Form 4 1989

GENERATOR ANNUAL DANGEROUS WASTE REPORT

1989 Form 4

E — Blue or Black Ink Only — (Form designed for use on Elite (12 pitch) typewriter) Use spacebar between each character

You must complete Sections 1 through 4 in addition to placing the label here. Do not cross out incorrect information.

1. EPA/STATE HAZARDOUS WASTE SITE IDENTIFICATION NUMBER: WAD980738546

2. COMPANY NAME: ALASKAN COPPER WORKS

3. SITE CONTACT PERSON, AND TITLE (LAST / FIRST / TITLE): LARSEN / WAYNE / WASTE P

PHONE NUMBER: 206-623-5800 ext. 233

4. COMPANY MAILING ADDRESS: ALASKAN COPPER AND BRASS
ALASKAN COPPER WORKS
CITY / STATE / ZIP: SEATTLE / WA / 98124 - PO BOX 3546

5. SITE LOCATION ADDRESS: 628 S HANFORD
CITY / STATE / ZIP: SEATTLE / WA / 98124 -

6. SITE LOCATION COUNTY: KING

7. WASHINGTON DEPT. OF REVENUE REGISTRATION (UBI) NUMBER: (b) (6)

8. STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODES: PRIMARY 3498 / SECONDARY 3443 / OTHER 5051

9. SITE EMPLOYMENT ON DECEMBER 31, 1989: 456

FOR ECOLOGY USE ONLY

DATE RECEIVED

Init. _____ Date _____
Init. _____ Date _____

Revision ☐ Pages _____
Init. _____ Date _____

Verified _____ Date _____
Batch No. _____
☐A ☐B ☐C

FOR ECOLOGY USE ONLY

SEND TO:

DEPT. OF ECOLOGY
Hazardous Waste Section
Attn: Annual Reports
R/6 Bldg. 4
Mail Stop PV-11
Olympia, WA 98504-8711
Assistance 1-800-874-2022
(206) 459-6387

DUE DATE:

Postmarked
No Later Than

MARCH 1, 1990

WASHINGTON STATE DEPARTMENT OF ECOLOGY

10. REGULATORY STATUS CERTIFICATION—Refer to the instructions and the "Guide For Hazardous Waste Generators" (1988 or First Edition) to complete this section. Mark only one entry by placing your initials in the space provided. If none of these conditions apply to you, skip this section and complete the continuation sheet(s).

A. ☐ B. ☐ C. ☐ D. ☐ E. ☐ _____ lbs. F. ☒

11. CERTIFICATION—I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

WAYNE LARSEN — PRINT OR TYPE NAME

Wayne Larsen — SIGNATURE (must be in ink)

DATE SIGNED

AKC-0020087

Form 4 1989 **GENERATOR ANNUAL DANGEROUS WASTE REPORT** 1989 Form 4

12. YOUR EPA/STATE I.D. NUMBER	13. RECEIVING FACILITY (TSD)		14. TRANSPORTER
WAF980738546	EPA/STATE I.D. NUMBER: WAD058367152	NAME: NORTHWEST ENVIRO SERVICE ADDRESS: 1500 AIRPORT WAY SOUTH City: SEATTLE, State: WA, ZIP: 98134	EPA/STATE I.D. NUMBER: WAD058367152
			NAME: NORTHWEST ENVIRO SERVICE INC ADDRESS: 1500 AIRPORT WAY SOUTH City: SEATTLE, State: WA, ZIP: 98134

15. WASTE IDENTIFICATION LINE	A. Manifest Document Number	B. Manifest Shipment Date (MM DD YY)	C. Status	D. Physical State S=Solid L=Liquid G=Sludge M=Compressed Gas	E. Chemical Nature O=Organic I=Inorganic	F. Waste Description (see instructions)	G. Dangerous Waste Number (see instructions and WAC 173-303)	H. Waste Designation D=DW E=EHW	I. Amount of Waste	J. W E C I O G D H E T	K. For TSD Facility Use Only
1	06103	081089		L	I	OIL AMMONIUM, CHROMIUM NICKEL	F009 D002	D	300	P	
						HEAVY METAL SLUDGE	WP02				
2	06170	082289		S	I	CHROMIUM NICKEL	D007 F006 WT01	E	825	P	
3	06170	082289		S	I	CADMIUM CHROMIUM NICKEL	D007 F006 D006 WT01	E	800	D	
4	06408	092989		L	OI	OIL ETHYLINE GLYCOL CADMIUM	D006 WT02 WP02	D	375	P	
5	06408	092989		L	OI	OIL METHYLENE, CHLORIDE, XYLENE	F002 F003 WT01 WP01	E	337		
6	06408	092989		L	OI	PETROLEUM DISTILLATE ACETONE METHANOL	D001 F002 F005 WP01	E	335	P	
7	06408	092989		L	OI	OIL ETHYLENE GLYCOL	WT02 WP02	D	268		
8	06582	102389		L	OI	OIL ACETONE BENZENE N-BUTYL ALCOHOL	F003 F005 WP02	D	262	P	
9	06582	102389		L	OI	OIL XYLENE	F003 WP02	D	300	P	
10	06611	10-25-89		L	I	CHROMIC ACID CADMIUM	D002 D006 D007 WT01	E	325	P	

16. COMMENTS (Enter information by section and/or line number—see instructions).

SECTION 10 - 1989 EXCEEDED LIMIT FOR SQG BECAUSE OF BATCH CLEAN UP. AUTHORIZED BY DOE TO REMAIN SQG

Page 1 of 1

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—CONTINUATION SHEET—

Form 4

AKC-0020088

Form 4 1989

GENERATOR ANNUAL DANGEROUS WASTE REPORT

1989 Form 4

PLEASE PRINT OR TYPE — Blue or Black Ink Only — (Form designed for use on Elite (12 pitch) typewriter) Use spacebar between each character

PLACE THE LABEL HERE

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1. EPA/STATE HAZARDOUS WASTE SITE IDENTIFICATION NUMBER: WAD980738546

2. COMPANY NAME: ALASKAN COPPER WORKS

3. SITE CONTACT PERSON, AND TITLE (LAST / FIRST / TITLE): LARSEN / WAYNE / FACIL CO-ORD
PHONE NUMBER: 206-623-5800 ext. 233

4. COMPANY MAILING ADDRESS: ALASKAN COPPER AND BRASS
POST OFFICE BOX 3546
CITY / STATE / ZIP: SEATTLE / WA / 98124-

5. SITE LOCATION ADDRESS: 628 S. HANFORD
3200 6TH. SO
CITY / STATE / ZIP: SEATTLE / WA / 98134-
SEATTLE WA 98134

6. SITE LOCATION COUNTY: KING COUNTY

7. WASHINGTON DEPT. OF REVENUE REGISTRATION (UBI) NUMBER: 578-033-053

8. STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODES: PRIMARY 3498 / SECONDARY 3443 / OTHER 5051

9. SITE EMPLOYMENT ON DECEMBER 31, 1989: 456

FOR ECOLOGY USE ONLY

DATE RECEIVED

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Revision ☐ Pages _____
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Verified _____ Date _____
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Hazardous Waste Section
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Mail Stop PV-11
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Assistance 1-800-874-2022
(206) 459-6387

DUE DATE:

Postmarked
No Later Than

MARCH 1, 1990

WASHINGTON STATE DEPARTMENT OF ECOLOGY

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A. ☐ B. ☐ C. ☐ D. ☐ E. ☐ ___ lbs. F. ☒

11. CERTIFICATION—I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

PRINT OR TYPE NAME _____ SIGNATURE (must be in ink) _____ DATE SIGNED _____

AKC-0020089

Form 4 1989 **GENERATOR ANNUAL DANGEROUS WASTE REPORT** 1989 Form 4

12. YOUR EPA/STATE I.D. NUMBER	13. RECEIVING FACILITY (TSD)		14. TRANSPORTER
WAD980738546	EPA/STATE I.D. NUMBER: WAD058367152	NAME: NORTHWEST ENVIRO SERVICE ADDRESS: 1500 AIRPORT WAY South City: SEATTLE, State WA ZIP: 98134	EPA/STATE I.D. NUMBER: WAD058367152 NAME: NORTHWEST ENVIRO SERVICE INC ADDRESS: 1500 AIRPORT WAY South City: SEATTLE, State WA ZIP: 98134

15. WASTE IDENTIFICATION

LINE	A. Manifest Document Number	B. Manifest Shipment Date (MM DD YY)	C. Status	D. Physical State S=Solid L=Liquid G=Sludge M=Compressed Gas	E. Chemical Nature O=Organic I=Inorganic	F. Waste Description (see instructions)	G. Dangerous Waste Number (see instructions and WAC 173-303)	H. Waste Designation D=DW E=EHW	I. Amount of Waste	J. WEIGHT	K. For TSD Facility Use Only
1	06103	081089		L	I	OIL AMMONIUM, CHROMIUM NICKEL	F007 D002	D	300	P	
						HEAVY METAL SLUDGE	WP02				
2	06170	082289		S	I	CHROMIUM NICKEL	D007 F006 WT01	E	825	P	
3	06170	082289		S	I	CADMUM CHROMIUM NICKEL	D007 F006 D006 WT01	E	800	P	
4	06408	092989		L	OI	OIL ETHYLINE GLYCOL CADMIUM	D006 WT02 WP02	D	375	P	
5	06408	092989		L	OI	OIL METHYLENE CHLORIDE XYLENE	F002 F003 WT01 WP01	E	337		
6	06408	092989		L	OI	PETROLEUM DISTILLATE ACETONE METHANOL	D001 F002 F005 WP01	E	335	P	
7	06408	092989		L	OI	OIL ETHYLENE GLYCOL	WT02 WP02	D	268		
8	06582	102389		L	OI	OIL ACETONE BENZENE N-BUTYL ALCOHOL	F003 F005 WP02	D	262	P	
9	06582	102389		L	OI	OIL XYLENE	F003 WP02	D	300	P	
10	06611	102589		L	I	CHROMIC ACID CADMIUM	D002 D006 D007 WT01	E	325	P	

16. COMMENTS (Enter information by section and/or line number—see instructions).

SECTION 10 - 1989 EXCEEDED LIMIT FOR SQG BECAUSE OF BATCH CLEAN UP. AUTHORIZED BY DOE TO REMAIN SQG

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—CONTINUATION SHEET—

AKC-0020090

Form 4 1989 GENERATOR ANNUAL DANGEROUS WASTE REPORT 1989 Form 4

12. YOUR EPA/STATE I.D. NUMBER	13. RECEIVING FACILITY (TSD)		14. TRANSPORTER	
WAR980738546	EPA/STATE I.D. NUMBER: WAD058367152	NAME: NORTHWEST ENVIROSERVICE INC ADDRESS: 1500 AIRPORT WAY SOUTH City: SEATTLE, State: WA, ZIP: 98134	EPA/STATE I.D. NUMBER: WAD058367152	NAME: NORTHWEST ENVIROSERVICE INC ADDRESS: 1500 AIRPORT WAY SOUTH City: SEATTLE, State: WA, ZIP: 98134

15. WASTE IDENTIFICATION

LINE	A. Manifest Document Number	B. Manifest Shipment Date (MM DD YY)	C. Status	D. Physical State S=Solid L=Liquid G=Sludge M=Compressed Gas	E. Chemical Nature O=Organic I=Inorganic	F. Waste Description (see instructions)	G. Dangerous Waste Number (see instructions and WAC 173-303)	H. Waste Designation D=DW E=EHW	I. Amount of Waste	J. WECIOGDHET	K. For TSD Facility Use Only
8 1	36582	10 23 89		L	~~E~~ L	OIL XYLENE	F003 F005 WP02	D	262.5	P	
9 2	06582	10 23 89		L	~~E~~ O I	OIL ACETONE BENZENE BUTYL ALCOHOL	F003 WP02	D	300	P	
1	06103	08 10 89		L	~~E~~ O I	~~OIL AMMONIUM HYDROXIDE HEAVY METAL~~	F002 D002	E	~~300~~	P	
						SLudge.	WP02				
2 1	06170	09 22 89		S	~~E~~ I	HEAVY METAL sludge Chromium Nickel	D007 F006 WT01	E	825	P	
3 2	06170	09 22 89		S	E I	HEAVY METAL SLudge CADMIUM Chromium Nickel	D007 F006 WT01	E	800	P	
4 1	06408	09 29 89		L	~~O~~ I	OIL-ethylene glycol CADMIUM	D006 WT02 WP02	D	375	P	
5 2	06408	09 29 89		L	~~E~~ O	WAST ALKALINE, Methylene Chloride, XYLENE.	F002 F003 WT01 WP01	E	337	P	
6 3	06408	09 29 89		L	~~E~~ O	Petroleum distillates. ACETONE TOLUENE XYLENE	D001 F003 F005	E	335	P	
7 4	06408	09 29 89		L	O	~~WASHINGTON STATE dangerous~~ Liquid WASTE	WT02 WP02	D	268	P	
						OIL-ethylene glycol					
10 1	~~06664~~ 06664	10 25 89		L	~~O~~ I ~~E~~	~~WAST ACID Liquid Chromium NITRIC~~	D002 D006 D007 WT01	E	325	P	
						CROMIC ACID - Cadmium NITRIC					

16. COMMENTS (Enter information by section and/or line number—see instructions).

SECTION 10. 1989 EXCEEDED LIMIT FOR SQG BECAUSE of BATCH CLEANUP — AUTHORIZED BY DOE TO REMAIN SQG.

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—CONTINUATION SHEET—

Form 4

AKC-0020091

Form 4 1989 **GENERATOR ANNUAL DANGEROUS WASTE REPORT** 1989 Form 4

12. YOUR EPA/STATE I.D. NUMBER	13. RECEIVING FACILITY (TSD)		14. TRANSPORTER	
W A	EPA/STATE I.D. NUMBER	NAME: ADDRESS: City: , State ZIP:	EPA/STATE I.D. NUMBER	NAME: ADDRESS: City: , State ZIP:

15. WASTE IDENTIFICATION

LINE	A. Manifest Document Number	B. Manifest Shipment Date (MM DD YY)	C. Status	D. Physical State S=Solid L=Liquid G=Sludge M=Compressed Gas	E. Chemical Nature O=Organic I=Inorganic	F. Waste Description (see instructions)	G. Dangerous Waste Number (see instructions and WAC 173-303)		H. Waste Designation D=DW E=EHW	I. Amount of Waste	J. WEIGHT	K. For TSD Facility Use Only

16. COMMENTS (Enter information by section and/or line number—see instructions).

Page____ of____

AKC-0020092

Form 4 1989 **GENERATOR ANNUAL DANGEROUS WASTE REPORT** 1989 Form 4

12. YOUR EPA/STATE I.D. NUMBER	13. RECEIVING FACILITY (TSD)		14. TRANSPORTER	
WA	EPA/STATE I.D. NUMBER	NAME: ADDRESS: City: , State ZIP:	EPA/STATE I.D. NUMBER	NAME: ADDRESS: City: , State ZIP:

15. WASTE IDENTIFICATION

LINE	A. Manifest Document Number	B. Manifest Shipment Date (MM DD YY)	C. Status	D. Physical State S=Solid L=Liquid G=Sludge M=Compressed Gas	E. Chemical Nature O=Organic I=Inorganic	F. Waste Description (see instructions)	G. Dangerous Waste Number (see instructions and WAC 173-303)		H. Waste Designation D=DW E=EHW	I. Amount of Waste	J. WEIGHT	K. For TSD Facility Use Only

16. COMMENTS (Enter information by section and/or line number—see instructions).

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FORM ECY 030-28 (Rev. 11/89) -28B-1518-

—CONTINUATION SHEET—

Form 4

AKC-0020093

Form 4 1989 **GENERATOR ANNUAL DANGEROUS WASTE REPORT** 1989 Form 4

12. YOUR EPA/STATE I.D. NUMBER: WA

13. RECEIVING FACILITY (TSD) NAME:
EPA/STATE I.D. NUMBER ADDRESS:
City: , State ZIP:

14. TRANSPORTER NAME:
EPA/STATE I.D. NUMBER ADDRESS:
City: , State ZIP:

15. WASTE IDENTIFICATION

LINE	A. Manifest Document Number	B. Manifest Shipment Date (MM DD YY)	C. Status	D. Physical State S=Solid L=Liquid G=Sludge M=Compressed Gas	E. Chemical Nature O=Organic I=Inorganic	F. Waste Description (see instructions)	G. Dangerous Waste Number (see instructions and WAC 173-303)		H. Waste Designation D=DW E=EHW	I. Amount of Waste	J. WEIGHT	K. For TSD Facility Use Only

16. COMMENTS (Enter information by section and/or line number—see instructions).

FORM ECY 030-28 (Rev. 11/89) -28B-1518-

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AKC-0020094