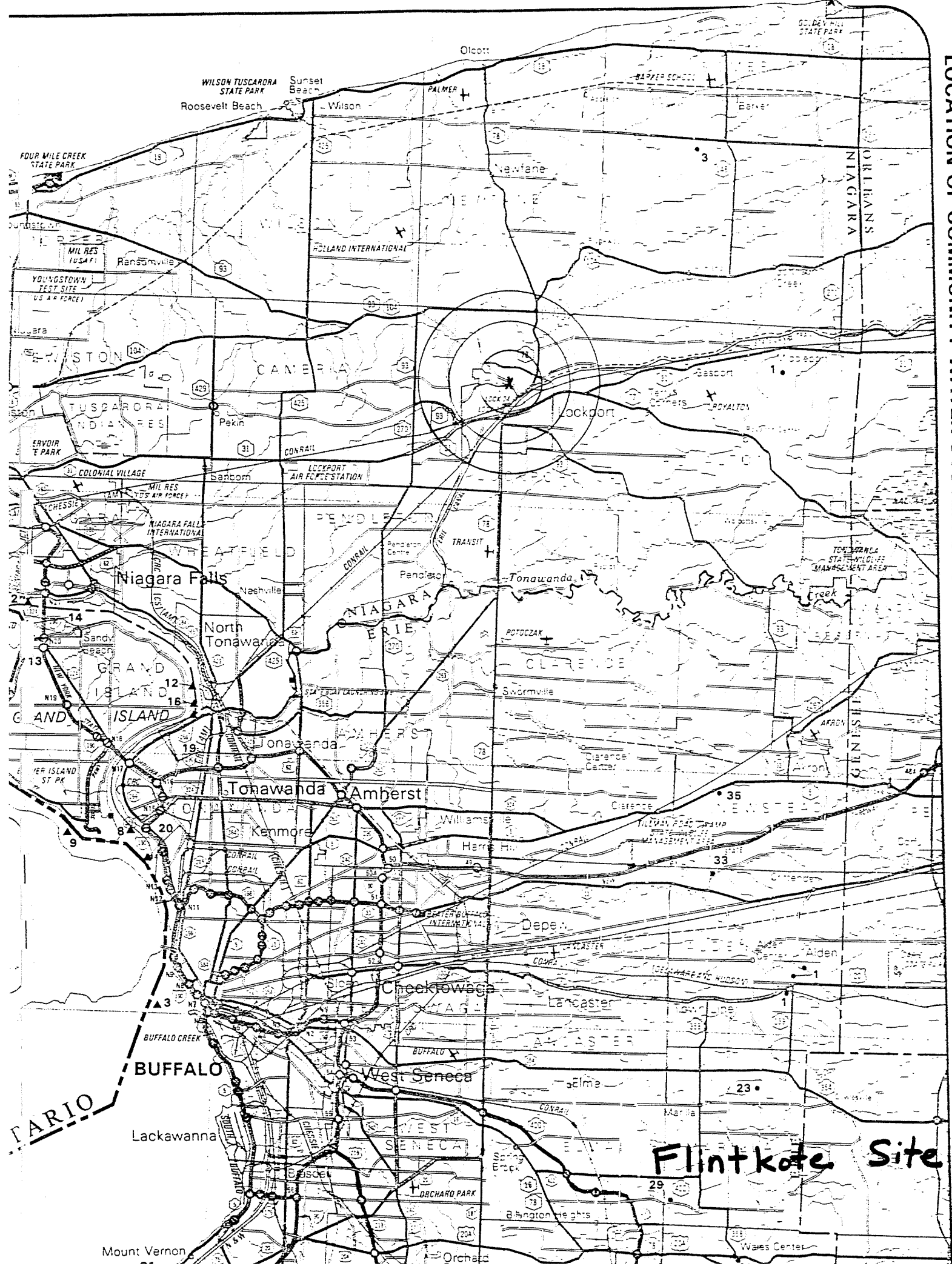
Distance to residential area, if 2 miles or less:

Distance to agricultural land in production within past 5 years, if 1 mile or less:

Distance to prime agricultural land in production within past 5 years, if 2 miles or less:

Is a historic or landmark site (National Register or Historic Places and National Natural Landmarks) within the view of the site?

LOCATION OF COMMUNITY WATER SYSTEM SOURCES - 1982



NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF ENVIRONMENTAL PROTECTION
BUREAU OF PUBLIC WATER SUPPLY PROTECTION

Section 5

5.1

FlintKote



Potential Hazardous Waste Site

Preliminary Assessment



Preliminary Assessment



**POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 1 - SITE INFORMATION AND ASSESSMENT**

I. IDENTIFICATION	
01 STATE	02 SITE NUMBER
NY	039107107

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site) Flintkote Property		02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER Clinton Street			
03 CITY Lockport	04 STATE NY	05 ZIP CODE 14094	06 COUNTY Niagara	07 COUNTY CODE	08 CONG DIST
09 COORDINATES LATITUDE		LONGITUDE			
10 DIRECTIONS TO SITE (Starting from nearest public road) Alongside mill street in Lockport N.Y.					

III. RESPONSIBLE PARTIES

01 OWNER (if known) Thomas Carter Trucking		02 STREET (Business, mailing, residential) 4487 Ridge Rd			
03 CITY Lockport	04 STATE NY	05 ZIP CODE 14094	06 TELEPHONE NUMBER ()		
07 OPERATOR (if known and different from owner)		08 STREET (Business, mailing, residential)			
09 CITY		10 STATE	11 ZIP CODE	12 TELEPHONE NUMBER ()	
13 TYPE OF OWNERSHIP (Check one) <input checked="" type="checkbox"/> A. PRIVATE <input type="checkbox"/> B. FEDERAL: _____ (Agency name) <input type="checkbox"/> C. STATE <input type="checkbox"/> D. COUNTY <input type="checkbox"/> E. MUNICIPAL <input type="checkbox"/> F. OTHER: _____ (Specify) <input type="checkbox"/> G. UNKNOWN					

14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply)

A. RCRA 3001 DATE RECEIVED: ____/____/____ MONTH DAY YEAR B. UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED: ____/____/____ MONTH DAY YEAR C. NONE

IV. CHARACTERIZATION OF POTENTIAL HAZARD

01 ON SITE INSPECTION <input checked="" type="checkbox"/> YES DATE <u>5, 12, 83</u> MONTH DAY YEAR <input type="checkbox"/> NO		BY (Check all that apply) <input type="checkbox"/> A. EPA <input type="checkbox"/> B. EPA CONTRACTOR <input type="checkbox"/> C. STATE <input checked="" type="checkbox"/> D. OTHER CONTRACTOR <input type="checkbox"/> E. LOCAL HEALTH OFFICIAL <input type="checkbox"/> F. OTHER: _____ (Specify) CONTRACTOR NAME(S): <u>Ecological Analysts Inc.</u>			
02 SITE STATUS (Check one) <input checked="" type="checkbox"/> A. ACTIVE <input type="checkbox"/> B. INACTIVE <input type="checkbox"/> C. UNKNOWN		03 YEARS OF OPERATION BEGINNING YEAR _____ ENDING YEAR _____ <input checked="" type="checkbox"/> UNKNOWN			

04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED

PCB contaminated transformer oil in 7, 55 gallon drums

05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION

V. PRIORITY ASSESSMENT

01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents)
 A. HIGH (inspection required promptly) B. MEDIUM (inspection required) C. LOW (inspect on time available basis) D. NONE (No further action needed, complete current disposition form)

VI. INFORMATION AVAILABLE FROM

01 CONTACT Raymond Kapp		02 OF (Agency/Organization) Ecological Analysts		03 TELEPHONE NUMBER 1914 692-6706	
04 PERSON RESPONSIBLE FOR ASSESSMENT Charles Houlik		05 AGENCY	06 ORGANIZATION Ecological Analysts	07 TELEPHONE NUMBER 1914 692-6706	08 DATE 6, 1, 83 MONTH DAY YEAR



**POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 2 - WASTE INFORMATION**

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
NYD 039107107

II. WASTE STATES, QUANTITIES, AND CHARACTERISTICS

01 PHYSICAL STATES (Check all that apply) <input checked="" type="checkbox"/> A. SOLID <input type="checkbox"/> B. POWDER, FINES <input type="checkbox"/> C. SLUDGE <input type="checkbox"/> D. OTHER _____ <small>(Specify)</small>	02 WASTE QUANTITY AT SITE <small>(Measures of waste quantities must be independent)</small> TONS _____ CUBIC YARDS _____ NO. OF DRUMS <u>7</u>	03 WASTE CHARACTERISTICS (Check all that apply) <input checked="" type="checkbox"/> A. TOXIC <input type="checkbox"/> B. CORROSIVE <input type="checkbox"/> C. RADIOACTIVE <input type="checkbox"/> D. PERSISTENT <input type="checkbox"/> E. SOLUBLE <input type="checkbox"/> F. INFECTIOUS <input type="checkbox"/> G. FLAMMABLE <input type="checkbox"/> H. IGNITABLE <input type="checkbox"/> I. HIGHLY VOLATILE <input type="checkbox"/> J. EXPLOSIVE <input type="checkbox"/> K. REACTIVE <input type="checkbox"/> L. INCOMPATIBLE <input type="checkbox"/> M. NOT APPLICABLE
--	---	---

III. WASTE TYPE

CATEGORY	SUBSTANCE NAME	01 GROSS AMOUNT	02 UNIT OF MEASURE	03 COMMENTS
SLU	SLUDGE			
OLW	OILY WASTE			PCBS
SOL	SOLVENTS			
PSD	PESTICIDES			
OCC	OTHER ORGANIC CHEMICALS			
IOC	INORGANIC CHEMICALS			
ACD	ACIDS			
BAS	BASES			
MES	HEAVY METALS			

IV. HAZARDOUS SUBSTANCES (See Appendix for most frequently cited CAS Numbers)

01 CATEGORY	02 SUBSTANCE NAME	03 CAS NUMBER	04 STORAGE/DISPOSAL METHOD	05 CONCENTRATION	06 MEASURE OF CONCENTRATION

V. FEEDSTOCKS (See Appendix for CAS Numbers)

CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER	CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER
FDS			FDS		
FDS			FDS		
FDS			FDS		
FDS			FDS		

VI. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

DEC files



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE: NYD 02 SITE NUMBER: 039107107

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 A. GROUNDWATER CONTAMINATION 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
03 POPULATION POTENTIALLY AFFECTED: None 04 NARRATIVE DESCRIPTION

No data

01 B. SURFACE WATER CONTAMINATION 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
03 POPULATION POTENTIALLY AFFECTED: None 04 NARRATIVE DESCRIPTION

No data

01 C. CONTAMINATION OF AIR 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

No data

01 D. FIRE/EXPLOSIVE CONDITIONS 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

None reported

01 E. DIRECT CONTACT 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

None reported

01 F. CONTAMINATION OF SOIL 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
03 AREA POTENTIALLY AFFECTED: _____ (Acres) 04 NARRATIVE DESCRIPTION

No data

01 G. DRINKING WATER CONTAMINATION 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
03 POPULATION POTENTIALLY AFFECTED: None 04 NARRATIVE DESCRIPTION

No data

01 H. WORKER EXPOSURE/INJURY 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
03 WORKERS POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

Not evaluated

01 I. POPULATION EXPOSURE/INJURY 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

Not evaluated



**POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT**
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
NYD 039107 107

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 J. DAMAGE TO FLORA 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
04 NARRATIVE DESCRIPTION

No data

01 K. DAMAGE TO FAUNA 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
04 NARRATIVE DESCRIPTION (include name(s) of species)

No data

01 L. CONTAMINATION OF FOOD CHAIN 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
04 NARRATIVE DESCRIPTION

No data

01 M. UNSTABLE CONTAINMENT OF WASTES 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
(Spills/runoff/standing liquids/leaking drums)
03 POPULATION POTENTIALLY AFFECTED: None 04 NARRATIVE DESCRIPTION

wastes adequately contained

01 N. DAMAGE TO OFFSITE PROPERTY 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
04 NARRATIVE DESCRIPTION

None reported

01 O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
04 NARRATIVE DESCRIPTION

None reported

01 P. ILLEGAL/UNAUTHORIZED DUMPING 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
04 NARRATIVE DESCRIPTION

None reported

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

III. TOTAL POPULATION POTENTIALLY AFFECTED: 0

IV. COMMENTS

V. SOURCES OF INFORMATION (Cite specific references, e. g., state files, sample analysis, reports)

*NYSDDEC / Ed Eckerson Industrial Apparatus Maintenance Inc.
Lockport, N.Y.*

Flintkote



Potential Hazardous Waste Site

Site Inspection Report



Site Inspection Report



**POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 1 - SITE LOCATION AND INSPECTION INFORMATION**

I. IDENTIFICATION

01 STATE NY 02 SITE NUMBER 039107107

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site) <u>Flintkote Property</u>		02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER <u>Clinton Street</u>					
03 CITY <u>Lockport</u>		04 STATE <u>NY</u>	05 ZIP CODE <u>14094</u>	06 COUNTY <u>Niagara</u>		07 COUNTY CODE	08 CONG DIST
09 COORDINATES LATITUDE _____ LONGITUDE _____		10 TYPE OF OWNERSHIP (Check one): <input checked="" type="checkbox"/> A. PRIVATE <input type="checkbox"/> B. FEDERAL <input type="checkbox"/> C. STATE <input type="checkbox"/> D. COUNTY <input type="checkbox"/> E. MUNICIPAL <input type="checkbox"/> F. OTHER					

III. INSPECTION INFORMATION

01 DATE OF INSPECTION <u>5/12/83</u> MONTH DAY YEAR	02 SITE STATUS <input checked="" type="checkbox"/> ACTIVE <input type="checkbox"/> INACTIVE	03 YEARS OF OPERATION BEGINNING YEAR _____ ENDING YEAR _____ <u>X</u> UNKNOWN	
04 AGENCY PERFORMING INSPECTION (Check all that apply) <input type="checkbox"/> A. EPA <input type="checkbox"/> B. EPA CONTRACTOR _____ (Name of firm) <input type="checkbox"/> C. MUNICIPAL <input type="checkbox"/> D. MUNICIPAL CONTRACTOR _____ (Name of firm) <input type="checkbox"/> E. STATE <input checked="" type="checkbox"/> F. STATE CONTRACTOR <u>Ecological Analysts (EAI)</u> (Name of firm) <input type="checkbox"/> G. OTHER _____ (Specify)			

05 CHIEF INSPECTOR <u>Charles Houlik</u>	06 TITLE <u>Hydrogeologist</u>	07 ORGANIZATION <u>EAI</u>	08 TELEPHONE NO. <u>1914 692-6706</u>
09 OTHER INSPECTORS <u>William Going</u>	10 TITLE <u>Scientist</u>	11 ORGANIZATION <u>EAI</u>	12 TELEPHONE NO. <u>1914 692-6706</u>
			()
			()
			()
			()

13 SITE REPRESENTATIVES INTERVIEWED <u>Edward Eckerson</u>	14 TITLE <u>President</u>	15 ADDRESS <u>Indust. Apparatus Maint. occupant of building</u>	16 TELEPHONE NO. ()
			()
			()
			()
			()
			()

17 ACCESS GAINED BY (Check one) <input checked="" type="checkbox"/> PERMISSION <input type="checkbox"/> WARRANT	18 TIME OF INSPECTION <u>2:00 P.M.</u>	19 WEATHER CONDITIONS <u>Partly cloudy, cool</u>
---	---	---

IV. INFORMATION AVAILABLE FROM

01 CONTACT <u>Raymond Kapp</u>	02 OF (Agency/Organization) <u>Ecological Analysts</u>		03 TELEPHONE NO. <u>1914 692-6706</u>
04 PERSON RESPONSIBLE FOR SITE INSPECTION FORM <u>Charles Houlik</u>	05 AGENCY	06 ORGANIZATION <u>Ecological Analysts</u>	07 TELEPHONE NO. <u>914-692-6706</u>
			08 DATE <u>6/1/83</u> MONTH DAY YEAR



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 2 - WASTE INFORMATION

I. IDENTIFICATION
01 STATE | 02 SITE NUMBER
NYD | 039107107

II. WASTE STATES, QUANTITIES, AND CHARACTERISTICS

01 PHYSICAL STATES (Check all that apply) <input checked="" type="checkbox"/> A. SOLID <input type="checkbox"/> B. POWDER, FINES <input type="checkbox"/> C. SLUDGE <input type="checkbox"/> D. OTHER _____ <small>(Specify)</small>	02 WASTE QUANTITY AT SITE <small>(Measures of waste quantities must be independent)</small> TONS _____ CUBIC YARDS _____ NO. OF DRUMS <u>7</u>	03 WASTE CHARACTERISTICS (Check all that apply) <input checked="" type="checkbox"/> A. TOXIC <input type="checkbox"/> B. CORROSIVE <input type="checkbox"/> C. RADIOACTIVE <input type="checkbox"/> D. PERSISTENT <input type="checkbox"/> E. SOLUBLE <input type="checkbox"/> F. INFECTIOUS <input type="checkbox"/> G. FLAMMABLE <input type="checkbox"/> H. IGNITABLE <input type="checkbox"/> I. HIGHLY VOLATILE <input type="checkbox"/> J. EXPLOSIVE <input type="checkbox"/> K. REACTIVE <input type="checkbox"/> L. INCOMPATIBLE <input type="checkbox"/> M. NOT APPLICABLE
---	--	--

III. WASTE TYPE

CATEGORY	SUBSTANCE NAME	01 GROSS AMOUNT	02 UNIT OF MEASURE	03 COMMENTS
SLU	SLUDGE			
OLW	OILY WASTE			PCBS
SOL	SOLVENTS			
PSD	PESTICIDES			
OCC	OTHER ORGANIC CHEMICALS			
IOC	INORGANIC CHEMICALS			
ACD	ACIDS			
BAS	BASES			
MES	HEAVY METALS			

IV. HAZARDOUS SUBSTANCES (See Appendix for most frequently cited CAS Numbers)

01 CATEGORY	02 SUBSTANCE NAME	03 CAS NUMBER	04 STORAGE/DISPOSAL METHOD	05 CONCENTRATION	06 MEASURE OF CONCENTRATION

V. FEEDSTOCKS (See Appendix for CAS Numbers)

CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER	CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER
FDS			FDS		
FDS			FDS		
FDS			FDS		
FDS			FDS		

VI. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

DEC files



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
NyD 039107107

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 A. GROUNDWATER CONTAMINATION 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
03 POPULATION POTENTIALLY AFFECTED: NONE 04 NARRATIVE DESCRIPTION

No data

01 B. SURFACE WATER CONTAMINATION 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
03 POPULATION POTENTIALLY AFFECTED: NONE 04 NARRATIVE DESCRIPTION

No data

01 C. CONTAMINATION OF AIR 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

No data

01 D. FIRE/EXPLOSIVE CONDITIONS 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

None reported

01 E. DIRECT CONTACT 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

None reported

01 F. CONTAMINATION OF SOIL 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
03 AREA POTENTIALLY AFFECTED: _____ (Acres) 04 NARRATIVE DESCRIPTION

No data

01 G. DRINKING WATER CONTAMINATION 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
03 POPULATION POTENTIALLY AFFECTED: NONE 04 NARRATIVE DESCRIPTION

No data

01 H. WORKER EXPOSURE/INJURY 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
03 WORKERS POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

Not evaluated

01 I. POPULATION EXPOSURE/INJURY 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

Not evaluated



POTENTIAL HAZARDOUS WASTE SITE
 SITE INSPECTION REPORT
 PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
 NYD 039107107

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 J. DAMAGE TO FLORA 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
 04 NARRATIVE DESCRIPTION

No data

01 K. DAMAGE TO FAUNA 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
 04 NARRATIVE DESCRIPTION (include name(s) of species)

No data

01 L. CONTAMINATION OF FOOD CHAIN 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
 04 NARRATIVE DESCRIPTION

No data

01 M. UNSTABLE CONTAINMENT OF WASTES 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
(Spills/Runoff/Standing liquids, Leaking drums)
 03 POPULATION POTENTIALLY AFFECTED: NONE 04 NARRATIVE DESCRIPTION

Wastes adequately contained

01 N. DAMAGE TO OFFSITE PROPERTY 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
 04 NARRATIVE DESCRIPTION

None reported

01 O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
 04 NARRATIVE DESCRIPTION

None reported

01 P. ILLEGAL/UNAUTHORIZED DUMPING 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
 04 NARRATIVE DESCRIPTION

None reported

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

III. TOTAL POPULATION POTENTIALLY AFFECTED: NONE

IV. COMMENTS

V. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

NYSDEC / Ed. Eckerson re Industrial Apparatus
 Maintenance Inv.

Lockport, NY



**POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION
PART 4 - PERMIT AND DESCRIPTIVE INFORMATION**

I. IDENTIFICATION

01 STATE	02 SITE NUMBER
WYD	039107107

II. PERMIT INFORMATION

01 TYPE OF PERMIT ISSUED <i>(Check all that apply)</i>	02 PERMIT NUMBER	03 DATE ISSUED	04 EXPIRATION DATE	05 COMMENTS
<input type="checkbox"/> A. NPDES				
<input type="checkbox"/> B. UIC				
<input type="checkbox"/> C. AIR				
<input type="checkbox"/> D. RCRA				
<input type="checkbox"/> E. RCRA INTERIM STATUS				
<input type="checkbox"/> F. SPCC PLAN				
<input type="checkbox"/> G. STATE <i>(Specify)</i>				
<input type="checkbox"/> H. LOCAL <i>(Specify)</i>				
<input type="checkbox"/> I. OTHER <i>(Specify)</i>				
<input type="checkbox"/> J. NONE				

III. SITE DESCRIPTION

01 STORAGE/DISPOSAL <i>(Check all that apply)</i>	02 AMOUNT	03 UNIT OF MEASURE	04 TREATMENT <i>(Check all that apply)</i>	05 OTHER
<input type="checkbox"/> A. SURFACE IMPOUNDMENT <input type="checkbox"/> B. PILES <input checked="" type="checkbox"/> C. DRUMS, ABOVE GROUND <input type="checkbox"/> D. TANK, ABOVE GROUND <input type="checkbox"/> E. TANK, BELOW GROUND <input type="checkbox"/> F. LANDFILL <input type="checkbox"/> G. LANDFARM <input type="checkbox"/> H. OPEN DUMP <input type="checkbox"/> I. OTHER <i>(Specify)</i>	7	50 gal each	<input type="checkbox"/> A. INCENERATION <input type="checkbox"/> B. UNDERGROUND INJECTION <input type="checkbox"/> C. CHEMICAL/PHYSICAL <input type="checkbox"/> D. BIOLOGICAL <input type="checkbox"/> E. WASTE OIL PROCESSING <input type="checkbox"/> F. SOLVENT RECOVERY <input type="checkbox"/> G. OTHER RECYCLING/RECOVERY <input type="checkbox"/> H. OTHER <i>(Specify)</i>	<input type="checkbox"/> A. BUILDINGS ON SITE 06 AREA OF SITE _____ (Acres)

07 COMMENTS

IV. CONTAINMENT

01 CONTAINMENT OF WASTES <i>(Check one)</i>	<input checked="" type="checkbox"/> A. ADEQUATE, SECURE	<input type="checkbox"/> B. MODERATE	<input type="checkbox"/> C. INADEQUATE, POOR	<input type="checkbox"/> D. INSECURE, UNSOUND, DANGEROUS
---	---	--------------------------------------	--	--

02 DESCRIPTION OF DRUMS, DIKING, LINERS, BARRIERS, ETC.

Drums stored in compliance with regulations for storage of PCB waste.

V. ACCESSIBILITY

01 WASTE EASILY ACCESSIBLE: YES NO
 02 COMMENTS

VI. SOURCES OF INFORMATION *(Cite specific references, e.g. state files, sample analysis, reports)*

DEC files
 Site inspection



**POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 5 - WATER, DEMOGRAPHIC, AND ENVIRONMENTAL DATA**

I. IDENTIFICATION

01 STATE | 02 SITE NUMBER

NY | D039107107

II. DRINKING WATER SUPPLY

01 TYPE OF DRINKING SUPPLY
(Check as applicable)

NONE

SURFACE

WELL

ENDANGERED

AFFECTED

MONITORED

COMMUNITY

A.

B.

A.

B.

C.

NON-COMMUNITY

C.

D.

D.

E.

F.

03 DISTANCE TO SITE

A. _____ (mi)

B. _____ (mi)

III. GROUNDWATER

01 GROUNDWATER USE IN VICINITY *(Check one)*

A. ONLY SOURCE FOR DRINKING

B. DRINKING
(Other sources available)

C. COMMERCIAL, INDUSTRIAL, IRRIGATION
(Limited other sources available)

D. NOT USED, UNUSEABLE

COMMERCIAL, INDUSTRIAL, IRRIGATION
(No other water sources available)

02 POPULATION SERVED BY GROUND WATER NONE

03 DISTANCE TO NEAREST DRINKING WATER WELL _____ (mi)

04 DEPTH TO GROUNDWATER

unknown (ft)

05 DIRECTION OF GROUNDWATER FLOW

06 DEPTH TO AQUIFER OF CONCERN

_____ (ft)

07 POTENTIAL YIELD OF AQUIFER

_____ (gpd)

08 SOLE SOURCE AQUIFER

YES NO

09 DESCRIPTION OF WELLS *(including usage, depth, and location relative to population and buildings)*

None

10 RECHARGE AREA

YES

COMMENTS

NO

11 DISCHARGE AREA

YES

COMMENTS

NO

IV. SURFACE WATER

01 SURFACE WATER USE *(Check one)*

A. RESERVOIR, RECREATION
DRINKING WATER SOURCE

B. IRRIGATION, ECONOMICALLY
IMPORTANT RESOURCES

C. COMMERCIAL, INDUSTRIAL

D. NOT CURRENTLY USED

02 AFFECTED/POTENTIALLY AFFECTED BODIES OF WATER

NAME:

unnamed tributary of 18 mile creek

AFFECTED

DISTANCE TO SITE

< 1/4

(mi)

_____ (mi)

_____ (mi)

V. DEMOGRAPHIC AND PROPERTY INFORMATION

01 TOTAL POPULATION WITHIN

ONE (1) MILE OF SITE

TWO (2) MILES OF SITE

THREE (3) MILES OF SITE

A. _____
NO. OF PERSONS

B. _____
NO. OF PERSONS

C. _____
NO. OF PERSONS

02 DISTANCE TO NEAREST POPULATION

_____ (mi)

03 NUMBER OF BUILDINGS WITHIN TWO (2) MILES OF SITE

04 DISTANCE TO NEAREST OFF-SITE BUILDING

_____ (mi)

05 POPULATION WITHIN VICINITY OF SITE *(Provide narrative description of nature of population within vicinity of site, e.g., rural, village, densely populated urban area)*

Urban area, industrial and residential



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 5 - WATER, DEMOGRAPHIC, AND ENVIRONMENTAL DATA

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

NYD 039 107107

VI. ENVIRONMENTAL INFORMATION

01 PERMEABILITY OF UNSATURATED ZONE (Check one)

- A. $10^{-6} - 10^{-8}$ cm/sec B. $10^{-4} - 10^{-6}$ cm/sec C. $10^{-4} - 10^{-3}$ cm/sec D. GREATER THAN 10^{-3} cm/sec

unknown

02 PERMEABILITY OF BEDROCK (Check one)

- A. IMPERMEABLE (Less than 10^{-6} cm/sec) B. RELATIVELY IMPERMEABLE ($10^{-4} - 10^{-6}$ cm/sec) C. RELATIVELY PERMEABLE ($10^{-2} - 10^{-4}$ cm/sec) D. VERY PERMEABLE (Greater than 10^{-2} cm/sec)

unknown

03 DEPTH TO BEDROCK

unknown (ft)

04 DEPTH OF CONTAMINATED SOIL ZONE

(ft)

05 SOIL pH

06 NET PRECIPITATION

9 (in)

07 ONE YEAR 24 HOUR RAINFALL

2.0 (in)

08 SLOPE SITE SLOPE

715 %

DIRECTION OF SITE SLOPE

South

TERRAIN AVERAGE SLOPE

> 15 %

09 FLOOD POTENTIAL

SITE IS IN _____ YEAR FLOODPLAIN

10

SITE IS ON BARRIER ISLAND, COASTAL HIGH HAZARD AREA, RIVERINE FLOODWAY

11 DISTANCE TO WETLANDS (5 acre minimum)

ESTUARINE OTHER

A. _____ (mi) B. _____ (mi)

NONE

12 DISTANCE TO CRITICAL HABITAT (of endangered species)

NONE _____ (mi)

ENDANGERED SPECIES: _____

13 LAND USE IN VICINITY

DISTANCE TO:

COMMERCIAL/INDUSTRIAL

RESIDENTIAL AREAS; NATIONAL/STATE PARKS, FORESTS, OR WILDLIFE RESERVES

AGRICULTURAL LANDS PRIME AG LAND AG LAND

A. 0 (mi)

B. _____ (mi)

C. _____ (mi)

D. _____ (mi)

14 DESCRIPTION OF SITE IN RELATION TO SURROUNDING TOPOGRAPHY

VII. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

DEC files
Site inspections



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 6 - SAMPLE AND FIELD INFORMATION

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
NYD 039107107

II. SAMPLES TAKEN

SAMPLE TYPE	01 NUMBER OF SAMPLES TAKEN	02 SAMPLES SENT TO	03 ESTIMATED DATE RESULTS AVAILABLE
GROUNDWATER			
SURFACE WATER			
WASTE			
AIR			
RUNOFF			
SPILL			
SOIL			
VEGETATION			
OTHER			

III. FIELD MEASUREMENTS TAKEN

01 TYPE	02 COMMENTS

IV. PHOTOGRAPHS AND MAPS

01 TYPE GROUND AERIAL

02 IN CUSTODY OF ECOLOGICAL ANALYSTS INC.
(Name of organization or individual)

03 MAPS YES NO

04 LOCATION OF MAPS Topographic

V. OTHER FIELD DATA COLLECTED (Provide narrative description)

VI. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis reports)



**POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 7 - OWNER INFORMATION**

I. IDENTIFICATION

01 STATE | 02 SITE NUMBER
 NYD | 039107107

II. CURRENT OWNER(S)				PARENT COMPANY (if applicable)			
01 NAME <i>Thomas Carter Trucking</i>		02 D+B NUMBER		08 NAME		09 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.) <i>4487 Ridge Rd.</i>			04 SIC CODE	10 STREET ADDRESS (P.O. Box, RFD #, etc.)			11 SIC CODE
05 CITY <i>Lockport</i>		06 STATE <i>NY</i>	07 ZIP CODE <i>14094</i>	12 CITY		13 STATE	14 ZIP CODE
01 NAME		02 D+B NUMBER		08 NAME		09 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE	10 STREET ADDRESS (P.O. Box, RFD #, etc.)			11 SIC CODE
05 CITY		06 STATE	07 ZIP CODE	12 CITY		13 STATE	14 ZIP CODE
01 NAME		02 D+B NUMBER		08 NAME		09 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE	10 STREET ADDRESS (P.O. Box, RFD #, etc.)			11 SIC CODE
05 CITY		06 STATE	07 ZIP CODE	12 CITY		13 STATE	14 ZIP CODE
01 NAME		02 D+B NUMBER		08 NAME		09 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE	10 STREET ADDRESS (P.O. Box, RFD #, etc.)			11 SIC CODE
05 CITY		06 STATE	07 ZIP CODE	12 CITY		13 STATE	14 ZIP CODE
III. PREVIOUS OWNER(S) (List most recent first)				IV. REALTY OWNER(S) (if applicable: list most recent first)			
01 NAME		02 D+B NUMBER		01 NAME		02 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE	03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE
05 CITY		06 STATE	07 ZIP CODE	05 CITY		06 STATE	07 ZIP CODE
01 NAME		02 D+B NUMBER		01 NAME		02 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE	03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE
05 CITY		06 STATE	07 ZIP CODE	05 CITY		06 STATE	07 ZIP CODE
01 NAME		02 D+B NUMBER		01 NAME		02 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE	03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE
05 CITY		06 STATE	07 ZIP CODE	05 CITY		06 STATE	07 ZIP CODE
V. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)							



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 8 - OPERATOR INFORMATION

I. IDENTIFICATION	
01 STATE	02 SITE NUMBER

II. CURRENT OPERATOR <i>(Provide if different from owner)</i>				OPERATOR'S PARENT COMPANY <i>(If applicable)</i>			
01 NAME		02 D+B NUMBER		10 NAME		11 D+B NUMBER	
03 STREET ADDRESS <i>(P.O. Box, RFD #, etc.)</i>			04 SIC CODE	12 STREET ADDRESS <i>(P.O. Box, RFD #, etc.)</i>			13 SIC CODE
05 CITY		06 STATE	07 ZIP CODE	14 CITY		15 STATE	16 ZIP CODE
08 YEARS OF OPERATION		09 NAME OF OWNER					
III. PREVIOUS OPERATOR(S) <i>(List most recent first; provide only if different from owner)</i>				PREVIOUS OPERATORS' PARENT COMPANIES <i>(If applicable)</i>			
01 NAME		02 D+B NUMBER		10 NAME		11 D+B NUMBER	
03 STREET ADDRESS <i>(P.O. Box, RFD #, etc.)</i>			04 SIC CODE	12 STREET ADDRESS <i>(P.O. Box, RFD #, etc.)</i>			13 SIC CODE
05 CITY		06 STATE	07 ZIP CODE	14 CITY		15 STATE	16 ZIP CODE
08 YEARS OF OPERATION		09 NAME OF OWNER DURING THIS PERIOD					
01 NAME		02 D+B NUMBER		10 NAME		11 D+B NUMBER	
03 STREET ADDRESS <i>(P.O. Box, RFD #, etc.)</i>			04 SIC CODE	12 STREET ADDRESS <i>(P.O. Box, RFD #, etc.)</i>			13 SIC CODE
05 CITY		06 STATE	07 ZIP CODE	14 CITY		15 STATE	16 ZIP CODE
08 YEARS OF OPERATION		09 NAME OF OWNER DURING THIS PERIOD					
01 NAME		02 D+B NUMBER		10 NAME		11 D+B NUMBER	
03 STREET ADDRESS <i>(P.O. Box, RFD #, etc.)</i>			04 SIC CODE	12 STREET ADDRESS <i>(P.O. Box, RFD #, etc.)</i>			13 SIC CODE
05 CITY		06 STATE	07 ZIP CODE	14 CITY		15 STATE	16 ZIP CODE
08 YEARS OF OPERATION		09 NAME OF OWNER DURING THIS PERIOD					
IV. SOURCES OF INFORMATION <i>(Cite specific references, e.g., state files, sample analysis, reports)</i>							



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 9 - GENERATOR/TRANSPORTER INFORMATION

I. IDENTIFICATION
01 STATE | 02 SITE NUMBER

II. ON-SITE GENERATOR

01 NAME		02 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE	
05 CITY	06 STATE	07 ZIP CODE	

III. OFF-SITE GENERATOR(S)

01 NAME		02 D+B NUMBER		01 NAME		02 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE		03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE	
05 CITY	06 STATE	07 ZIP CODE		05 CITY	06 STATE	07 ZIP CODE	
01 NAME		02 D+B NUMBER		01 NAME		02 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE		03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE	
05 CITY	06 STATE	07 ZIP CODE		05 CITY	06 STATE	07 ZIP CODE	

IV. TRANSPORTER(S)

01 NAME		02 D+B NUMBER		01 NAME		02 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE		03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE	
05 CITY	06 STATE	07 ZIP CODE		05 CITY	06 STATE	07 ZIP CODE	
01 NAME		02 D+B NUMBER		01 NAME		02 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE		03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE	
05 CITY	06 STATE	07 ZIP CODE		05 CITY	06 STATE	07 ZIP CODE	

V. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

--	--	--	--	--	--	--	--



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 10 - PAST RESPONSE ACTIVITIES

I. IDENTIFICATION
01 STATE 02 SITE NUMBER

II. PAST RESPONSE ACTIVITIES

01 <input type="checkbox"/> A. WATER SUPPLY CLOSED 04 DESCRIPTION	02 DATE _____	03 AGENCY _____
01 <input type="checkbox"/> B. TEMPORARY WATER SUPPLY PROVIDED 04 DESCRIPTION	02 DATE _____	03 AGENCY _____
01 <input type="checkbox"/> C. PERMANENT WATER SUPPLY PROVIDED 04 DESCRIPTION	02 DATE _____	03 AGENCY _____
01 <input type="checkbox"/> D. SPILLED MATERIAL REMOVED 04 DESCRIPTION	02 DATE _____	03 AGENCY _____
01 <input type="checkbox"/> E. CONTAMINATED SOIL REMOVED 04 DESCRIPTION	02 DATE _____	03 AGENCY _____
01 <input type="checkbox"/> F. WASTE REPACKAGED 04 DESCRIPTION	02 DATE _____	03 AGENCY _____
01 <input type="checkbox"/> G. WASTE DISPOSED ELSEWHERE 04 DESCRIPTION	02 DATE _____	03 AGENCY _____
01 <input type="checkbox"/> H. ON SITE BURIAL 04 DESCRIPTION	02 DATE _____	03 AGENCY _____
01 <input type="checkbox"/> I. IN SITU CHEMICAL TREATMENT 04 DESCRIPTION	02 DATE _____	03 AGENCY _____
01 <input type="checkbox"/> J. IN SITU BIOLOGICAL TREATMENT 04 DESCRIPTION	02 DATE _____	03 AGENCY _____
01 <input type="checkbox"/> K. IN SITU PHYSICAL TREATMENT 04 DESCRIPTION	02 DATE _____	03 AGENCY _____
01 <input type="checkbox"/> L. ENCAPSULATION 04 DESCRIPTION	02 DATE _____	03 AGENCY _____
01 <input type="checkbox"/> M. EMERGENCY WASTE TREATMENT 04 DESCRIPTION	02 DATE _____	03 AGENCY _____
01 <input type="checkbox"/> N. CUTOFF WALLS 04 DESCRIPTION	02 DATE _____	03 AGENCY _____
01 <input type="checkbox"/> O. EMERGENCY DIKING/SURFACE WATER DIVERSION 04 DESCRIPTION	02 DATE _____	03 AGENCY _____
01 <input type="checkbox"/> P. CUTOFF TRENCHES/SUMP 04 DESCRIPTION	02 DATE _____	03 AGENCY _____
01 <input type="checkbox"/> Q. SUBSURFACE CUTOFF WALL 04 DESCRIPTION	02 DATE _____	03 AGENCY _____



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 10 - PAST RESPONSE ACTIVITIES

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

II PAST RESPONSE ACTIVITIES *(Continued)*

01 R. BARRIER WALLS CONSTRUCTED
04 DESCRIPTION

02 DATE _____

03 AGENCY _____

01 S. CAPPING/COVERING
04 DESCRIPTION

02 DATE _____

03 AGENCY _____

01 T. BULK TANKAGE REPAIRED
04 DESCRIPTION

02 DATE _____

03 AGENCY _____

01 U. GROUT CURTAIN CONSTRUCTED
04 DESCRIPTION

02 DATE _____

03 AGENCY _____

01 V. BOTTOM SEALED
04 DESCRIPTION

02 DATE _____

03 AGENCY _____

01 W. GAS CONTROL
04 DESCRIPTION

02 DATE _____

03 AGENCY _____

01 X. FIRE CONTROL
04 DESCRIPTION

02 DATE _____

03 AGENCY _____

01 Y. LEACHATE TREATMENT
04 DESCRIPTION

02 DATE _____

03 AGENCY _____

01 Z. AREA EVACUATED
04 DESCRIPTION

02 DATE _____

03 AGENCY _____

01 1. ACCESS TO SITE RESTRICTED
04 DESCRIPTION

02 DATE _____

03 AGENCY _____

01 2. POPULATION RELOCATED
04 DESCRIPTION

02 DATE _____

03 AGENCY _____

01 3. OTHER REMEDIAL ACTIVITIES
04 DESCRIPTION

02 DATE _____

03 AGENCY _____

III. SOURCES OF INFORMATION *(Cite specific references, e.g., state files, sample analysis, reports)*



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 11 - ENFORCEMENT INFORMATION

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

II. ENFORCEMENT INFORMATION

01 PAST REGULATORY/ENFORCEMENT ACTION YES NO

02 DESCRIPTION OF FEDERAL, STATE, LOCAL REGULATORY/ENFORCEMENT ACTION

III. SOURCES OF INFORMATION *(Cite specific references, e.g., state files, sample analysis, reports)*

5.3 SITE INSPECTION SUMMARY

On 12 May 1983, representatives from Ecological Analysts, Inc. (EA) visited the old Flintkote property in Lockport, New York. The scientists representing EA were C. W. Houlik and B. Going. They met Mr. Edward Eckerson, President of Industrial Apparatus Maintenance, Inc. (who now occupy the property). Mr. Eckerson led an inspection of the property, and showed EA where seven drums were being stored in the basement of his building. They are stored on a cement slab behind a locked door. He explained that he recently had the oil contents of each drum analyzed for PCB and that none of the oil contained more than 2 mg/l of PCB. He presented data for this claim.

The property is located alongside Mill Street in Lockport. A small, meandering stream flows past the back of the property. The property slopes away steeply from Mill Street and has been littered with garbage by "midnight dumpers." The new occupants plan to fill and grade the property and rehabilitate the old building (former paper mill).

6. SITE HISTORY

Flintkote is a barrel storage site (Attachments 6-1 thru 6-3). The building, which is owned by Thomas Carter Trucking of Lockport, N.Y., is presently a machine shop. Seven drums containing sweepings, solid materials, and PCB contaminated transformer oil are stored in the basement of the building in accordance with federal regulations, for the storage of PBCs. Recent analyses (March 1983) of the waste oil from each of the drums indicate PCB concentrations below the detection limit of 2.0 ppm.

600 Delaware Avenue, Buffalo, New York 14202

P. Feersch
Attachment
6-1
page 1 of 1

October 23, 1981

Mr. James L. Fox
Attorney at Law
556 South Transit Street
Lockport, New York 14094

Re: Flintkote Property
Lockport (C), Niagara County

Dear Mr. Fox:

In response to your letter of August 18, 1981 the following information is presented for your consideration:

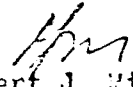
The Flintkote Property was inspected by this office and the Niagara County Department of Health on May 24, 1979. The inspection confirmed that the drums of PCB-contaminated transformer oil were stored in conformance with Federal Regulations governing the storage of PCB contaminated materials. Subsequent inspections by the Niagara County Department of Health on May 31, 1980 and October 2, 1981 indicate that they continue to be stored in conformance with the Regulations. These Regulations have requirements for the storage of PCBs.

Part 360 (Solid Waste Management Facilities) of the Environmental Conservation Codes, Rules and Regulations, Section 360.8(c)(8) has not been implemented to date. When that Section becomes effective, sometime this fall, a State Part 360 permit will be needed.

However, it is recommended that you do apply for a storage permit for this waste (applications enclosed). This will officially put you on notice with this Department as to submitting a Part 360 application. This office will then act on this application when appropriate.

Should you have any questions, please do not hesitate to contact this office at 716/847-4585.

Very truly yours,


Robert J. Mitrey, P.E.
Associate Sanitary Engineer

PJ:las

cc: Mr. P. Feersch, NYSDEC-Buffalo, Water Quality Section
Mr. P. Gwozdek, Niagara County Department of Health

Industrial
Apparatus
Maintenance, Inc.

Attachment
6-2
page 1 of 1

Ed.

206 Mill Street • Lockport, New York 14094 • (716) 434-9135

March 28, 1983

James P. Cotter
7200 Park Place
Niagara Falls, N.Y. 14302

Subject: P.C.B.

Jim;

Per our discussions on the subject matter I am enclosing two letters, one to Tom Carter and one to Jim Fox from the D.E.C. There must have been more correspondence than this, because I understand a permit to store these was issued. I don't know the number or who physically has it.

Also included is a report from Environmental Engineering Lab in Syracuse on samples I took and delivered to them in Syracuse.

The following is an account of barrels by number and what each contained.

- #1 - 55 gal. drum of solids - rags, floor sweepings and etc.
- #2 - 55 gal. drum of solids - same as #1
- #3 - 55 gal. drum filled with liquid to 3" from top.
- #4 - 55 gal. drum filled with liquid to 6" from top.
- #5 - 55 gal. drum filled with liquid to 3" from top.
- #6 - 55 gal. drum filled with liquid to 13 $\frac{1}{2}$ " from top.
- #7 - 55 gal. drum filled with liquid to 3" from top.
- #8 - 55 gal. drum filled with liquid to 22" from top.
- #9 - 30 gal. drum filled with liquid to about $\frac{1}{2}$ of drum.

Samples were taken from each drum with liquids using capillary tubes and sample bottles supplied by Environmental Engineering. Capillary tubes were dropped in the drums per Environmental Engineer's instructions. The drums were numbered using a paint pencil and samples marked accordingly.

The Lab technician I talked to said these samples were low enough that we should be able to get rid of them through any waste oil handler; but as we discussed, the D.E.C. permit will have to be cleared.

I would like to clear up this matter as soon as possible, so a closing on the facility can take place.

Thanks,

Edward L. Eckerson
President

Enclosures
ELE:dmh

CC Helen Loy
HQ

Attachment
6-3
page 1 of 1



POTENTIAL HAZARDOUS WASTE SITE IDENTIFICATION

REGION II SITE NUMBER NY0000010278

NOTE: The initial identification of a potential site or incident should not be interpreted as a finding of illegal activity or confirmation that an actual health or environmental threat exists. All identified sites will be assessed under the EPA's Hazardous Waste Site Enforcement and Response System to determine if a hazardous waste problem actually exists.

A. SITE NAME FLINTKOTE CLINTON STREET		B. STREET (or other identifier) CLINTON STREET CLINTON STREET	
C. CITY LOCKPORT		D. STATE N.Y.	E. ZIP CODE
G. OWNER/OPERATOR (if known) L. NAME UNKNOWN		F. COUNTY NAME NIAGARA	
H. TYPE OF OWNERSHIP (if known) <input type="checkbox"/> 1. FEDERAL <input type="checkbox"/> 2. STATE <input type="checkbox"/> 3. COUNTY <input type="checkbox"/> 4. MUNICIPAL <input type="checkbox"/> 5. PRIVATE <input checked="" type="checkbox"/> 6. UNKNOWN		2. TELEPHONE NUMBER	

I. SITE DESCRIPTION
INACTIVE, OPEN DUMP.
POSSIBLE DUMPING OF PCB'S INTO 18 MILE CREEK BANK.
(STATE RATING "N").

J. HOW IDENTIFIED (i.e., citizen's complaints, OSHA citations, etc.)
HAZARDOUS WASTE DISPOSAL SITES IN NEW YORK STATE (LIST OF 6/1980)

K. DATE IDENTIFIED
(mo., day, & yr.)
4/15/80

L. SUMMARY OF POTENTIAL OR KNOWN PROBLEM
SUSPECTED HAZARDOUS WASTE - PCB'S - BUT QUANTITY IS UNKNOWN
SAMPLING SHOULD BE DONE TO VERIFY PRESENCE OF PCB'S. FURTHER INVESTIGATION IS NEEDED TO ASSESS IMPACT UPON HEALTH AND THE ENVIRONMENT.

M. PREPARER INFORMATION		
1. NAME GEORGE B. RADAN	2. TELEPHONE NUMBER 212 264-1576	3. DATE (mo., day, & yr.) 11/20/80

Section 7

7. SITE DATA

7.1 SITE AREA SURFACE FEATURES

The building where the seven barrels of waste oil are housed is located alongside Mill Street in Lockport, New York. The property slopes steeply from Mill Street to the south, so that the basement of the building, which is below grade on Mill Street, is at grade at the rear of the property. The subject waste oil is stored in the basement of this very large, rehabilitated paper mill. The property continues to slope steeply in the back to a small, meandering tributary of Eighteen Mile Creek. The southern border of the property, including the creek, has been strewn with construction debris and some municipal garbage by "midnight dumpers." It is the intention of the property owner to fill and level the land between the basement of the old Flintkote building and the creek; at the same time, he is retrofitting the structure for its new use as a machine shop. Land use is commercial and residential on all sides of the property.

7.2 SITE HYDROGEOLOGY

The site lies on the Ontario Lake Plain in the Eastern Lake Section of the Central Lowland Physiographic Province. Bedrock appears to be shallow, and is probably the middle Devonian age Rochester shale. The shallow ground water flow path from the site is southward and to Eighteen Mile Creek.

7.3 SUMMARY OF PAST SAMPLING AND ANALYSIS

Ground Water

No data are known to exist.

Surface Water

No data are known to exist.

Air

No data are known to exist.

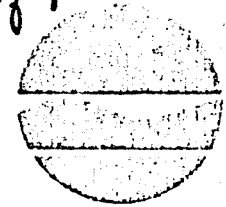
Soil

No data are known to exist.

Other

Samples of an oil thought to contain PCB have been taken from seven (7) drums of oil that are stored at this site in a basement of a building. Two samples analyzed in 1979 by Erie County Laboratory were reported to contain 2.4 percent of PCB, Arochlor 1254 (Attachment 7.3-1). Recent analyses of oil samples from each of the barrels indicate that none of the oil contains more than 2 ppm total PCB (Attachment 7.3-2).

New York State Department of Environmental Conservation
584 Delaware Avenue, Buffalo, NY 14202



~~XXXXXXXXXXXX~~
Commissioner
Robert F. Flacke

March 13, 1979

Thomas Carter Trucking and Excavating
4487 Ridge Road
Lockport, NY 14094

RE: Flintkote Property
Lockport (T), Niagara County

Dear Mr. Carter:

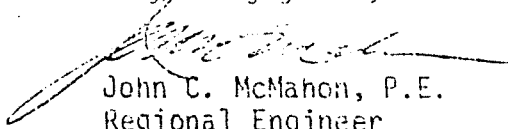
The old Flintkote property under your ownership was inspected on March 7, 1979 by representatives of the City of Lockport, Niagara County Health Department and this office regarding the storage of transformer oil on the property. Two samples analyzed by the Erie County Laboratory indicated that the transformer oil contains 2.4% of the polychlorinated biphenyl (PCB), Arochlor 1254. The inspection indicated that there are seven (7) 55 gallon drums of this oil on site plus one empty drum. It is to be expected that the contents of the empty drum has leaked into the floor drainage system under the drum.

As discussed at the time of the inspection, the storage of the PCB containing transformer oil does not conform with the US Environmental Protection Agency's (EPA) requirements. Pages 7161-7163, of the Federal Register outlining the requirement is attached.

The company shall submit, to this office, by March 21, 1979, an approvable program for the disposal of the transformer oil in storage on the premises. The clean-up of areas of spillage, including the floor drainage system and transformer room shall be included in the program, along with a timetable for implementing the same.

If you have any questions, please contact Paul Foersch at 842-5041.

Very truly yours,


John C. McMahon, P.E.
Regional Engineer
Water and Solid Waste Program

PEF:amw

ATTACHMENT
7.3-2
page 1 of 2

To: 208
ENVIRONMENTAL
ENGINEERING
A division of RCI

4 Butternut Drive • East Syracuse, New York 13057 • (315) 446-8795 • Telex 937458 RCI-NSD ESYR

RECEIVED

MAR 21 1983

March 18, 1983

Mr. William P. Swick
Power Services, Inc.
2401 Grant Blvd.
Syracuse, N.Y. 13208

Dear Mr. Swick:

The laboratory results of the sample(s) received on 3/15/83
are enclosed.

All laboratory procedures are performed according to standard
methodologies.

If you have any questions, please do not hesitate to contact
the writer.

Very truly yours,

ENVIRONMENTAL ENGINEERING

A Division of RCI

Briant R. Oblad

Briant R. Oblad
Vice President

Enc.

cc: File 101
File 1100

3-25-83
RECEIVED

ENVIRONMENTAL ENGINEERING

Division of RCI

CLIENT: Power Services, Inc.

PCB Analysis of Oils

JOB NO. E-807 PG 1 OF 1
 DATE TAKEN: Not Given
 DATE RECEIVED: 3/15/83

Ee # SAMPLE IDENTIFICATION

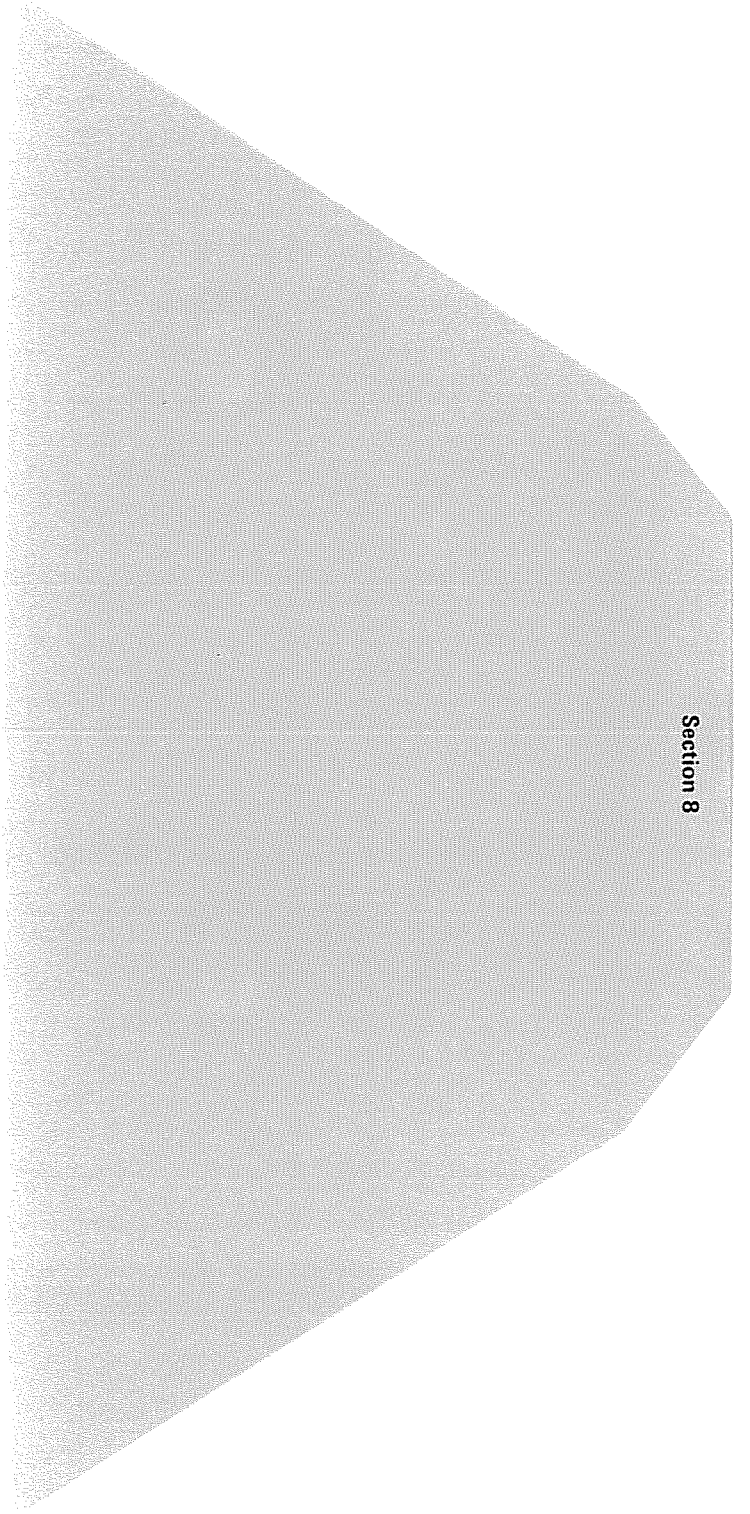
Ee #	SAMPLE IDENTIFICATION	AROCHLORS								TOTAL PCBs	
		1016	1221	1232	1242	1248	1254	1260			
3900	Drum #3										<2
3901	Drum #4										<2
3902	Drum #5										<2
3903	Drum #6										<2
3904	Drum #7										<2
3905	Drum #8										<2
3906	Drum #9										<2

ALL RESULTS ARE REPORTED AS ppm UNLESS OTHERWISE STATED.

The test results and procedures utilized and laboratory interpretations of the data obtained by ENVIRONMENTAL ENGINEERING, as contained in this report are believed by ENVIRONMENTAL ENGINEERING to be accurate and reliable for the samples tested.

In accepting this report, the customer agrees that the full extent of any and all liability for both actual and/or consequential damages of ENVIRONMENTAL ENGINEERING for the services performed shall be a sum equal to the fee charged to the customer for the services as liquidated damages.

SIGNED: Brian R. Oblad
 Brian R. Oblad, Vice Pres.
 DATE: March 18, 1983



Section 8

8. ADEQUACY OF AVAILABLE DATA TO PREPARE FINAL HRS

The available data are adequate to prepare a final HRS.

9. PHASE II WORK PLAN

No additional investigations of the Flintkote site under this program are warranted on the basis of the available data.

APPENDIX

HAZARDOUS WASTE DISPOSAL SITES REPORT,
NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

HAZARDOUS WASTE DISPOSAL SITES REPORT
NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

Code: _____

Site Code: _____

Name of Site: FlintKote Site Region: 9

County: Niagara Town/City: Lockport

Street Address: Mill Street and Clinton Street, Lockport

Status of Site Narrative:

Site is a machine shop with enclosed PCB waste oil storage area

Type of Site:	Open Dump <input type="checkbox"/>	Treatment Pond(s) <input type="checkbox"/>	Number of Ponds _____
	Landfill <input type="checkbox"/>	Lagoon(s) <input type="checkbox"/>	Number of Lagoons _____
	Structure <input type="checkbox"/>		

Estimated Size _____ Acres

Hazardous Wastes Disposed? Confirmed Suspected stored

*Type and Quantity of Hazardous Wastes:

TYPE	QUANTITY (Pounds, drums, tons, gallons)
<u>PCB waste oils</u>	<u>7 drums</u>
_____	_____
_____	_____
_____	_____
_____	_____

* Use additional sheets if more space is needed.

Name of Current Owner of Site: Thomas Carter Trucking
Address of Current Owner of Site: 4487 Ridge Road, Lockport, N.Y. 14094

Time Period Site Was Used for Hazardous Waste Disposal:
_____, 19 ____ To _____, 19 ____

Is site Active Inactive
(Site is inactive if hazardous wastes were disposed of at this site and site was closed prior to August 25, 1979)

Types of Samples: Air Groundwater None
Surface Water Soil

Remedial Action: Proposed Under Design
In Progress Completed
Nature of Action:

Status of Legal Action: _____ State Federal

Permits Issued: Federal Local Government SPDES
Solid Waste Mined Land Wetlands Other

X Assessment of Environmental Problems:

No apparent environmental problems. Drums are stored, intact on concrete pad.

Assessment of Health Problems:

X Persons Completing this Form:

Ecological Analysts, Inc _____

for: _____
New York State Department of Environmental Conservation

New York State Department of Health

Date 6/15/83