

NOTIFIER DATABASE INFORMATION UPDATE FORM

EPA ID	[AD184894628]	NAME DOSCUERA	alicing Syptems
	Review the attached information that is information. IF THE NOT MAKE ANY CHANGES.	different from LOCATION ADDRESS IS Return the form to Ma	OUT CUTTENT DO
NEW NAME	Bosch auton (put old name into a	notive Chaosio	
	ID		
LOCATION	ADDRESS		
MAILING A	ADDRESS		
CONTACT		PHONE	
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STATUS C	ODE l=active 2=reg unde	5-out-of-business 6-non-handler r other ID 3-dead mail	
SIC CODE	s		
GENERATO 1-LOG 2-SOG 3-CEG	TRANSPORTER s=for our wast c=commercially x=don't know	•	_
COMMENT	s		
NAME	Mainlyn Hanse	DATE	7/18/02



INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

We make Indiana a cleaner, healthier place to live.

Frank O'Bannon Governor

Lori F. Kaplan Commissioner

100 North Senate Avenue P.O. Box 6015 Indianapolis, Indiana 46206-6015 (317) 232-8603 (800) 451-6027 www.in.gov/idem

July 18, 2002

Mr. Mark Walker Leader, Health, Safety & Environmental **Bosch Automotive Chassis** 401 N. Bendix Dr. South Bend, IN 46628

Dear Mr. Walker:

Re: EPA ID Number: IND984874628 Location: Bosch Automotive Chassis 2721 W. Kenwood South Bend, IN 46628

In response to your Hazardous Waste Handler Identification form dated March 1, 2002, the following information has been updated regarding the above-mentioned facility:

> Installation Owner: Robert Bosch

> Installation Name: Bosch Automotive Chassis

Enclosed is a new ID form that reflects the above changes. If anything on the form is incorrect, please indicate the changes and return the form to me. If everything is correct, you may keep the ID form for submitting changes in the future.

Please note that pursuant to IC 13-22-4-3.1, an Annual Manifest Report must be submitted to the Indiana Department of Environmental Management (IDEM), on forms provided by IDEM, beginning March 1, 2002 for all small quantity generators, large quantity generators, and treatment, storage, and disposal (TSD) facilities. The Annual Manifest Report will summarize a company's hazardous waste manifest shipments sent and/or received. Small quantity generators are required to submit the Annual Manifest Report by March 1st of each year. Large quantity generators and TSD facilities must submit the Annual Manifest Report for even-numbered years and the Biennial Report for odd-numbered years. Please review the enclosed "Fact Sheet on Annual Manifest and Biennial Waste Reports" for clarification on the reporting schedule.

If you have any questions or need further assistance, please contact me at 317-232-7956.

Sincerely,

Marilyn J Hansen, Environmental Manager

Facility Data Analysis Section

Office of Land Quality

Enclosures

ECEIVED



OFFICE OF LAND QUALITY HAZARDOUS WASTE HANDLER IDENTIFICATION

ID FORM MAR 0 7 2002

	INFORMATION ON FILE as of 10/26/2001	CHANGES NEEDED (please print)
COUNTY	ST JOSEPH	Reason for submittalSubsequent notification to update information
RCRA ID	IND984874628	As a component of the annual or biennial reportAs a component of the annual operation fees
NAME	BOSCH BRAKING SYSTEMS	BOSCH AUTOMOTIVE CHASSIS
LOCATION	2721 W KENWOOD	
ADDRESS	SOUTH BEND IN 46628	we moved *post office change
MAILING	401 N BENDIX DR	
ADDRESS	SOUTH BEND IN 46628	
CONTACT Title Address	MARK WALKER LEADER HS&E 401 N BENDIX DR	
	SOUTH BEND IN 46628	
Phone Fax	219-237-5688 Ext	
E-mail		
OWNER Address	BOS CH BRAKING SYSTEMS C ORP 4 01 N BENDIX DR	Robert Bosch 2800 S. 25th Ave Broadview, II 4 60155-4594
	S OUTH BEN D IN 46628	Broadview # 4 60155-4599
phone	21 <u>9-237-2480</u> Ext	
fax e-mail		Did the owner change?YesNo Date changed:/
Land type	P (See instructions for codes)	* WARNING
Owner type	Р	If you have moved you may no longer use your old RCRA ID number. IDEM will issue a number for your new location.
Contact for questions on Annual/Bienni	the Last Name WALKER al report Title Leader-Health, Safetz + Envi	ronnental Phone # 219 237 5688
designed to en	sure that qualified personnel properly gather and evaluate the ir	pared under my direction or supervision in accordance with a system information submitted. Based on my inquiry of the person or persons who formation, the information submitted is, to the best of my knowledge and

belief, true, accurate and complete. I am aware that there are significant penalties under Section 3008 of the Resource Conservation and Recovery Act for submitting false information, including the possibility of fine and imprisonment for knowing violations."

Last Name	WALKER	First name MARK	Title Leader - H StE
Signature	Markelala		Date 3/1/07

IND984874628

BOSCH BRAKING SYSTEMS

HAZARDOUS WASTE ACTIVITY	OLQ records	Current status	Previous (report) year status When ID form is sent with fees or report
GENERATOR LQG = large quantity SQG = small quantity CESQG = conditionally exempt	sqg	LQGNon-handler *CEGOut of Business*	LQGNon-handler* CEGOut of Business*
TREATMENT, STORAGE, DISPOSAL FACILITY	,	Active TSD Inactive TSD Completed RCRA closure Post closure activities	Active TSD Inactive TSD Completed RCRA closure Post closure activities
TRANSPORTER S = we transport our own waste C = we transport waste for others X = transporter, status unknown		We transport our own waste (S) We transport for others (C)No longer transport; still in businessOut of business	* If you have checked out of business or non-handler, we will deactivate your RCRA ID number. You must re-notify IDEM before
EXEMPT BOILER and/or INDUSTRIAL FURNACE smelting,melting,refining exemption small quantity on site burner exemption	<u> </u>	smelting,melting,refining exemption small quantity on site exemption	you may reuse the number.
USED OIL Transporter Transfer Facility Collection Ctr	Processo Re-refine		
UNIVERSAL WASTE L = large handler S = small handler		ixCombinePump ulkComingleRepackage	Open containers Transfer between vehicles
NAICS CODES 33631 (primary) HW CODES		(See instruc	ctions for NAICS and HW codes)
COMMENTS			

County St. Jay

NOTIFIER DATABASE INFORMATION UPDATE FORM

EPA ID	ND 98487	4028	NAME _	Bosch Ba	aking System
	information information.	IF THE I	differ OCATION	ent from ADDRESS IS	change and our current our cur
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LOCATION AL	ODRESS				
MAILING ADD	DRESS				
CONTACT				PHONE	
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STATUS CODE OFFICIAL FL		l-ective 5-0 2-reg under ot	ut-of-busines her (D. 3-dea	s 6-non-handler d metl	
SIC CODES _					
GENERATOR 1-LOG 2-SOG 3-CEG	c	ANSPORTER		TSD	
COMMENTS					
IAME	Janlyn F	Lansen		DATE	4/20/98

BOSCH BRAKING SYSTEMS



BOSCH

Telephone: (219) 654-2400 Facsimile: (219) 654-8755

32104 State Road 2 New Carlisle, IN 46552-9605

April 9, 1998

Ms. Marilyn Hansen IDEM, Hazardous Waste Compliance Branch 100 North Senate Avenue P.O. Box 6015 Indianapolis, IN 46206-6015

2721 W Klaweal South Bend In

Dear Marilyn:

This letter is to inform you that on January 1, 1998 Bosch Braking Systems Corporation was merged with Robert Bosch Corporation. This makes Bosch Braking Systems a division of Robert Bosch rather than a subsidiary. The legal name is now Bosch Braking Systems (dropping the "Corporation"). The Bosch Automotive Proving Grounds, EPA I.D. Number is IND984874628, is part of Bosch Braking Systems. The last "Notification of Regulated Waste Activity" form submitted 6/96, for the Bosch Automotive Proving Grounds, listed Bosch Braking Systems Corporation as Owner.

I spoke with Ms. Jenny Dooley in your office and she indicated that this letter could serve as notification and that it was not necessary to submit a new "Notification of Regulated Waste Activity" form because this is not a change of ownership.

If you have any questions, contact me at 219-237-5688.

Sincerely,

Mark Walker

Leader - Health, Safety, & Environmental Quality

RECEIVED

APR 1 7 1998

DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

BOSCH BRAKING SYSTEMS



BOSCH

Telephone: (219) 237-2100

401 North Bendix Drive South Bend, Indiana 46628

Mailing Address: P.O. Box 4001 South Bend, IN 46634-4001

April 9, 1998

Ms. Marilyn Hansen IDEM, Hazardous Waste Compliance Branch 100 North Senate Avenue P.O. Box 6015 Indianapolis, IN 46206-6015

Dear Marilyn:

This letter is to inform you that on January 1, 1998 Bosch Braking Systems Corporation was merged with Robert Bosch Corporation. This makes Bosch Braking Systems a division of Robert Bosch rather than a subsidiary. The legal name is now Bosch Braking Systems (dropping the "Corporation"). Our EPA I.D. Number is IND984874628.

I spoke with Ms. Jenny Dooley in your office and she indicated that this letter could serve as notification and that it was not necessary to submit a new "Notification of Regulated Waste Activity" form because this is not a change of ownership.

If you have any questions, contact me at 219-237-5688.

Sincerely,

Mark Walker

Markel Wall

Leader - Health, Safety, & Environmental Quality





Indiana Department of Environmental Management

We make Indiana a cleaner, healthier place to live

Frank O'Bannon
Governor
Lake M. Hamilton

John M. Hamilton Commissioner 100 North Senate Avenue P.O. Box 6015 Indianapolis, Indiana 46206-6015 Telephone 317-232-8603 Environmental Helpline 1-800-451-6027

April 20, 1998

Mr. Mark Walker Leader - Health, Safety & Environmental Quality Bosch Braking Systems 401 N. Bendix Drive South Bend, Indiana 46628

Dear Mr. Walker:

Re: U.S. EPA ID Number IND984874628 Location: 2721 W. Kenwood South Bend, Indiana

In response to your letter dated April 9, 1998, the following information has been updated:

Name of Installation: Bosch Braking Systems

If you have any questions or need further assistance, please contact me at 317-232-7956.

Sincerely,

Marilyn J. Hansen, Environmental Manager

Waste Data Analysis and Planning

Operations Branch

Solid and Hazardous Waste Management

councy St Joseph

NOTIFIER DATABASE INFORMATION UPDATE FORM

EPA ID
Review the attached notification and change any information that is different from our current information. IF THE LOCATION ADDRESS IS DIFFERENT DO NOT MAKE ANY CHANGES. Return the form to Marilyn Hansen.
NEW NAME Bosch Bruking Systems Chrp (put old name into alias field)
PREVIOUS ID
LOCATION ADDRESS
MAILING ADDRESS
CONTACT Walker, Mark PHONE
LAND TYPE OWNER TYPE
STATUS CODE 1=active 5=out-of-business 6=non-handler OFFICIAL FL 2=reg under other ID 3=dead mail
SIC CODES
GENERATOR TRANSPORTER TSD 1=LQG s=for own waste 2=SQG c=commercially 3=CEG x=don't know
COMMENTS Owner: Bosch Bruking Systems Carp
NAME DIMINITATION DATE 4/14/96

United States Environmental Protection Agency

Form Approved, OMB No. 2050-0028 Expires 9-30-96 GSA No. 0246-EPA-OT

Flease refer to the *Instructions* for Filling Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



Notification of Regulated Waste Activity

(For Official Use Only)

Date Received

JUN 1 2 1996

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						ID - For C	official Us	e Only	
VIII. Type of Regulated Waste Activity (Mar	k 'X' in the	appropriati	boxes:	: Refer to	Instruc	tions)			
A. Hazardous Wa							i Oil Recy	cling Acti	vities
a. Greater than 1000kg/mo (2,200 lbs.) b. 100 to 1000 kg/mo (200-2,200 lbs.) c. Less than 100 kg/mo (220 lbs.) 2. Transporter (Indicate Mode in boxes 1-5 below) a. For own waste only b. For commercial purposes Mode of Transportation 1. Air 2. Rail 3. Highway 4. Water 5. Other - specify	Instruction Instru	eater, Sto stallation) quired for structions. zardous W Generator I Other Mark Boller and/o 1, Smelte 2, Small C dicate Typ vice(e) 1, Utility I 2, Industr derground	Note: / this a asta Fu Marketli eters or Indus r Deferr Duantity e of C Boiler ial Boll ial Furn Injectik	A permit ctivity; el ng to Bur trial Fum al Exempt Combust er esce on Contro	is i	a. Marke Oil to Oil to b. Marke Oil Me Used Oil Combust a. Utility b. Indus c. Indus used Oil of Activit a. Trans b. Trans	trial Boller trial Furnac Transporte ty(les) porter fer Facility Processor/ of Activity(les)	Shipment cation Bur rst Claims selfications indicate T (e)	ner the Used s ype(s) of e Type(s
A. Characteristics of Nonlisted Hazardous	Wastes	. (Mark 'X'	n the bo	xes corre		ng to the cl	naracteristic	s of	
nonlisted hazardous wastes your installation 1. Ignitable (D001) (D002) (D003) Cr	-1-12	(Ust specifi				er(s) for the T	oxicity charse	teristic conta	minant(s))
B. Listed Hazardous Wastes. (See 40 CFR 2	61.31 - 33;	See instruc	tions if	you need	to list n	nore than 1	2 waste cod	es.)	
1 2 F005 7 8 D039	3 			4 10 10		11:		12	
C. Other Wastes. (State or other wastes requi	ring a han	dier to have	an I.D.	number;	See ins	tructions.)	— ·		
				4		5		6	
X. Certification					41				ee with a
i certify under penalty of law that this document system designed to assure that qualified personn or persons who manage the system, or those per best of my knowledge and belief, true, accurate, a including the possibility of fine and imprisonme	el property sons direc nd comple	gather and d tly responsi te. I am awa	evaluate ble for g re that th	the information	nation s the infor	ubmitted. B mation, the	ased on my i information	inquiry of the submitted	is, to the
Signature	Name	and Offici	al Title	(Туре о	r print)			Signed	
Larry Busch ling	Vice-P	Buschl <u>residen</u>	t Eng	ineevi	ngt	Technolo	74 6-1	7-96	
XI. Comments									
FORMERLY KNOWN	AS	BEN	DIX	AUTO	DW(TIVE	SYST	EMS	-NF
Note: Mail completed form to the appropriate EP	A Regiona			See Section		he booklet	for address	es.)	

1991 HAZARDOUS WASTE HANDLER INFORMATION UPDATE

EPA ID, COUNTY

NAME, LOCATION ADDRESS, CONTACT

OWNER, MAILING ADDRESS, PHONE

7-7-92

IND984874628 ST JOSEPH BENDIX AUTOMOTIVE SYSTEMS NA

2721 W KENWOOD

SOUTH BEND IN 46634

TARNOWSKI DAVID MANAGER

ALLIED SIGNAL INC 401 NORTH BENDIX DR

SOUTH BEND 219-237-2272

IN 46634

TAMOUNT DIVID TEMPORAL	217 231-2212
HAZARDOUS WASTE ACTIVITIES:	
GENERATOR: SMALL QUANTITY TSD FACILITY: TRANSPORTER: AIR: RAIL: HWY: WATER:	HAZ WASTE FUEL: GMB: OM: BURNER: UTILITY-BOILER: USED OIL FUEL: GMB: OM: BURNER: INDUSTRIAL BOILER: SPEC USED OIL FUEL MKT: INDUSTRIAL FURNACE:
CHANGES TO ABOVE INFORMATION:	NEW INFORMATION REQUESTED:
Name:	Contact Address: same as location address
Is this also a change in ownership?	same as mailing address
Jation Address:	different
Did you move?	
Mailing Address:	· -
Contact/Phone:	Owners Address: same as location address
Ownership Change:	$oldsymbol{x}$ same as mailing address
Date of Change:	different
HAZARDOUS WASTE ACTIVITY: 1991 CURRENT (see instructions for definitions)	
TSD - treatment, storage, disposal	
LQG - large quantity generator	Owners Phone:
SQG - small quantity generator X X	Recyclers: We are a :(c) commercial recycler
CFG - conditionally exempt generator	(r) non-commercial recycler
nsporter (s) for our own waste	(n) not a recycler
(c) commercially	Type of Owner/Operator:(p) private(s) state
Non-handler (6) *	(f) federal(c) county
Out-of-business (5) *	(m) municipal(d) district
One time generator (6) *	(i) indian(o) other
* If you have checked any of these, we will deactivate your ID number and you will have to reapply for it if you need to use it again.	Type of Land:(p) private(s) state(c) county(f) federal
Comments:	(d) district(i) indian
	(m) municipal(o) other
Signature: Januar A January	SIC Codes: primary 37/4
Date: 2/25/92	secondary



Allied-Signal, Inc.
Bendix Automotive Systems
North America
401 N. Bendix Drive
P.O. Box 4001
South Bend, IN 46634-4001
Telephone (219) 237-2100



Mar 6 2 37 PM '92

OFFICE OF SOLID AND HAZARDOUS WASTE MGMT DEM

February 28, 1992

CERTIFIED MAIL

Ms. Jenny Ranck Dooley Indiana Department of Environmental Management Office of Solid and Hazardous Waste Management 105 S. Meridian Street P.O Box 6015 Indianapolis, Indiana 46206-6015

Dear Ms. Dooley:

As requested, enclosed please find completed 1991 Hazardous Waste Handler Information Updates for Allied-Signal Inc. facilities in South Bend and New Carlisle, Indiana. Both facilities are small quantity generators.

Please call Mark Walker (219-237-5688) or myself (219-237-2272) should you have any questions.

Sincerely.

David S. Tarnowski

Manager, Health, Safety and

Environmental Systems

Enclosures

cc: M. Walker

ARC7-16-92

Signature:

Date:

1991 HAZARDOUS WASTE HANDLER INFORMATION UPDATE

INFORMATION UPDATE EPA ID, COUNTY NAME, LOCATION ADDRESS, CONTACT OWNER, MAILING ADDRESS, PHONE IND984874628 BENDIX AUTOMOTIVE SYSTEMS NA ALLIED SIGNAL INC ST JOSEPH 2721 W KENWOOD 401 NORTH BENDIX DR SOUTH BEND IN 46634 SOUTH BEND IN 46634 TARNOWSKI DAVID MANAGER 219-237-2272 HAZARDOUS WASTE ACTIVITIES: GENERATOR: SMALL QUANTITY HAZ WASTE FUEL: GMB: OM: BURNER: TSD FACILITY: UTILITY-BOILER: USED OIL FUEL: GMB: OM: BURNER: TRANSPORTER: AIR: INDUSTRIAL BOILER: RAIL: HWY: WATER: SPEC USED OIL FUEL MKT: INDUSTRIAL FURNACE: CHANGES TO ABOVE INFORMATION: NEW INFORMATION REQUESTED: Name: _____ Contact Address: ____ same as location address Is this also a change in ownership? _____ same as mailing address Tocation Address: different _____ Did you move? Mailing Address: Contact/Phone: Owners Address: ____ same as location address Ownership Change: ______ same as mailing address Date of Change: ____ different ___ HAZARDOUS WASTE ACTIVITY: 1991 CURRENT (see instructions for definitions) TSD - treatment, storage, disposal Owners Phone: LQG - large quantity generator Recyclers: We are a : ____(c) commercial recycler SQG - small quantity generator _X_ X CEG - conditionally exempt generator ____(r) non-commercial recycler Transporter (s) for our own waste ____(n) not a recycler Type of Owner/Operator: ____(p) private (c) commercially ____(s) state Non-handler (6) * ____(f) federal ____(c) county Out-of-business (5) * ____(m) municipal ____(d) district One time generator (6) * ____(i) indian ____(o) other Type of Land: * If you have checked any of these, we will deactivate ____(p) private ____(s) state your ID number and you will have to reapply for it if you need to use it again. ____(c) county ____(f) federal ____(d) district Comments: ____(i) indian ____(m) municipal ____(o) other

3714

SIC Codes: primary

secondary

Tourn Approved OMB No 2050 0078 Expires 5 30 65 GSA No 0746 EPA C

Rease print or type with ELITE type 112 characters per inch) in the unshaded areas of	211.4				
United States Environmental Prot Washington, DC 2046		190	Please refer i	to the <i>Instructions I</i>	or Do
		^ / X	this form. The	information request	eā∣
SEPA Notification of Hazardous	: Waste Act	IVITY I	3010 of the R	ited by law (Section Personal	on
		,	and Recovery	Act).	
For Official Use Only					
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BENDIX AUTOMOITIVIEI S	YSTEMS -	- N A			
II. Installation Mailing Address	<u> </u>	· · · · ·			
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IV. Installation Contact					
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		C W		T/A C
X. Description of Hazardous Waste	s (continued from from			
A. Hazardous Wastes from Nonspecific Sou from nonspecific sources your installation	rces. Enter the four-digit nu	imber from 40 CFR Part 261 3	1 for each listed ha	zardous waste
		ets it necessary.		1
1 2		-		
F 0 0 3 F 0 0 5	5		1	
7 7	9	10	11	12
B. Hazardous Wastes from Specific Source:	. Enter the four-digit numb	er from 40 CFR Part 261 32 for	r each listed hazard	lous waste from
specific sources your installation handles.	Use additional sheets if nec	essary.		
13 14	15	16	17	18
19 20		22	23	24
	 			
25 26	. 27	28	29	30
C. Commercial Chemical Product Hazardou	s Wastes. Enter the four-di	git number from 40 CFR Part 2	61.33 for each che	mical substance
your installation handles which may be a !	nazardous waste. Use additii	onal sheets if necessary.		
31 32	33	34	35	36
U 0 0 2 U 0 8 0	U 1 5 1	U 1 5 4 U	1 5 9	U 1 6 5
37 38	39	40	41	42
U 2 2 0 U 2 3 9				
43 44	45	46	47	48
D. Listed Infectious Wastes. Enter the four-	digit number from 40 CFR P	en 261.34 for each hazardous	waste from hospits	ils, veterinary hos-
pitals, or medical and research laboratorie				
49 50	51	52	53	54
			1 1	
E. Characteristics of Nonlisted Hazardous	Vastes. Mark 'X' in the boxe	s corresponding to the charact	teristics of nonliste	d hazardous wastes
your installation handles. (See 40 CFR Par		-		
☐ 1. ignitable (DO01)	2. Corrosne (D002)	3. Reactive (D003)		4. Toxic (D000)
XI. Certification	* <i>j</i>			
I certify under penalty of law that this and all attached documents, obtaining the information, I believ there are significant penalties for	and that based on my e that the submitted in	inquiry of those individu formation is true, accurat	uals immediatel te, and complete	ly responsible for e.l. I am aware that
Signature / V		ficial Title (type or print)		Signed
		C. Schafer	7	nileles
I Rmus (. Jehuf	Group	/ice President		110/09
EPÁ Form 8700-12 (Rev. 11-85) Reverse				3/19/90 /Cf