

Baker

Baker Environmental, Inc.
Airport Office Park, Building 3
420 Rouser Road
Coraopolis, Pennsylvania 15108

(412) 269-6000
FAX (412) 269-2002

February 4, 1994

Commander Atlantic Division
Naval Facilities Engineering Command
1510 Gilbert Street (Building N-26)
Norfolk, Virginia 23511-6299

Attn: Ms. Linda Berry, P.E.
Code 1823

Re: Contract N62470-89-D-4814
Navy CLEAN, District III
Contract Task Order (CTO) 0003
Lot 140 IDW Removal
MCB Camp Lejeune, North Carolina

Dear Ms. Berry:

This letter report describes a summary of investigative-derived waste (IDW) disposal activities at Lot 140 and at Sites 3, 7, 43, 44, 54, 63, 80, 82, and 86, Marine Corps Base, Camp Lejeune, North Carolina. The IDW was contained in 55-gallon drums that were generated during the period of 1991 to 1992 by various contractors under contract with the Department of Navy/Marine Corps. The characterization and disposal of the IDW was performed in accordance with the Scope of Work, dated February 28, 1992, for Contract Task Order (CTO) 0003.

The primary objective of this task was to adequately characterize the contents of 206, 55-gallon drums as to RCRA hazardous or nonhazardous characteristics for the purpose of determining appropriate removal/disposal requirements.

In a letter dated September 2, 1993, Baker Environmental provided the sample collection, analytical findings, conclusions and recommendations with respect to the IDW handling and disposal. The recommendations were subsequently approved by the Navy/Marine Corps. The remainder of this letter report provides a summary of the disposal activities conducted under this CTO.

DISPOSAL

Based on LANDTIV/MCB Camp Lejeune approval, Baker arranged for a subcontractor to dispose of 206 drums of IDW. This work was conducted during the week of October 11, 1993. Of the 206 drums, 168 drums of solid material, found to be noncontaminated and RCRA nonhazardous, were transported to Lot 203 and disposed of. The drums which were used to contain these soils were removed from MCB Camp Lejeune by Four Seasons, Environmental, Inc. (the IDW subcontractor) for reconditioning or disposal. The remaining 38 drums (8 aqueous IDW and 30 solid IDW) were disposed of at an offsite



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treatment, storage, and disposal facility (TSDF). Aqueous IDW generated from Site 82 exhibited trichloroethylene and low levels of PCB contamination; therefore, these aqueous IDW were removed from MCB Camp Lejeune for disposal at Four Season Environmental, Inc., in Greensboro, North Carolina. Solid IDW generated from Sites 7, 80, 82, and 86 exhibited levels of PCB and TPH contamination. The detected contamination levels for the IDW required disposal at an offsite permitted landfill. PCB contaminated soil was disposed of at ECOFLO, Inc., in Greensboro, North Carolina. TPH contaminated soil was disposed of at Laidlaw Environmental Services landfill in Pinewood, North Carolina. Copies of the hazardous and nonhazardous waste manifests are provided in Attachment A.

If you have any questions, please do not hesitate to call me at (412) 269-2016.

Sincerely,

BAKER ENVIRONMENTAL, INC.



Raymond P. Wattras
Project Manager

Attachments
RPW/MDB/jkc

cc: Mr. Neal Paul
Ms. Lee Ann Rapp (w/o attachments)
Ms. Beth Hacic (w/o attachments)

Attachment A
Hazardous and Nonhazardous Waste Manifests

NORTH CAROLINA HAZARDOUS WASTE MANIFEST

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. N C 6 1 7 0 0 2 2 5 6 0		Manifest Document No.	2. Page 1 of 1		Information in the shaded areas is not required by Federal law.			
3. Generator's Name and Mailing Address Attn: Neal Paul MCB-Camp Lejeune IR Div. EMD Bldg. 67 MCB Camp Lejeune, NC 28542		6. US EPA ID Number		4. Special Handling Instructions		5. Hazardous Waste Identification Number		6. Hazardous Waste Description		
4. Generator's Phone (719) 441-5063		7. Transporter 1 Company Name Four Seasons Environmental, Inc.								
5. Transporter 1 Company Name		8. US EPA ID Number		7. Transporter 2 Company Name		8. US EPA ID Number		7. Facility Name and Site Address		
9. Designated Facility Name and Site Address ECOFLO 2750 Patterson Street Greensboro, NC 27407		10. US EPA ID Number		9. Designated Facility Name and Site Address ECOFLO 2750 Patterson Street Greensboro, NC 27407		10. US EPA ID Number				
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		13. Total Quantity		14. Unit Wt/Vol				
GENERATOR	a. Soil With PCB		17 D M		3540		P			
	b.									
	c.									
	d.									
15. Special Handling Instructions and Additional Information Bill to: FSEI P.O. Box 16590 Greensboro, NC 27416		FSEI Job#: 93-50260 24 HR Emergency #: 919-273-2718 HM Guide #:								
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.										
Printed/Typed Name		Signature				Month Day Year				
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials		Signature				Month Day Year			
	Printed/Typed Name		Signature				Month Day Year			
	18. Transporter 2 Acknowledgement of Receipt of Materials		Signature				Month Day Year			
Printed/Typed Name		Signature				Month Day Year				
19. Discrepancy Indication Space										
FACILITY	20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.									
	Printed/Typed Name		Signature				Month Day Year			

EPA Form 8700-22 (Rev. 11-88) Previous editions are obsolete.

INSTRUCTIONS ON BACK SHEET



FOUR SEASONS INDUSTRIAL SERVICES, INC.

Post Office Box 16590
Greensboro, North Carolina 27416
(919) 273-2718

№ 8512

NON-HAZARDOUS WASTE MANIFEST

Manifest # _____ F.S.I.S. JOB # 93-50260 Date: 10-12-93

Generator: MCB-Camp Lejeune Phone No.: _____

IR Div. BMD Bldg. 67 EPA ID No.: NC6170022580

MCB Camp Lejeune, NC 28542 Contact: Neal Paul

Process which generated waste: Wall installation

I certify that the materials described below are properly described, classified, packaged, marked & labeled, and are in proper condition to be transported in commerce under the applicable regulations of the State, the Environmental Protection Agency and the Department of Transportation. I certify that the waste described below is non-hazardous. I certify that the specific waste was delivered to the carrier named below for legal treatment, storage, or disposal at the site indicated.

Date 10/12/93 Signature _____

Description of waste	Circle Form	Quantity	Circle Units	Container	
				No.	Type
Petroleum contaminated soil	Solid Liquid Gas Sludge	55	Gallons Cu. Yds. Pounds Tons	23	DM

Transporter: Four Seasons Environmental, Inc. Unit Number(s) _____

3107 S. Elm-Eugene Street Phone No.: 919-273-2718

Greensboro, NC 27406 EPA ID No.: NCD991277732

Vehicle License Tag Number(s) _____ Container: _____

I certify that the specified waste was transferred in a registered (licensed) vehicle to the disposal treatment, storage, or disposal facility named below and was accepted.

Pick-up Driver's Signature _____ Date _____ Delivering Driver's Signature _____ Date _____

Facility: Four Seasons Environmental, Inc. Phone No. 919-273-2718

519 Patton Avenue

Greensboro, NC 27406 Contact: Eric McManus

Handling Method: Stabilization - secured landfill

I certify that the transporter above delivered the specified material to this TSD facility and was accepted and properly handled in the above manner. We are authorized and qualified by the State of _____ to handle this material.

Date _____ Signature: _____

ORIGINAL - Destination Facility _____ COPY 1 - Driver's Carrier _____ COPY 2 - Transporter's Office _____ COPY 3 - _____

