



County JOHNSON

OFFICE OF LAND QUALITY
HAZARDOUS WASTE HANDLER IDENTIFICATION FORM: ID FORM

Information on file as of : 2/26/2015

Instructions at www.in.gov/idem/5027.htm**RCRA ID** **NAME** **Changes needed**

IND006414783 PILKINGTON NORTH AMERICA INCORPORATED

LOCATION ADDRESS **Changes needed**

1001 HURRICANE ST

*If you move you may
not use your old RCRA ID.
You must apply for a new
ID# for the new location*

FRANKLIN IN 46131

Land type for facility location P P-private M-municipal C-county S-state
F-federal D-district I-Indian O-Other

We moved _____ Post Office change _____

HAZARDOUS WASTE GENERATOR ACTIVITY**OLQ records**

Small Quantity Generator (SQG)

Highest Status in 2014 (mark one)

- ☐ LQG at least one month
☒ SQG at least one month
☐ CESQG at least one month
☐ did not generate haz waste all year
☐ generated but did not ship in 2014

Current Generator Status (mark one)

- ☐ LQG
☒ SQG
☐ CESQG
☐ no longer generate hazardous waste

If you mark that you are not generating haz waste, the ID# number is no longer valid and you must renotify before using it again.

CONTACT FOR HAZARDOUS WASTE ACTIVITIES **Changes needed**GARY CONNOR
EHS MANAGER
1001 HURRICANE ST

FRANKLIN IN 46131

Phone 317-401-0010 ext:

fax:

e-mail: GARY.CONNOR@NSG.COM

CONTACT FOR ANNUAL/BIENNIAL REPORT QUESTIONS (if different from above contact)

Last Name CONNOR First Name GARY Title EHS GROUP LEADER
E-mail address GARY.CONNOR@NSG.COM Phone # 317-401-0039

CERTIFICATION

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to ensure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete.

Last Name SPENCER First name ED Title PLANT MANAGER
E-mail address ED.SPENCER@NSG.COM Phone # 317-392-7000
Signature [Signature] Date 2-27-2015

IND006414783 PILKINGTON NORTH AMERICA INCORPORATED

HW FEES CONTACT (for LQGs) Fee invoices will be sent to this address

Changes needed

BUSINESS OWNER (P-private M-municipal C-county S-state F-federal D-district I-Indian O-Other)

Changes needed

PILKINGTON NIPPON SHEET GLASS
 811 MADISON AVE
 PO BOX 799
 TOLEDO OH 43697-0799
 EMAIL

Phone: 419-247-3731
 Owner type: P
 Did the owner change? yes no
 Effective: 02/01/2012 Expiration:

PROPERTY OWNER (if different from above)

Changes needed

NAICS CODES (go to www.naics.com to find a list)

Current codes 327215 3221 3272

OTHER HAZARDOUS WASTE ACTIVITIES

☐ BIF: smelting, melting, refining exemption
☐ BIF: small quantity on site burner exemption

Transporter: _____
☐ We no longer are a transporter
TSD Facility: _____

☐ US Importer of Hazardous Waste
☐ Mixed Waste Generator (hazardous and radioactive)

Waste codes (list top 4)
 F003 F005
 D001

USED OIL ACTIVITIES

If you are just a generator of used oil this section does not apply to you.

Processor: _____ Transporter: _____
 Rerefiner: _____ Transfer facility: _____
☐ Off-spec used oil burner
☐ Marketer who directs shipment to off-spec burner
☐ Marketer who first claims oil meets specs

UNIVERSAL WASTE ACTIVITY

Large handler: accumulates > or = 11,000 pounds
 Batteries: _____ manage Thermostats _____ manage
 Pesticides: _____ manage Lamps _____ manage
 Other: _____ manage
 Specify other _____
 UW destination facility _____
 UW transporter _____

TRANSFER FACILITY

Current activities

Changes Needed: ☐ Mix ☐ Comingle
☐ Bulk ☐ Repackage
☐ Pump ☐ Open containers
☐ Combine ☐ Transfer between vehicles

COMMENTS

Return to:
 Regulatory Reporting Section
 IDEM Office of Land Quality
 100 North Senate Avenue, Room 1101
 Indianapolis, IN 46204-2251
 olqregulatoryreporting@idem.in.gov