WYOMING DEPARTMENT OF ENVIRONMENTAL QUALITY SOLID AND HAZARDOUS WASTE DIVISION

1135-1141

NOTICE OF INSPECTION

Pageura C									Revised 11/9
Wyoming S	onservation and Rec	d Pagulotions (NCRA)	Wyoming Haz	zardous W	aste Rules an	d Reg	gulations (WHWRR), as amende	d	
	olid Waste Rules and lazardous Waste Per								
(CARTERONSONLO 5.1 3.2-	olid Waste Permit D	A CONTROL OF CONTROL O			fied and/or an nd/or amende		ed.		
Date	Inspector	Time IN	Time OUT				EDATE 4	- 611	(T) 0
11/14/2016	Charles	1000	1145	RCKA	Transp.	() () ()	EPA LD.#	24	V File #
Fac. Func.	Insp. Type	Announce		SW:	Municipal Industrial	(A) ()	Facility Name:		
Facility Representat	ive(c):		Title:	Other_	- Contracts	_	Hopper Metals Street Address:		
	Dimide		Tille.				PO BOX 273		
Michael D. Dimide Tup 384RNG 094WSECZ7 TRNENE							MEDIENISTIST. 483 Bonneville Rd		
Phone # (801) (Fax # ()				City: Shoslone	State WY	Zip 826 49
photograp Follow-up Other (Sp Complain	ohs o inspection to confi	m return to compl	iance				equire the collection of samples,		
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2.					the street to the street to				
3.									
4.									
Samples requested a If yes: ()	nd received by facili Duplicate () Sp		() No notos (To be rec	eived who	en processed)			•	
This inspection has r	evealed the followin					facili	ħv.		
11/2 Complains 11/3 Viewed a 1/14 Confamily Cardbound h	Hypen metals I photo docu Still Brooddown still Broods unled to from	depuis gan nebed burn tosse over for station.	hoge wo me is of was 1000 times MSW Ban	to but (ms	i at you in) at p. fe balu shookoni	dis on.	stostone netals gard wish ed taken to ladjell (s Lysite, some wi Ravido taniera co coserio me	hostone hostone) hostone tim ne sold t	Colledmire obmis
Fhe results of this instrumental tompliance with applications of this Notice and constitute agreem	cable regulations wi review. of Inspection is ack	ll be made followir	ng this review.	Any supp	zardous Wast orting docume yof Jedd Insp Juna Inspector(s)	entatio	ision. A final determination of y on requested must be received w	our facility's ithin 30 days	to be
Signature of facility r	epresentative)								