

523 → CC 841516 - SDW  
file 813931



Bureau of Waste Management

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL RESOURCES  
Post Office Box 2063  
Harrisburg, Pennsylvania 17120

12-07-37

# Preliminary Assessment

FOR  
WESTINGHOUSE ELECTRIC CORP.  
PA #1489

City of Beaver  
Beaver County  
Pennsylvania

WPL 005 3820

132/ 6117006

**Operation:** From the site inspection and file review, the daily operations included metal cleaning with acidic and alkaline solutions and metal plating with various metals. The five tanks were used for storage until it could be treated by the waste water treatment plant onsite or the wastes were hauled away for proper disposal offsite.

**Ownership:** (Beaver County Recorder of Deeds) Westinghouse Electric Corporation  
Westinghouse Building  
Gateway Center  
Pittsburgh, PA 15222

**Waste Disposal:** All waste generated from the removed hazardous waste storage tanks was transported off-site to a permitted landfill.

**Site Inspection:** (10-21-87) The following observations were noted:

1. After cessation of operation, the tanks were emptied and removed.
2. Numerous borings were drilled around removed tanks to determine extent of contamination plume.
3. Monitoring wells installed and groundwater being sampled.
4. Ongoing pumping of contaminated groundwater from area. The water being treated by the facilities waste water treatment plant.
5. Soil under removed tanks was sampled and tested.

**Routes of Contamination:**

1. Possibility of contamination off site, depending on the migration of contaminated groundwater plume.

**Priority Assessment:**

1. Priority for site: None.
2. Rationale:
  - a. Tanks removed by Westinghouse.
  - b. Ground water being monitored and treated by the facility.
  - c. Environmental Consultant working on determining extent of contaminated ground water plume.
  - d. PA DER and Westinghouse Electric Corporation working on closure agreement.

**Sources:** Beaver County Recorder of Deeds  
Pennsylvania Department of Environmental Resources  
--Waste Management Files  
Environmental Consultant Reports

MPL 005 3821

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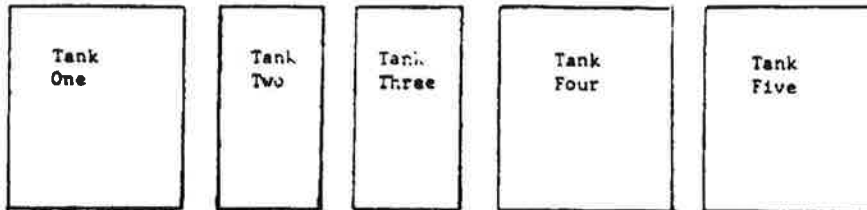
contact:

Westinghouse Electric Corporation (412) 773-1371  
Mr. Ted Kasper  
Supervisor, Environmental Engineering

PA Department of Environmental Resources  
Bureau of Waste Management  
John Maluszcak (412) 645-7100  
Mike Watson (412) 645-7100

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- Tank One - Spent Cyanide Plating bath solutions from electroplating operation (F007).  
Closed January, 1984.
- Tank Two - Cyanide Rinsewater  
Equalizer tank - 973 gallons capacity  
Closed August, 1984.
- Tank Three- Acid Rinsewater  
Equalizer tank - 1190 gallons capacity  
Closed August, 1984.
- Tank Four - Spent Acid stripping and cleaning bath solutions from electroplating where cyanides are used in the process (F009)  
2163 - Gallons capacity  
Closed January, 1984.
- Tank Five - Spent caustic stripping and cleaning bath solutions from electroplating operations where cyanides are used in the process. (F009) 2163 gallons capacity.  
Closed January, 1984.

WPL 005 3823

132/ 6117009

EPA		POTENTIAL HAZARDOUS WASTE SITE PRELIMINARY ASSESSMENT PART I - SITE INFORMATION AND ASSESSMENT			I. IDENTIFICATION 01 STATE OF SITE NUMBER PA 1489	
<b>II. SITE NAME AND LOCATION</b>						
01 SITE NAME (Name, address, or descriptive name of site) Westinghouse Electric Corporation				02 STREET ROUTE NO. OR SPECIFIC LOCATION IDENTIFIER One Tuscarawas Road		
03 CITY Beaver		04 STATE PA	05 ZIP CODE 15009	06 COUNTY Beaver	07 COUNTY CODE 04	08 CONG DIST 4
09 COORDINATES LATITUDE 40° 41' 20" 0		LONGITUDE 80° 19' 14" 0				
10 DIRECTIONS TO SITE (Starting from nearest major road) From Route 60 (Beaver Valley Expressway) take Route 68 East, approximately 1 mile turn left onto Walnut Lane. Go one block, then turn right onto Georgetown Lane. The Plant is located on the left side of the road.						
<b>III. RESPONSIBLE PARTIES</b>						
01 OWNER (if owner) Westinghouse Electric Corporation				02 STREET (Business name, if different) One Tuscarawas Road		
03 CITY Beaver		04 STATE PA	05 ZIP CODE 15009	06 TELEPHONE NUMBER 412 773-1785		
07 OPERATOR (if owner and operator are same) Same as owner				08 STREET (Business name, if different)		
09 CITY		10 STATE	11 ZIP CODE	12 TELEPHONE NUMBER		
13 TYPE OF OWNER (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 <input type="checkbox"/> G UNKNOWN						
14 OWNER OPERATOR NOTIFICATION ON FILE (Check one) <input type="checkbox"/> A RCRA 3001 DATE RECEIVED _____ <input type="checkbox"/> B UNCONTROLLED WASTE SITE (24 CFR 123) DATE RECEIVED 03 29 85 <input type="checkbox"/> C NONE						
<b>IV. CHARACTERIZATION OF POTENTIAL HAZARD</b>						
01 ON SITE INSPECTION <input checked="" type="checkbox"/> YES    DATE 10 21 87 <input type="checkbox"/> NO		02 BY (Type of inspector) <input type="checkbox"/> A EPA <input type="checkbox"/> B EPA CONTRACTOR <input checked="" type="checkbox"/> C STATE <input type="checkbox"/> D OTHER CONTRACTOR <input type="checkbox"/> E LOCAL HEALTH OFFICIAL <input type="checkbox"/> F OTHER				
03 CONTRACTOR NAME(S)		04 YEARS OF OPERATION <input type="checkbox"/> A ACTIVE <input checked="" type="checkbox"/> B INACTIVE <input type="checkbox"/> C UNKNOWN 1966    198-    UNKNOWN				
05 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT (Name or alleged) Ground water and soil contaminated with spent solutions from five leaking hazardous waste storage tanks. Ground water and soil tested shows high levels of silver and cyanide along with low PH.						
06 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION Movement of contaminated groundwater plume offsite.						
<b>V. PRIORITY ASSESSMENT</b>						
07 PRIORITY FOR INSPECTION (Check one) <input type="checkbox"/> A HIGH <input type="checkbox"/> B MEDIUM <input type="checkbox"/> C LOW <input checked="" type="checkbox"/> D NONE						
<b>VI. INFORMATION AVAILABLE FROM</b>						
01 CONTACT Jeffrey J. Jones		02 AGENCY Pennsylvania Dept. of Environmental Res			03 TELEPHONE NUMBER 412 844-2050	
04 PERSON RESPONSIBLE FOR ASSESSMENT Jeffrey J. Jones		05 ORGANIZATION EPA			06 TELEPHONE NUMBER 412 844-2050	

EPA FORM 2070 (12/78)

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132/ 6117010





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

I. IDENTIFICATION

01 STATE 02 SITE NUMBER  
PA 1489

II. HAZARDOUS CONDITIONS AND INCIDENTS

01  A GROUNDWATER CONTAMINATION 02  OBSERVED DATE 10/21/87  POTENTIAL  ALLEGED  
03 POPULATION POTENTIALLY AFFECTED Unknown 04 NARRATIVE DESCRIPTION

The contamination is of two types: high pH groundwater containing cyanide and metals, and low pH groundwater.

01  B SURFACE WATER CONTAMINATION 02  OBSERVED DATE 10/21/87  POTENTIAL  ALLEGED  
03 POPULATION POTENTIALLY AFFECTED Unknown 04 NARRATIVE DESCRIPTION

Movement of contamination through groundwater into surface water is a possibility.

01  C CONTAMINATION OF AIR 02  OBSERVED DATE \_\_\_\_\_  POTENTIAL  ALLEGED  
03 POPULATION POTENTIALLY AFFECTED \_\_\_\_\_ 04 NARRATIVE DESCRIPTION

None

01  D FIRE EXPLOSIVE CONDITIONS 02  OBSERVED DATE \_\_\_\_\_  POTENTIAL  ALLEGED  
03 POPULATION POTENTIALLY AFFECTED \_\_\_\_\_ 04 NARRATIVE DESCRIPTION

None

01  E DIRECT CONTACT 02  OBSERVED DATE \_\_\_\_\_  POTENTIAL  ALLEGED  
03 POPULATION POTENTIALLY AFFECTED \_\_\_\_\_ 04 NARRATIVE DESCRIPTION

None

01  F CONTAMINATION OF SOIL 02  OBSERVED DATE 10/21/87  POTENTIAL  ALLEGED  
03 AREA POTENTIALLY AFFECTED Unknown 04 NARRATIVE DESCRIPTION

Soils around excavated tanks are known to be contaminated.

01  G DRINKING WATER CONTAMINATION 02  OBSERVED DATE \_\_\_\_\_  POTENTIAL  ALLEGED  
03 POPULATION POTENTIALLY AFFECTED Unknown 04 NARRATIVE DESCRIPTION

No public wells affected.

01  H WORKER EXPOSURE/INJURY 02  OBSERVED DATE \_\_\_\_\_  POTENTIAL  ALLEGED  
03 WORKERS POTENTIALLY AFFECTED \_\_\_\_\_ 04 NARRATIVE DESCRIPTION

None

01  I POPULATION EXPOSURE/INJURY 02  OBSERVED DATE \_\_\_\_\_  POTENTIAL  ALLEGED  
03 POPULATION POTENTIALLY AFFECTED \_\_\_\_\_ 04 NARRATIVE DESCRIPTION

None



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

I IDENTIFICATION  
01 STATE 02 SITE NUMBER  
PA 1489

E. HAZARDOUS CONDITIONS AND INCIDENTS <small>(Continued)</small>		02 <input type="checkbox"/> OBSERVED (DATE _____)	<input type="checkbox"/> POTENTIAL	<input type="checkbox"/> ALLEGED
01 <input type="checkbox"/> J DAMAGE TO FLORA	04 NARRATIVE DESCRIPTION			
None				
01 <input type="checkbox"/> K DAMAGE TO FAUNA	04 NARRATIVE DESCRIPTION <small>(Include names of animals, birds, etc.)</small>	02 <input type="checkbox"/> OBSERVED (DATE _____)	<input type="checkbox"/> POTENTIAL	<input type="checkbox"/> ALLEGED
None				
01 <input type="checkbox"/> L CONTAMINATION OF FOOD CHAIN	04 NARRATIVE DESCRIPTION	02 <input type="checkbox"/> OBSERVED (DATE _____)	<input type="checkbox"/> POTENTIAL	<input type="checkbox"/> ALLEGED
None				
01 <input type="checkbox"/> M UNSTABLE CONTAINMENT OF WASTES <small>(Spills, leaks, leaking drums, leaking drums)</small>	03 POPULATION POTENTIALLY AFFECTED _____	04 NARRATIVE DESCRIPTION	02 <input type="checkbox"/> OBSERVED (DATE _____)	<input type="checkbox"/> POTENTIAL <input type="checkbox"/> ALLEGED
None				
01 <input type="checkbox"/> N DAMAGE TO OFF-SITE PROPERTY	04 NARRATIVE DESCRIPTION	02 <input type="checkbox"/> OBSERVED (DATE _____)	<input type="checkbox"/> POTENTIAL	<input type="checkbox"/> ALLEGED
None				
01 <input type="checkbox"/> O CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs	04 NARRATIVE DESCRIPTION	02 <input type="checkbox"/> OBSERVED (DATE _____)	<input type="checkbox"/> POTENTIAL	<input type="checkbox"/> ALLEGED
None				
01 <input type="checkbox"/> P ILLEGAL/UNAUTHORIZED DUMPING	04 NARRATIVE DESCRIPTION	02 <input type="checkbox"/> OBSERVED (DATE _____)	<input type="checkbox"/> POTENTIAL	<input type="checkbox"/> ALLEGED
None				
06 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS				
None				
II. TOTAL POPULATION POTENTIALLY AFFECTED: <u>Unknown</u>				
IV. COMMENTS				
Westinghouse Electric Corporation has drilled several shallow wells into the contaminated area. These wells are being pumped and the water treated on site.				
V. SOURCES OF INFORMATION <small>(List sources of information used in the assessment.)</small>				
PA DER Waste Management Files.				



FIELD TRIP SUMMARY REPORT

This summary should be prepared in conjunction with the Preliminary Assessment Form, (EPA Form T2070-2), so that a proper site rating can be assigned.

Name of Site Westinghouse Electric Corporation

EPA Case Number PA-1489

I. If site is active, has owner/operator notified EPA in accordance with Section 3010 of RCRA. Yes XX No \_\_\_\_\_

If Yes: a) Note EPA I.D. No. PAD 005000500

b) Is the site a generator, storer, treater or disposer of hazardous waste? (CIRCLE ONE).

II. If the answers submitted in Part VI (Hazard Description) of EPA Form T2070-2 or observations warrant a more thorough site investigation/sampling, please attach a sketch map showing those areas of concern. (i.e.: lagoons, leachate seeps, drum storage, monitoring wells, etc.).

III. Please list site contacts and accompanying inspectors; include name, title and phone numbers.

Jeffrey J. Jones Solid Waste Specialist (412) 846-2050

Ted J. Kaspar Supervisor Environmental Engineering (412) 773-1785

IV. Site observations: (attach a topo map).

A. Population within 1000 ft. of the site is (CHECK ONE)

1. 0-10 people ✓
2. 10-100 people
3. greater than 100 people

B. List surrounding land use: (woodlot, agricultural, playground, industrial, etc)

North: Industrial

South: Cemetery

East: Industrial

West: Industrial

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C. Water supply for area. (CHECK ONE)

- 1. Surface intakes (locate on attached map)
- 2. Municipal wells (locate on attached map)
- 3. Domestic wells:

- a. Approximate number within 1/4 mile. 0
- b. Locate a minimum of 3 wells on attached map and list below: N/A

Property owner \_\_\_\_\_

Address \_\_\_\_\_

Phone No. \_\_\_\_\_

Well records YES \_\_\_ NO \_\_\_ YES \_\_\_ NO \_\_\_ YES \_\_\_ NO \_\_\_

Odor problems YES \_\_\_ NO \_\_\_ YES \_\_\_ NO \_\_\_ YES \_\_\_ NO \_\_\_

Taste problems YES \_\_\_ NO \_\_\_ YES \_\_\_ NO \_\_\_ YES \_\_\_ NO \_\_\_

- c. If odor or taste problems are reported please elaborate: N/A

D. Are surface or subsurface, (leachate), drainage areas from site apparent? YES \_\_\_ NO XX. If yes:

- 1. Were unusual odors or stains noted? YES \_\_\_ NO \_\_\_
- 2. Was stressed vegetation noted? YES \_\_\_ NO \_\_\_

a. If yes please note area on map.

E. Are streams or receiving waters adjacent to site? YES XX NO \_\_\_  
If yes, list observations: (i.e.-change in benthic community, change in plant density/diversity, change in color, siltation, etc.).

Two Mile Run, a tributary to the Ohio River, runs adjacent to site in question. The stream bed and sides are cemented over. No evidence of leachate drainage noted.

F. Site topography: (i.e.-plateau, strip mine ravines, etc.). Flat

G. Other observations: (i.e.-erosion, located in flood plain, etc.).

The site lies adjacent to Two Mile Run separated by Georgetown Lane.

FIELD TRIP SUMMARY REPORT

Page 3

V. Were photographs taken? YES \_\_\_\_\_ NO XX  
If yes: Who has custody of photos?

Name: \_\_\_\_\_

Agency: \_\_\_\_\_

Phone No.: \_\_\_\_\_

VI. Is a hydrogeological survey for this site attached? YES \_\_\_\_\_ NO X  
If no, Section III D of EPA Form T2070-2 must be completed.

VII. Please attach pertinent copies of reports or data reviewed by inspector:  
(i.e.-State monitoring data, consultant reports, etc.).

VIII. Name of Inspector: Jeffrey J. Jones

Agency: Pennsylvania Department of Environmental Resources  
Bureau of Waste Management

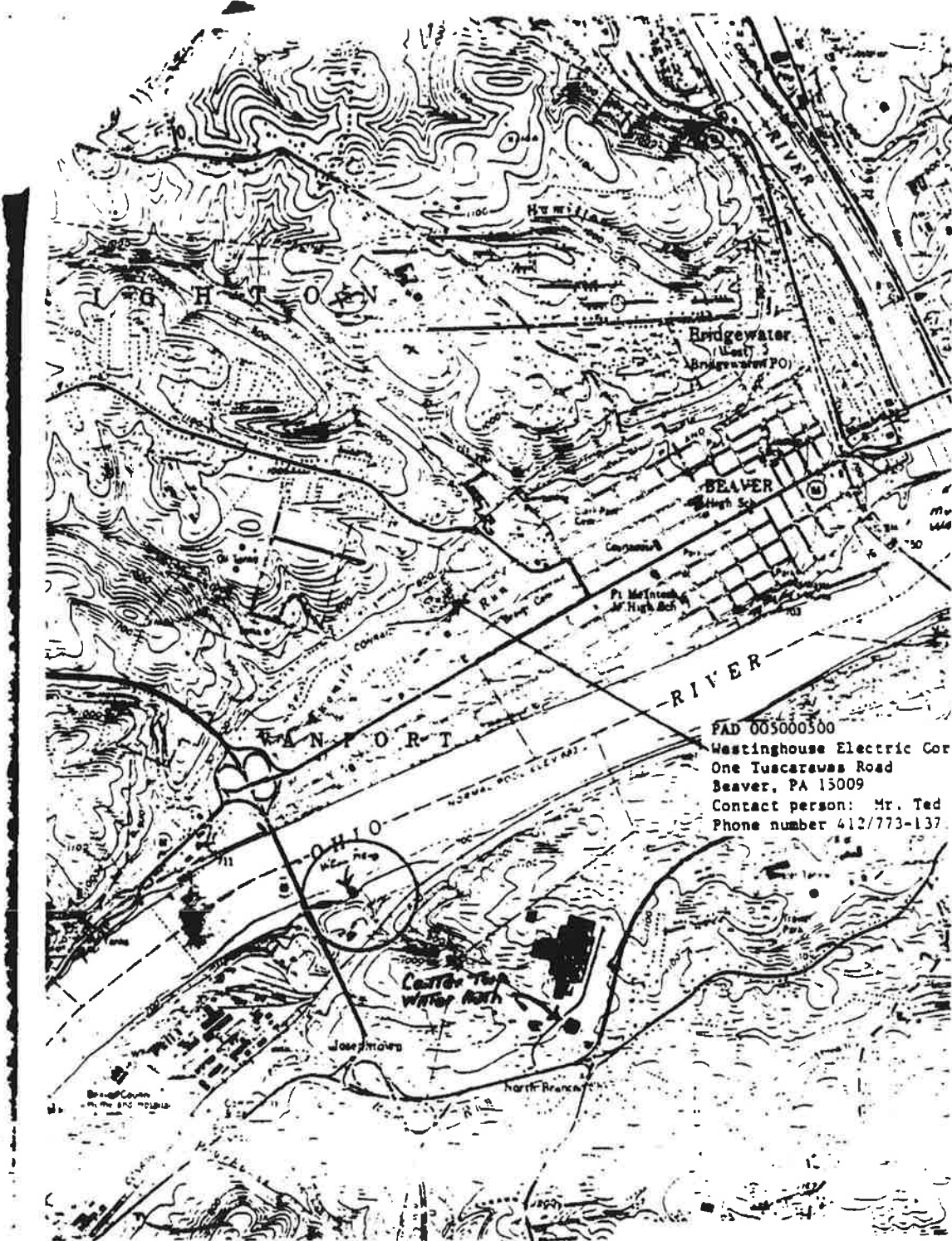
Phone No.: (412) 846-2050

Time on Site: October 21, 1987 1:00 P.M.

Weather Conditions: Cloudy 55° F.

WPL 005 3830

132/ 6117016





PAD 003000500  
 Westinghouse Electric Corp.  
 One Tuscarawas Road  
 Beaver, PA 15009  
 Contact person: Mr. Ted Kaspe  
 Phone number 412 773-1001

132/ 6117018

WRL 005 3832



STATE ROUTE 46 20 BEAVER VALLEY INTERCHANGE 1965 IV BE PENNSYLVANIA TURNPIKE 51 MI (BEAVER FALLS) ELLWOOD CITY 8 MI



MP1 005 3833

132/ 6117019